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Proposed Attorneys for
The Roman Catholic Bishop of Santa Rosa

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF CALIFORNIA
SANTA ROSA DIVISION

In re:

THE ROMAN CATHOLIC BISHOP OF
SANTA ROSA,

Debtor In Possession.

CASE NO. 23-10113

Chapter 11

Judge: Hon. Charles Novack

**GLOBAL NOTES AND
STATEMENT OF METHODOLOGY, LIMITATIONS,
AND DISCLAIMERS REGARDING THE DEBTOR'S SCHEDULES
OF ASSETS AND LIABILITIES AND STATEMENT OF FINANCIAL AFFAIRS**

The Roman Catholic Bishop of Santa Rosa, as Debtor and Debtor in Possession in the above-captioned chapter 11 case (the "Debtor"), has filed Schedules of Assets and Liabilities (the "Schedules") and a Statement of Financial Affairs (the "Statement") with the United States Bankruptcy Court for the Northern District of California (the "Bankruptcy Court"). The Debtor, with the assistance of its legal and financial advisors, prepared the Schedules and Statement in accordance with section 521 of title 11 of the United States Code (the "Bankruptcy Code") and Rule 1007 of the Federal Rules of Bankruptcy Procedure. These Schedules and Statement are unaudited.

These Global Notes and Statement of Methodology, Limitations, and Disclaimers 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 Statement. The Global Notes should be referred to, considered, and reviewed in connection with any review of the Schedules and Statement.

GLOBAL NOTICE RE DEBTOR'S SCHEDULES AND SOFA

1 Deacon Joe Oberting has signed the Schedules and Statement. Dn. Oberting serves as the
2 Debtor's Chief Financial Officer and is an authorized signatory of the Debtor. In reviewing and
3 signing the Schedules and Statement, Dn. Oberting has necessarily relied upon the efforts,
4 statements, advice, and representations of personnel of the Debtor and the Debtor's legal and
5 financial advisors. Given the scale of the Debtor's operations covered by the Schedules and
6 Statement, Dn. Oberting has not (and could not have) personally verified the accuracy of each
7 statement and representation contained in the Schedules and Statement, including, but not limited
8 to, statements and representations concerning amounts owed to creditors, classification of such
9 amounts, and individual creditor address information.

10 In preparing the Schedules and Statement, the Debtor relied upon information derived
11 from its books and records that was available at the time of such preparation. Although the Debtor
12 has made reasonable efforts to ensure the accuracy and completeness of the Schedules and
13 Statement, the discovery of conflicting, revised, or subsequent information may result in material
14 changes to the Schedules and Statement. As a result, inadvertent errors or omissions may exist.
15 Accordingly, the Debtor and its officers, agents, attorneys, financial advisors, and restructuring
16 advisors do not guarantee or warrant the accuracy or completeness of the data that is provided in
17 the Schedules and Statement and shall not be liable for any loss or injury arising out of, or caused
18 in whole or in part by, the acts, errors, or omissions, whether negligent or otherwise, in procuring,
19 compiling, collecting, interpreting, reporting, communicating, or delivering the information
20 contained in the Schedules and Statement.

21 For the avoidance of doubt, the Debtor and its agents, attorneys, financial advisors, and
22 restructuring advisors hereby reserve all of their rights to amend, supplement, or otherwise modify
23 the Schedules and Statement as may be necessary or appropriate, but expressly do not undertake
24 any obligation to update, supplement, modify, revise, or re-categorize the information provided in
25 the Schedules and Statement or to notify any third party should the information be updated,
26 supplemented, modified, revised, or re-categorized, except as required by applicable law, rules or
27 an order of the Bankruptcy Court.

28 In no event shall the Debtor or its trustees, officers, agents, attorneys, financial advisors,
and restructuring advisors be liable to any third party for any direct, indirect, incidental,
consequential, or special damages (including, but not limited to, damages arising from the
disallowance of a potential claim against the Debtor or damages to business reputation, lost
business, or lost profits), whether foreseeable or not and however caused, even if the Debtor or its
trustees, officers, agents, attorneys, financial advisors, and restructuring advisors are advised of
the possibility of such damages.

The Schedules and Statement may contain specific notes that supplement these Global
Notes. The fact that the Debtor has prepared Global Notes or specific notes with respect to one
part of the Schedules and Statement and not another should not be interpreted as a decision by the
Debtor to exclude the applicability of such Global Notes or specific notes to any other parts of the
Schedules and Statement, as appropriate.

Disclosure of information in any of the Schedules, Statement, or exhibits or attachments
to the Schedules and Statement, even if incorrectly placed, shall be deemed to be disclosed in the
correct Schedules, Statement, exhibits, or attachments.

Global Notes and Overview of Methodology

1. **Description of Case.** On March 13, 2023 (the "Petition Date"), the Debtor filed a
voluntary petition for relief under chapter 11 of the Bankruptcy Code. The Debtor
continues to operate and pursue its religious, non-profit mission, and manage its properties
and affairs as a debtor in possession pursuant to sections 1107(a) and 1108 of the
Bankruptcy Code.

2. **Reservations and Limitations.** Reasonable efforts have been made to prepare and file complete and accurate Schedules and Statement. However, as noted above, inadvertent errors or omissions may exist. The Debtor reserves all rights to amend, supplement, or otherwise modify the Schedules and Statement from time to time, in all respects, as may be necessary or appropriate but do not undertake any obligation to do so, except as required by applicable law. Nothing contained in the Schedules and Statement constitutes a waiver of any of the Debtor's rights or an admission of any kind with respect to this chapter 11 case, including, but not limited to, any claims against the Debtor, any defenses the Debtor may have, any rights or claims of the Debtor against any third party, or any issues involving equitable or structural subordination, or defenses or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code or any other relevant applicable bankruptcy or non-bankruptcy laws related to the recovery of assets or the avoidance of transfers. Any specific reservation of rights contained elsewhere in these Global Notes does not limit in any respect the general reservation of rights contained in this paragraph.

(a) **No Admission.** Nothing contained in the Schedules and Statement or the Global Notes is intended to be, or should be, construed as an admission or stipulation of the validity of any claim against the Debtor or any assertion made, or a waiver of the Debtor's right to dispute any such claim or assert any cause of action or defense against any party.

(b) **"As of" Information Date.** Asset values presented herein, except as expressly noted otherwise, represent the asset information of the Debtor at net book value as of the Petition Date. The Debtor asserts that there are no meaningful or material changes to these book values between the date of the final fiscal month and the Petition Date. Further, any amounts ultimately realized from Debtor assets may vary from net book value (or whatever value was ascribed) and such variances may be material. Accordingly, the Debtor reserves all its rights to amend or adjust the value of any asset set forth herein. Liability information presented herein, except as expressly noted otherwise, represents the outstanding value as of the Petition Date. Furthermore, certain asset and liability amounts identified as "unknown," "undetermined," "disputed," "contingent," and/or "unliquidated" are included herein as "undetermined" values and, thus, ultimate total assets and liabilities may differ materially from the amounts stated in the Schedules and Statement and any respective total or subtotal amounts.

(c) **Recharacterization and Classifications.** Notwithstanding that the Debtor has made reasonable efforts to correctly characterize, classify, categorize, or designate certain claims, assets, executory contracts, unexpired leases, and other items reported in the Schedules and Statement, the Debtor nonetheless may have improperly characterized, classified, categorized, or designated certain items. The Debtor thus reserves all rights to recharacterize, reclassify, recategorize, alter the description of, redesignate, add, or delete items reported in the Schedules and Statement as is necessary and appropriate.

For the avoidance of doubt, listing (i) a claim on Schedule D as "secured," (ii) a claim on Schedule E/F as "priority" or "unsecured," or (iii) a contract or lease on Schedule G as "executory" or "unexpired" does not constitute an admission by the Debtor with respect to any legal rights associated with such claim, contract, or lease or a waiver of the Debtor's right to recharacterize or reclassify such claim, contract, or lease.

(d) **Claims Description.** Any failure to designate a claim or amount on the Debtor's Schedules and Statement as "disputed," "contingent," or "unliquidated" does not constitute an admission by the Debtor that such claim or amount is not "disputed,"

“contingent,” or “unliquidated.” The Debtor reserves all rights to dispute, or assert offsets or defenses to, any claim reflected on its Schedules and Statement on any grounds, including, without limitation, any defenses relating to amount, liability, priority, status, or classification, or to otherwise subsequently designate any claim as “disputed,” “contingent,” or “unliquidated” or object to the extent, validity, enforceability, priority, or avoidability of any claim. Moreover, listing a claim does not constitute an admission of liability by the Debtor. The Debtor reserves all rights to amend its Schedules and Statement as necessary and appropriate, including, but not limited to, with respect to claim descriptions and designations.

(e) **Estimates and Assumptions.** The preparation of the Schedules and Statement required the Debtor to make certain estimates and assumptions with respect to the reported amounts, including, but not limited to, amounts of assets and liabilities, the amount of contingent assets and contingent liabilities on the date of filing the Schedules and Statement, and the reported amounts of revenues and expenses during the applicable reporting periods. Actual results could differ materially from such estimates. The Debtor reserves all rights to amend the Schedules and Statement to reflect changes in those estimates or assumptions.

(f) **Causes of Action.** Despite reasonable efforts, the Debtor may not have identified and/or set forth all its causes of action and similar items (collectively, the “Causes of Action”) (filed or potential) against third parties as assets in its Schedules and Statement, including, without limitation, avoidance actions arising under chapter 5 of the Bankruptcy Code and actions under other relevant bankruptcy and non-bankruptcy laws related to the recovery of assets or avoidance of transfers. The Debtor reserves the right to amend its Schedules and Statement to add, delete, or otherwise modify any information relating to its Causes of Action.

The Debtor further reserves all of its rights with respect to all of its Causes of Action, including, without limitation, all rights relating to any: (i) controversy; (ii) right of setoff or recoupment; (iii) cross claim; (iv) counterclaim; (v) claim arising from a lease or contract; (vi) claim for the breach of any duty imposed by law or in equity; and (vii) demand, right, action, lien, indemnity, guaranty, suit, obligation, liability, damage, judgment, account, defense, power, privilege, license, and franchise of any kind or character whatsoever. The Debtor’s reservation of rights with respect to the Causes of Action remains applicable, regardless of whether such Causes of Action are known, unknown, fixed or contingent, matured or unmatured, suspected or unsuspected, liquidated or unliquidated, disputed or undisputed, secured or unsecured, assertible directly or derivatively, whether arising before, on, or after the Petition Date, in contract or in tort, in law or in equity, or pursuant to any other applicable theory of law. Neither the Global Notes nor the Schedules and Statement constitute a waiver of any claim or Cause of Action or, in any way, prejudice or impair the assertion of any claim or Cause of Action.

(g) **Intellectual Property Rights.** Exclusion of any intellectual property should not be construed as an admission that such intellectual property rights have been abandoned, terminated, or otherwise expired by their terms, or assigned or otherwise transferred pursuant to a sale, acquisition, or other transaction. Conversely, inclusion of certain intellectual property should not be construed as an admission that such intellectual property rights have not been abandoned, terminated, or otherwise expired by their terms, or assigned or otherwise transferred pursuant to a sale, acquisition, or other transaction.

In addition, although the Debtor has made diligent efforts to list only its owned

GLOBAL NOTICE RE DEBTOR’S SCHEDULES AND SOFA

intellectual property, in certain instances, another entity may be the actual owner of certain intellectual property listed in the Schedules and Statement. The Debtor reserves all of its rights with respect to the legal status of its intellectual property rights.

(h) **Executory Contracts and Unexpired Leases.** Although the Debtor has made reasonable efforts to identify the correct legal entities that are party to each of the executory contracts and unexpired leases listed on the Schedules and Statement, in certain instances, the Debtor may have incorrectly identified parties, including incorrectly identifying itself as a party, to the executory contracts and unexpired leases. The Debtor reserves all of its rights with respect to the named parties associated with its executory contracts and unexpired leases, including, without limitation, the right to amend Schedule G.

(i) **Employee and Survivor Information.** Where applicable, the Debtor has redacted the identities and/or personal contact information of holders of abuse claims and individuals involved in litigation relating to abuse claims in accordance with the Interim Order on Debtor's Motion to Establish Notice Procedures and to File Confidential Information Under Seal [Docket No. 32].

Contemporaneously with the filing of the redacted version of the Schedules and Statement, the Debtor has filed a sealed version and provided the Office of the United States Trustee with unredacted copies of the Schedules and Statement. In addition, the Debtor will provide unredacted copies to the official committee of unsecured creditors in this chapter 11 case.

(j) **Insiders.** In the circumstance where the Schedules and Statement require information regarding "insiders," the Debtor has included information with respect to the individuals who the Debtor believes may be included in the definition of "insider" set forth in section 101(31) of the Bankruptcy Code during the relevant time periods. Such individuals may no longer serve in such capacities.

The individuals identified as "insiders" have been included for informational purposes only. The Debtor does not take any position and reserves all rights with respect to: (i) such person's influence over and/or ability to control the Debtor; (ii) the management responsibilities or functions of such individual; (iii) the decision making or corporate authority of such individual; or (iv) whether such individual could successfully argue that he or she is not an "insider" under applicable law or with respect to any theories of liability or for any other purpose. Further, the inclusion of a party as an "insider" is not an acknowledgment or concession that such party is an "insider" under applicable bankruptcy law.

3. **Methodology.**

(a) **Basis of Presentation.** Except as otherwise stated, the Schedules and Statement 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 to the financial statements of the Debtor. The Schedules and Statement contain unaudited information that is subject to further review and potential material adjustment. The Schedules and Statement reflect the Debtor's reasonable efforts to report the assets and liabilities of the Debtor.

(b) **Duplication.** Certain of the Debtor's assets, liabilities, and prepetition payments may properly be disclosed in response to multiple parts of the Schedules and Statement. To the extent these disclosures would be duplicative, the Debtor may

only list such assets, liabilities, and prepetition payments once.

(c) **Net Book Value.** In certain instances, current market valuations for individual items of property and other assets are neither maintained by, nor readily available to, the Debtor. Accordingly, unless otherwise indicated, the Debtor's Schedules and Statement reflect approximate net book values as of the Petition Date, which may not reflect depreciation expense for the most recently ended fiscal year. Market values may vary—at times materially—from net book values. The Debtor believes that it would be an inefficient use of estate assets for the Debtor to obtain the current market values of its property and other assets. Accordingly, the Debtor has indicated in the Schedules and Statement that the values of certain assets and liabilities are undetermined. Also, assets that have been fully depreciated are listed in these Schedules and Statement with a zero-dollar value, as such assets have no net book value. The omission of an asset from the Schedules and Statement does not constitute a representation regarding the ownership of such asset and any such omission does not constitute a waiver of any rights of the Debtor with respect to such asset. Nothing in the Schedules and Statement shall be, or shall be deemed to be, an admission that the Debtor was solvent or insolvent as of the Petition Date or at any other time.

(d) **Property and Equipment.** Unless otherwise indicated, owned property and equipment are valued at net book value. The Debtor may lease furniture, fixtures, and equipment from certain lessors. To the extent possible, any such leases are listed in the Schedules. Nothing in the Schedules is, or should be construed as, an admission as to the determination of the legal status of any lease (including whether any lease is a true lease or a financing arrangement), and the Debtor reserves all rights with respect thereto.

(e) **Allocation of Liabilities.** The Debtor allocated liabilities between the prepetition and postpetition periods based on the information and research conducted in connection with the preparation of the Schedules and Statement. As additional information becomes available and further research is conducted, the allocation of liabilities between the prepetition and postpetition periods may change. Accordingly, the Debtor reserves all rights to amend, supplement, or otherwise modify the Schedules and Statement as is necessary or appropriate.

The liabilities listed on the Schedules do not reflect any analysis of claims that may arise under section 503(b)(9) of the Bankruptcy Code. Accordingly, the Debtor reserves all of its rights to dispute or challenge (i) the validity of any claims asserted under section 503(b)(9) of the Bankruptcy Code or (ii) the characterization of the structure of any such transaction or any document or instrument related to any creditor's claim.

(f) **Undetermined Amounts.** The description of an amount as "undetermined," "unknown," or "unliquidated" is not intended to reflect upon the materiality of such amount.

(g) **Unliquidated Amounts.** Amounts that could not be determined by the Debtor are scheduled as "unliquidated."

(h) **Totals.** All totals that are included in the Schedules and Statement represent totals of all known amounts. To the extent such totals include unknown or undetermined amounts, the actual total may be different than the listed total.

(i) **Credits and Adjustments.** The claims of individual creditors for, among other

things, goods, products, or services are listed as the amounts entered on the Debtor's books and records and may either (i) not reflect credits, allowances, or other adjustments due from such creditors to the Debtor or (ii) be net of accrued credits, allowances, or other adjustments that are actually owed by a creditor to the Debtor. The Debtor reserves all its rights with regard to such credits, allowances, or other adjustments, including, but not limited to, the right to amend, supplement, or otherwise modify the Schedules, assert claim objections and/or setoffs with respect to such credits, allowances, or other adjustments, or apply such credits, allowances, or other adjustments in the ordinary course of business on a postpetition basis.

(j) **Claims of Certain Unaffiliated Catholic Entities.** The listing of any amounts with respect to such transfers and receivables is not and should not be construed as a determination or admission as to the validity of such receivables. For the avoidance of doubt, the Debtor reserves all rights, claims, and defenses in connection with any and all related entity receivables and payables, including, but not limited to, with respect to the characterization of related entity claims and loans. The Debtor takes no position in these Schedules and Statement as to whether any such amounts would be allowed as a claim, or not allowed at all. The listing of these amounts is not necessarily indicative of the ultimate recovery, if any, on any asset account. The Debtor reserves all rights to later change the amounts, characterization, classification, categorization, or designation of related entity accounts reported in the Schedules and Statement.

(k) **Charitable Donations.** The Debtor occasionally receives funds from individuals and other Catholic entities which funds are remitted to the Debtor for the purpose of supporting charitable endeavors of the Debtor. The Debtor holds such funds in its accounts until it makes donations to other charitable endeavors. The amounts remitted and the remitting entities are not specifically reflected on the Schedules and Statement. The Debtor reserves all rights with respect to any claim(s) that might be asserted as to these amounts remitted to the Debtor.

(l) **Guarantees and Other Secondary Liability Claims.** The Debtor is not aware of any guarantees in its executory contracts, unexpired leases, and other such agreements. The Debtor may have inadvertently omitted guarantees embedded in its contractual agreements and may identify guarantees as it continues to review its books and records and contractual agreements. The Debtor reserves its rights, but is not required, to amend, supplement, or otherwise modify the Schedules and Statement if any guarantees are identified.

(m) **Excluded Assets and Liabilities.** The Debtor may have excluded certain categories of assets and liabilities from the Schedules and Statement, including, but not limited to: certain deferred charges, accounts, or reserves recorded only for purposes of complying with the requirements of GAAP; goodwill and other intangibles; deferred revenue accounts; and certain accrued liabilities including, but not limited to, accrued salaries and employee benefits. The Debtor also has not attempted to anticipate rejection damage claims of counterparties to executory contracts and unexpired leases that may arise out of future contract or lease rejections. Other immaterial assets and liabilities may also have been excluded.

(n) **Liens.** The inventories, property, and equipment listed in the Schedules and Statement are presented without consideration of any liens.

(o) **Currency.** Unless otherwise indicated, all amounts are reflected in U.S. dollars.

- (p) **Setoffs.** The Debtor may incur setoffs and net payments in the ordinary course of business. Although such setoffs and other similar rights may have been accounted for when scheduling certain amounts, these ordinary course setoffs are not independently accounted for and, as such, are or may be excluded from the Schedules and Statement. In addition, some amounts listed in the Schedules and Statement may have been affected by setoffs or nettings by third parties of which the Debtor is not yet aware. The Debtor reserves all rights to challenge any setoff and/or recoupment rights that may be asserted.

4. **Specific Disclosures with Respect to the Debtor's Schedules A/B**

- (a) **Part 1.** Details with respect to the Debtor's cash management system and bank accounts are provided in the Motion for Order (1) Authorizing Continued Use of Existing Cash Management System, Operational Bank Accounts, and Related Investment Account, (2) Excusing Compliance with Section 345(b), and (3) Authorizing Continued Use of Current Investment Policy at Dkt. No. 5 (the "Cash Management Motion"). Amounts identified in Item 3 of Part 1 reflect actual amounts in the respective accounts as of the Petition Date and may vary from the amounts currently reflected in the Debtor's books and records.

As described in the Cash Management Motion, there are a number of bank accounts in the Debtor's name that exclusively hold funds subject to donor restrictions or on behalf of others. These accounts are listed in response to Item 3 of Part 1. While the Debtor and its professionals have used their good faith best efforts to determine which accounts contain funds that are subject to donor restrictions or held on behalf of others, the review of the Debtor's records is ongoing and may reveal additional restrictions or information.

- (b) **Part 3.** The Debtor's accounts receivable balances include amounts it treats as receivable from parishes on account of assessments on parish total revenues. Because parishes are not obligated to pay under applicable law, the Debtor may not have a vested property interest in receivable amounts. The Debtor reserves its rights with respect to the appropriate classification of such assessments.

- (c) **Part 9.** For the Debtor's owned real property, such owned real estate is reported at book value as of the Petition Date. The Debtor may have listed certain assets as real property when such assets are in fact personal property, or the Debtor may have listed certain assets as personal property when such assets are in fact real property. Buildings and land improvements are listed on Schedule A/B independent of whether the real property to which the building or land improvement is connected is Debtor-owned property. The Debtor reserves all of its rights to re-categorize and/or re-characterize such asset holdings to the extent the Debtor determines that such holdings were improperly listed.

Further, the Debtor has listed all property that it holds in trust for the benefit of another entity in the Statement at Part 11, Question 21. The Debtor is civilly incorporated as The Roman Catholic Bishop of Santa Rosa, which is a California corporation sole. The Debtor holds only legal title to certain real and personal property in trust for the benefit of the parties listed under California trust law. In addition, the Code of Canon Law of the Roman Catholic Church requires that each entity within the Diocese of Santa Rosa (e.g., parish, institution) is a separate entity within the Church. Except as otherwise stated, the property listed in the Statement at Part 11, Question 21 is held for the benefit of the parishes and other entities of the Diocese and is not property of the estate.

- (d) **Part 10.** Because the Debtor does not attribute any book value to its donor lists and other intellectual property, the Debtor has listed these assets with undetermined values.

5. **Schedule E/F**

- (a) **Part 1.** The Court has authorized the Debtor, in its discretion, to pay certain liabilities that may be entitled to priority under the applicable provisions of the Bankruptcy Code. For example, the Interim Order Authorizing Debtor to Pay Prepetition Wages, Salaries and Employee Expenses, to Pay Accrued Employee Benefits and Taxes, and Directing Banks to Honor Payroll and Expense Checks [Docket No. 30] authorized the Debtor to pay or honor certain prepetition obligations with respect to employee wages, salaries and other compensation, reimbursable employee expenses and similar benefits. To the extent such Claims have been paid or may be paid pursuant to further Court order, they may not be included on Part 1 of Schedule E/F.

- (b) **Part 2.** The Debtor has used reasonable efforts to report all non-priority general unsecured Claims against the Debtor on Part 2 of Schedule E/F based upon the Debtor's existing books and records as of the Petition Date. The Claims of individual creditors for, among other things, products, goods, or services are listed as either the lower of the amounts invoiced by such creditor or the amounts entered on the Debtor's books and records and may not reflect credits or allowances due from such creditors to the applicable Debtor. The Debtor reserves all of its rights with respect to any such credits and allowances, including the right to assert objections and/or setoffs with respect to the same. Part 2 does not include certain deferred charges, deferred liabilities, accruals, or general reserves. Such amounts are, however, reflected on the Debtor's books and records as required in accordance with GAAP. Such accruals are general estimates of liabilities and do not represent specific Claims as of the Petition Date.

The Claims listed on Part 2 of Schedule E/F arose or were incurred on various dates. In certain instances, the date on which a Claim arose is an open issue of fact. Determining the date upon which each Claim on Part 2 was incurred or arose would be unduly burdensome and cost prohibitive. As a result, the Debtor has not listed a date for certain Claims listed on Part 2.

Part 2 of Schedule E/F does not include obligations owed by third party insurance companies or other coverage providers on account of abuse-related liabilities, including, without limitation, defense costs due and owing to litigation defense counsel and related professionals.

6. **Specific Disclosures with Respect to the Debtor's Statement**

- (a) **Statement 3.** Statement 3 includes any disbursement or other transfer made by the Debtor except for those made to insiders (which payments appear in Statement 4), and for gifts or charitable contributions (which payments appear in Statement 9). Payments to bankruptcy professionals are shown on both Statement 3 and 11. Disbursements made on account of multiple invoices may be reflected as a single payment. For additional detail on the Debtor's cash management system, see the Cash Management Motion. All transfers in Part 2, Question 3 of the Statement are listed as of the payment date.

- (b) **Statement 7.** Statement 7 lists only those legal disputes and administrative proceedings that are formally recognized by an administrative, judicial, or other

1 adjudicative forum as of the Petition Date. The Debtor has anonymized
2 confidential matters in response to this question where disclosure would violate
3 certain laws or where the investigating jurisdiction has requested confidentiality.
4 Additionally, any information listed in Statement 7 shall not be a binding
5 admission of the Debtor's liabilities with respect to any of the suits and proceedings
6 identified therein. The Debtor reserves all rights with respect to the suits and
7 administrative proceedings listed in Statement 7, and any claims filed in relation
8 to such suits and administrative proceedings.

9 (c) **Statement 9.** Certain de minimis, non-cash, gifts that are not reported or tracked
10 centrally may have been excluded. Certain gifts included in this response were
11 paid with funds given to the Debtor for the sole purposes of acting as a conduit to
12 the recipient, and do not represent the transfer of Debtor assets.

13 (d) **Statement 11.** All payments for services of the proposed retained professionals in
14 the chapter 11 case made within one year immediately preceding the Petition Date
15 are listed on the Debtor's response to Statement 11. Additional information
16 regarding the Debtor's retention of professional service firms is more fully
17 described in individual retention applications and related orders.

18 (e) **Statement 21.** The Debtor is civilly incorporated as The Roman Catholic Bishop
19 of Santa Rosa, which is a California corporation sole. The Debtor holds only legal
20 title to the real and personal property listed in response to Part 11, Statement 21 in
21 trust for the benefit of the party listed under California trust law. In addition, the
22 Code of Canon Law of the Roman Catholic Church requires that each entity within
23 the Diocese of Santa Rosa (e.g., parish, institution) is a separate entity within the
24 Church. Except as otherwise stated, the property listed in response to Part 11,
25 Statement 21 is held for the benefit of the parishes and other entities of the Diocese
26 of Santa Rosa and is not property of the estate.

27 (f) **Statements 22–24.** The Debtor made reasonable efforts to identify all applicable
28 environmental information as required by Part 12. These efforts included
reviewing the Debtor's environmental records and incorporating the historical
knowledge of the Debtor into the Schedules and Statement to the extent applicable
and practicable.

(g) **Statement 30.** Where applicable, the Debtor has included a comprehensive
response to Statement 30 in Statement 4.

Dated: April 6, 2023

FELDERSTEIN FITZGERALD
WILLOUGHBY PASCUZZI & RIOS LLP

By: /s/ Paul J. Pascuzzi

PAUL J. PASCUZZI

Proposed Attorneys for The Roman
Catholic Bishop of Santa Rosa

Fill in this information to identify the case:

Debtor name: The Roman Catholic Bishop of Santa Rosa

United States Bankruptcy Court for the: Northern District of California

Case number (if known): 23-10113

☐ 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	\$1,834,166.00
1b. Total personal property: Copy line 91A from Schedule A/B	\$15,252,653.22
1c. Total of all property: Copy line 92 from Schedule A/B	\$17,086,819.22

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	\$0.00
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	\$67,867.10
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	+ \$1,427,851.04
4. Total liabilities Lines 2 + 3a + 3b	\$1,495,718.14

Fill in this information to identify the case:**Debtor name:** The Roman Catholic Bishop of Santa Rosa**United States Bankruptcy Court for the:** Northern District of California**Case number (if known):** 23-10113☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

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

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

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

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

2.1. PETTY CASH ON HAND \$100.00

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

	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
3.1.	WEST AMERICA BANK 111 SANTA ROSA AVENUE SANTA ROSA CA 95404	CHECKING	8396	\$325,814.00
3.2.	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	CHECKING	7582	\$187,800.00
3.3.	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	SAVING	4305	\$187,761.00
3.4.	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	CHECKING	5567	\$501,386.00
3.5.	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	SAVING	4306	\$325,273.90

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
3.6.	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	CHECKING	1339	\$109,398.82
3.7.	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	SAVING	3724	\$451,914.25
3.8. ¹	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	CHECKING	5152	\$383,260.94
3.9. ¹	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	SAVING	4308	\$92,261.37
3.10. ¹	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	CHECKING	7632	\$185,305.69
3.11. ¹	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	SAVING	4732	\$349,797.61
3.12. ¹	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	CHECKING	5160	\$34,403.65
3.13. ¹	WELLS FARGO NW 7091 P.O. BOX 1450 MINNEAPOLIS MN 55485	SAVING	4731	\$48,554.34
3.14.	MERRILL LYNCH 555 CAPITOL MALL SUITE 1400 SACRAMENTO CA 95814	BROKERAGE	4A15	\$32,968.30
3.15. ²	MISSION DIOCESE FUND, LLC 150 S WACKER DRIVE SUITE 2000 CHICAGO IL 60606	SAVING	1002	\$1,510,534.58
3.16. ³	PNC P.O. BOX 645861 PITTSBURGH PA 15264-5256	SAVING	0465	\$7,625,424.30
3.17. ¹	SUMMIT STATE BANK 500 BICENTENNIAL WAY SANTA ROSA CA 95403	CHECKING	1951	\$1,000.00
3.18. ¹	SUMMIT STATE BANK 500 BICENTENNIAL WAY SANTA ROSA CA 95403	CHECKING	9518	\$8,136.92
3.19. ¹	SUMMIT STATE BANK 500 BICENTENNIAL WAY SANTA ROSA CA 95403	CHECKING	1944	\$311,929.99
3.20. ¹	US BANK 800 NICOLLET MALL MINNEAPOLIS MN 55402	CHECKING	5400	\$230,245.89

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
3.21. ²	SUMMIT STATE BANK	RESTRICTED MANAGED ACCOUNT	6427	\$551,612.00
3.22. ²	SUMMIT STATE BANK	RESTRICTED MANAGED ACCOUNT	2796	\$250,000.00

¹ACCOUNT HOLDS RESTRICTED FUNDS²01/31/23 LAST REPORTED BALANCE³02/28/23 LAST REPORTED BALANCE**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.

\$13,704,883.55**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.	_____	\$ _____

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.	WAGES, BENEFITS AND PAYROLL TAXES ADRIAN PETERSON	\$1,988.64
8.2.	WAGES, BENEFITS AND PAYROLL TAXES ANA MARIA ALVEREZ	\$387.54
8.3.	WAGES, BENEFITS AND PAYROLL TAXES ANNETTE CARROLL	\$269.13
8.4.	RETAINER BALANCE B. RILEY ADVISORY SERVICES	\$58,590.00
8.5.	WAGES, BENEFITS AND PAYROLL TAXES CARMEN AAENSON	\$348.79
8.6.	WAGES, BENEFITS AND PAYROLL TAXES CHRISTOPHER LYFORD	\$1,030.18
8.7.	WAGES, BENEFITS AND PAYROLL TAXES DENNIS PURIFICACION	\$1,047.73

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
8.8.	RETAINER BALANCE DONLIN RECANO & COMPANY	\$4,020.00
8.9.	WAGES, BENEFITS AND PAYROLL TAXES DOUGLAS BLUM	\$1,159.09
8.10.	RETAINER BALANCE FELDERSTEIN FITZGERALD WILLOUGHBY PASCUZZI & RIOS LLP	\$95,000.00
8.11.	RETAINER BALANCE FOLEY & LARDNER LLP	\$50,000.00
8.12.	WAGES, BENEFITS AND PAYROLL TAXES JEFFREY KEYES	\$398.18
8.13.	WAGES, BENEFITS AND PAYROLL TAXES JOHN STORM	\$208.20
8.14.	WAGES, BENEFITS AND PAYROLL TAXES JOSEPH OBERTING	\$1,459.03
8.15.	WAGES, BENEFITS AND PAYROLL TAXES KELLY RIGHETTI	\$128.86
8.16.	WAGES, BENEFITS AND PAYROLL TAXES KIRSTINE MERRIHEW	\$267.10
8.17.	WAGES, BENEFITS AND PAYROLL TAXES LORI NORCIA	\$1,122.70
8.18.	WAGES, BENEFITS AND PAYROLL TAXES LYNNE PETER	\$670.12
8.19.	WAGES, BENEFITS AND PAYROLL TAXES MARINA LEMUS	\$468.18
8.20.	WAGES, BENEFITS AND PAYROLL TAXES NICK LYNN	\$734.71
8.21.	WAGES, BENEFITS AND PAYROLL TAXES RACHAEL DE LA O	\$467.48
8.22.	HEALTH INSURANCE RETA BAS	\$19,582.26
8.23.	WAGES, BENEFITS AND PAYROLL TAXES RUSSELL FERREIRA	\$1,144.35
8.24.	WAGES, BENEFITS AND PAYROLL TAXES SAMUEL BROWN	\$480.00
8.25.	DEACON RETREAT SAN DAMIANO RETREAT	\$5,580.00
8.26.	RETAINER BALANCE SHAPIRO, GALVIN, SHAPIRO & MORAN	\$141,853.00

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
8.27.	WAGES, BENEFITS AND PAYROLL TAXES STEPHEN MORRIS	\$1,003.41
8.28.	WAGES, BENEFITS AND PAYROLL TAXES SUSIE WILLIAM	\$736.33
8.29.	DEACON RETREAT VALLOMBROSA CENTER	\$6,800.00
8.30.	RETAINER BALANCE WEINSTEIN & NUMBERS, LLP	\$100,000.00
8.31.	WAGES, BENEFITS AND PAYROLL TAXES WILMA GUEVARRA	\$563.66

9. Total of part 2

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

\$497,508.67**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

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

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

	Face amount	Doubtful or uncollectible accounts		
11a. ¹	90 days old or less:	\$790,167.00	- \$ _____	= → \$790,167.00
	Face amount	Doubtful or uncollectible accounts		
11b. ¹	Over 90 days old:	\$603,500.00	- \$384,198.00	= → \$219,302.00

12. Total of part 3

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

\$1,009,469.00¹AMOUNTS AS OF 1/25/23**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. _____ % _____ \$ _____

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

Describe

16.1. _____ \$ _____

17. Total of part 4

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

\$0.00

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**☒ No. Go to Part 6.☐ Yes. Fill in the information below.

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

22.1. _____ \$ _____

23. Total of part 5

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

\$0.00

24. Is any of the property listed in Part 5 perishable?☐ No☐ Yes**25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes Book value: \$ _____ 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. _____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
32.1. _____	\$ _____	_____	\$ _____
33. Total of part 6			<div>\$0.00</div>

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

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

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

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

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

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

- ☐ No
☐ Yes

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

- ☐ No
☐ Yes

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

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

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
39.1. FILE CABINETS (OWNED)	\$0.00	NET BOOK VALUE	UNDETERMINED

39.2.	DESIGN CABINETS (OWNED)	\$0.00	NET BOOK VALUE	UNDETERMINED
39.3.	LATERAL FILES (OWNED)	\$0.00	NET BOOK VALUE	UNDETERMINED
39.4.	LOBBY CHAIRS (OWNED)	\$0.00	NET BOOK VALUE	UNDETERMINED
39.5.	SM CONFERENCE TABLE (OWNED)	\$0.00	NET BOOK VALUE	UNDETERMINED
39.6.	CHAPEL FURNITURE (OWNED)	\$0.00	NET BOOK VALUE	UNDETERMINED

40. Office fixtures

40.1. _____ \$ _____

41. Office equipment, including all computer equipment and communication systems equipment and software

		Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
41.1.	PHONE SYSTEM (OWNED)	\$460.36	NET BOOK VALUE	\$460.36
41.2.	PHONE SYSTEM (OWNED)	\$136.49	NET BOOK VALUE	\$136.49
41.3.	COPIERS (LEASED)	\$6,809.79	NET BOOK VALUE	\$6,809.79
41.4.	PITNEY BOWES POSTAGE (LEASED)	\$8,119.11	NET BOOK VALUE	\$8,119.11
41.5.	COMPUTER WORKS/ACCUFUND (OWNED)	\$16,028.79	NET BOOK VALUE	\$16,028.79
41.6.	COMPUTER WORKS/ACCUFUND (OWNED)	\$4,237.46	NET BOOK VALUE	\$4,237.46

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. ARTWORK \$0.00 NET BOOK VALUE UNDETERMINED

43. Total of part 7

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

\$35,792.00

44. Is a depreciation schedule available for any of the property listed in Part 7?☐ No☒ Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?**☒ No☐ Yes**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?**☐ No. Go to Part 9.☒ Yes. Fill in the information below.

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

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

47.1. 2011 GMC TERRAIN SLT 2 \$0.00 KELLY BLUE BOOK \$5,000.00
(VIN: 2CTFLWE59B6267824) ESTIMATE

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

48.1. _____ \$ _____

49. Aircraft and accessories

49.1. _____ \$ _____ \$ _____

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

50.1. _____ \$ _____ \$ _____

51. Total of part 8

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

\$5,000.00

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

- ☐ No
☒ Yes

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

- ☒ No
☐ Yes

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

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

Description and location of property

Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.

Nature and extent of debtor's interest in property**Net book value of debtor's interest**
(Where available)**Valuation method used for current value****Current value of debtor's interest****55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

55.1. 047-281-014 100% FEE \$258,711.00 Zillow estimate \$1,051,400.00
 SINGLE FAMILY RESIDENCE; HOME OF
 NEWMAN CENTER AT SONOMA STATE U.

1798 E. COTATI AVE.
 PENNGROVE CA 94951

55.2. 010-374-009 100% FEE \$324,224.00 Zillow estimate \$476,400.00
 SINGLE FAMILY RESIDENCE; BISHOP'S
 RESIDENCE

1240 MANHATTAN WAY
 SANTA ROSA CA 95401

55.3. 015-690-032 LEASEHOLD & \$306,366.00 Net book value \$306,366.00
 CHANCERY OFFICE

985 AIRWAY CT
 SANTA ROSA CA 95402

56. Total of part 9

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

\$1,834,166.00

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. SRDIOCESE.ORG	\$0.00	_____	UNDETERMINED
61.2. WEB PAGE: HTTPS://WWW.SRDIOCESE.ORG/	\$0.00	_____	UNDETERMINED
62. Licenses, franchises, and royalties			
62.1. _____	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations			
63.1. MAILING LIST FOR DIOCESAN MAGAZINE	N/A	Debtor Estimate	UNDETERMINED
64. Other intangibles, or intellectual property			
64.1. FACEBOOK: DIOCESEOF SANTAROSA	N/A	Debtor Estimate	UNDETERMINED
64.2. INSTAGRAM: @SANTAROSADIOCESE	N/A	Debtor Estimate	UNDETERMINED
65. Goodwill			
65.1. _____	\$ _____	_____	\$ _____
66. Total of part 10			
Add lines 60 through 65. Copy the total to line 89.			UNDETERMINED

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

- ☐ No
☒ Yes

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

- ☒ No
☐ Yes

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

- ☒ No
☐ Yes

Part 11: All other assets**70. Does the debtor own any other assets that have not yet been reported on this form?**

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

☐ No. Go to Part 12.

☒ Yes. Fill in the information below.

**Current value of
debtor's interest**

71. Notes receivable

	Description (include name of obligor)	Total face amount	Doubtful or uncollectible amount	Current value of debtor's interest
71.1.	ASSESSMENTS, PLEA, PRIEST RETIREMENT, QUICKBOOKS ST. HELENA PARISH 1340 TAINTER STREET ST. HELENA CA 94574	\$246,172.00	- UNDETERMINED = →	UNDETERMINED

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

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.	CATHOLIC MUTUAL RELIEF SOCIETY OF AMERICA	COMMERCIAL AND LIABILITY INSURANCE; CERTIFICATE NUMBER 9096	_____	_____	_____	UNDETERMINED
73.2.	AIG VIA CATHOLIC MUTUAL	LIABILITY INSURANCE; POLICY NO. WS1009022	_____	_____	_____	UNDETERMINED
73.3.	AON VIA CATHOLIC MUTUAL	LIABILITY INSURANCE; CERTIFICATE NUMBER 9096	_____	_____	_____	UNDETERMINED
73.4.	CHURCH MUTUAL	AUTO INSURANCE; POLICY NO. 09-403873	_____	_____	_____	UNDETERMINED
73.5.	CHURCH MUTUAL	WORKERS COMPENSATION; POLICY NO. 07-503275	_____	_____	_____	UNDETERMINED
73.6.	HANOVER INSURANCE COMPANY	CRIME INSURANCE; POLICY NO. BDJ-H210422-00	_____	_____	_____	UNDETERMINED
73.7.	TRAVELERS CASUALTY AND SURIETY CO OF AMERICA (THE TRAVELERS COMPANIES, INC.)	FIDUCIARY LIABILITY INSURANCE; POLICY NO. 105961906	_____	_____	_____	UNDETERMINED

73.8.	CATHOLIC UMBRELLA POOL II	COMMERCIAL AND LIABILITY GAP COVERAGE; CERTIFICATE NO. CERTIFICATE NUMBER 9096	_____	_____	_____	UNDETERMINED
73.9.	PACIFIC INDEMNITY	GENERAL LIABILITY - POLICY NO. LAC 15550; COVERAGE PERIOD - 10/25/63-10/25/66	_____	_____	_____	UNDETERMINED
73.10.	LLOYD'S	EXCESS - POLICY NO. 29081; COVERAGE PERIOD - 10/25/63-10/25/66	_____	_____	_____	UNDETERMINED
73.11.	LLOYD'S	EXCESS - POLICY NO. 29082; COVERAGE PERIOD - 10/25/63-10/25/66	_____	_____	_____	UNDETERMINED
73.12.	INA	GENERAL LIABILITY - POLICY NO. CP 2 5244; COVERAGE PERIOD - 10/25/66-"UNTIL CANCELLED"	_____	_____	_____	UNDETERMINED
73.13.	INA	EXCESS - POLICY NO. XBC 24297; COVERAGE PERIOD - 10/25/66-10/25/69	_____	_____	_____	UNDETERMINED
73.14.	PHOENIX ASSURANCE CO. OF NY	GENERAL LIABILITY - POLICY NO. SMP702399; COVERAGE PERIOD - 10/25/67-11/1/70	_____	_____	_____	UNDETERMINED
73.15.	INA	EXCESS - POLICY NO. XBC 67709; COVERAGE PERIOD - 8/1/68- 10/25/70	_____	_____	_____	UNDETERMINED
73.16.	NORTHERN INS. CO. OF NY	GENERAL LIABILITY - POLICY NO. NO 145442; COVERAGE PERIOD - 11/1/70-11/1/73	_____	_____	_____	UNDETERMINED

73.17.	INS. CO. OF NORTH AMERICA	EXCESS - POLICY NO. XBC 85517; COVERAGE PERIOD - 10/25/70-10/25/73	_____	_____	_____	UNDETERMINED
73.18.	NORTHWESTERN NATIONAL	GL PKG. - POLICY NO. SMP 161479; COVERAGE PERIOD - 11/1/73-11/1/76	_____	_____	_____	UNDETERMINED
73.19.	CONTINENTAL CAS.	EXCESS - POLICY NO. RDU 1464115; COVERAGE PERIOD - 11/1/73-11/1/76	_____	_____	_____	UNDETERMINED
73.20.	EMPLOYERS REINSURANCE	EXCESS - POLICY NO. PLE 20203; COVERAGE PERIOD - 11/1/73-11/1/76	_____	_____	_____	UNDETERMINED
73.21.	NORTHWESTERN NAT'L CASUALTY	GL - POLICY NO. SMP 167230; COVERAGE PERIOD - 11/1/76-11/1/79	_____	_____	_____	UNDETERMINED
73.22.	ISOP	UMBRELLA - POLICY NO. 4176-7429; COVERAGE PERIOD - 12/27/76-11/1/77	_____	_____	_____	UNDETERMINED
73.23.	PURITAN INS. CO.	EXCESS - POLICY NO. ML 65 0797; COVERAGE PERIOD - 1/7/77- 1/1/78	_____	_____	_____	UNDETERMINED
73.24.	NORTHWESTERN NAT'L CASUALTY	GL - POLICY NO. SMP 569852; COVERAGE PERIOD - 11/1/79-11/1/82	_____	_____	_____	UNDETERMINED
73.25.	LLOYD'S	GL - POLICY NO. SL 3770, SLC 5788; COVERAGE PERIOD - 11/25/80-7/1/84	_____	_____	_____	UNDETERMINED
73.26.	INTERSTATE FIRE & CASUALTY CO.	EXCESS - POLICY NO. 183-152672; COVERAGE PERIOD - 11/25/80-11/25/81	_____	_____	_____	UNDETERMINED

73.27.	INTERSTATE FIRE & CASUALTY CO.	EXCESS - POLICY NO. 183-152672/1; COVERAGE PERIOD - 11/25/81-7/1/83	_____	_____	_____	UNDETERMINED
73.28.	INTERSTATE FIRE & CASUALTY CO.	EXCESS - POLICY NO. 183-152672/1; COVERAGE PERIOD - 11/25/83-7/1/84	_____	_____	_____	UNDETERMINED
73.29.	INTERNATIONAL INS. CO.	EXCESS - POLICY NO. 240-093402-3; COVERAGE PERIOD - 11/25/80-11/25/83	_____	_____	_____	UNDETERMINED
73.30.	LLOYD'S	EXCESS - POLICY NO. SL3771 / SL3772; COVERAGE PERIOD - 11/25/80-11/25/83	_____	_____	_____	UNDETERMINED
73.31.	LLOYD'S	EXCESS - POLICY NO. SL3796 / SLC3796; COVERAGE PERIOD - 2/5/81- 11/5/81	_____	_____	_____	UNDETERMINED
73.32.	LLOYD'S	EXCESS - POLICY NO. ISL 3023 / ICO 4003; COVERAGE PERIOD - 7/1/83- 7/1/84	_____	_____	_____	UNDETERMINED
73.33.	LLOYD'S	GL - POLICY NO. ISL 3268 / ICO5090; COVERAGE PERIOD - 7/1/84- 7/1/87	_____	_____	_____	UNDETERMINED
73.34.	INTERSTATE FIRE & CASUALTY	EXCESS - POLICY NO. 183-152672; COVERAGE PERIOD - 7/1/84- 7/1/85	_____	_____	_____	UNDETERMINED
73.35.	INTERSTATE FIRE & CASUALTY	EXCESS - POLICY NO. 183-172431; COVERAGE PERIOD - 7/1/85- 7/1/86	_____	_____	_____	UNDETERMINED
73.36.	INTERSTATE FIRE & CASUALTY	EXCESS - POLICY NO. 183-152672/1; COVERAGE PERIOD - 7/1/86- 7/1/87	_____	_____	_____	UNDETERMINED

73.37.	LLOYD'S	EXCESS - POLICY NO. ISL3270/ICO5091/ISO5092/ISL3396/ ISL3496; COVERAGE PERIOD - 7/1/84- 7/1/87	_____	_____	_____	UNDETERMINED
73.38.	CENTENNIAL	EXCESS - POLICY NO. 287- 00-05-82; COVERAGE PERIOD - 7/1/84- 7/1/85	_____	_____	_____	UNDETERMINED
73.39.	FIREMAN'S FUND	EXCESS - POLICY NO. XLX 1488396; COVERAGE PERIOD - 7/1/84- 7/1/85	_____	_____	_____	UNDETERMINED
73.40.	CENTENNIAL	EXCESS - POLICY NO. 287- 00-05-82; COVERAGE PERIOD - 7/1/85- 7/1/86	_____	_____	_____	UNDETERMINED
73.41.	FIREMAN'S FUND	EXCESS - POLICY NO. XLX 1488396; COVERAGE PERIOD - 7/1/85- 7/1/86	_____	_____	_____	UNDETERMINED
73.42.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-87; COVERAGE PERIOD - 7/1/87- 7/1/88	_____	_____	_____	UNDETERMINED
73.43.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-88; COVERAGE PERIOD - 7/1/88- 7/1/89	_____	_____	_____	UNDETERMINED
73.44.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-89; COVERAGE PERIOD - 7/1/89- 7/1/90	_____	_____	_____	UNDETERMINED
73.45.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-90; COVERAGE PERIOD - 7/1/90- 7/1/91	_____	_____	_____	UNDETERMINED
73.46.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-91; COVERAGE PERIOD - 7/1/91- 7/1/92	_____	_____	_____	UNDETERMINED
73.47.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-92; COVERAGE PERIOD - 7/1/92- 7/1/93	_____	_____	_____	UNDETERMINED

73.48.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-93; COVERAGE PERIOD - 7/1/93- 7/1/94	_____	_____	_____	UNDETERMINED
73.49.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-94; COVERAGE PERIOD - 7/1/94- 7/1/95	_____	_____	_____	UNDETERMINED
73.50.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-95; COVERAGE PERIOD - 7/1/95- 7/1/96	_____	_____	_____	UNDETERMINED
73.51.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-96; COVERAGE PERIOD - 7/1/96- 7/1/97	_____	_____	_____	UNDETERMINED
73.52.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-97; COVERAGE PERIOD - 7/1/97- 7/1/98	_____	_____	_____	UNDETERMINED
73.53.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-98; COVERAGE PERIOD - 7/1/98- 7/1/99	_____	_____	_____	UNDETERMINED
73.54.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-99; COVERAGE PERIOD - 7/1/99- 7/1/00	_____	_____	_____	UNDETERMINED
73.55.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-00; COVERAGE PERIOD - 7/1/007-7/1/01	_____	_____	_____	UNDETERMINED
73.56.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-01; COVERAGE PERIOD - 7/1/01- 7/1/02	_____	_____	_____	UNDETERMINED
73.57.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-02; COVERAGE PERIOD - 7/1/02- 7/1/03	_____	_____	_____	UNDETERMINED
73.58.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-03; COVERAGE PERIOD - 7/1/03- 7/1/04	_____	_____	_____	UNDETERMINED
73.59.	THE ORDINARY MUTUAL	GL - POLICY NO. CGAL 010-04; COVERAGE PERIOD - 7/1/04- 7/1/05	_____	_____	_____	UNDETERMINED

73.60.	THE ORDINARY MUTUAL	GL - POLICY NO. _____ CGAL 010-05; COVERAGE PERIOD - 7/1/05- 7/1/06	_____	_____	_____	UNDETERMINED
73.61.	THE ORDINARY MUTUAL	GL - POLICY NO. _____ CGAL 010-06; COVERAGE PERIOD - 7/1/06- 7/1/07	_____	_____	_____	UNDETERMINED
73.62.	THE ORDINARY MUTUAL	GL - POLICY NO. _____ CGAL 010-07; COVERAGE PERIOD - 7/1/07- 7/1/08	_____	_____	_____	UNDETERMINED
73.63.	THE ORDINARY MUTUAL	GL - POLICY NO. _____ CGAL 010-08; COVERAGE PERIOD - 7/1/08- 7/1/09	_____	_____	_____	UNDETERMINED
73.64.	THE ORDINARY MUTUAL	GL - POLICY NO. _____ CGAL 010-09; COVERAGE PERIOD - 7/1/09- 7/1/10	_____	_____	_____	UNDETERMINED
73.65.	THE ORDINARY MUTUAL	GL - POLICY NO. _____ CGAL 010-10; COVERAGE PERIOD - 7/1/10- 7/1/11	_____	_____	_____	UNDETERMINED
73.66.	THE ORDINARY MUTUAL	- POLICY NO. _____ CGAL 010-11; COVERAGE PERIOD - 7/1/11- 11/15/11	_____	_____	_____	UNDETERMINED
73.67.	CATHOLIC MUTUAL	GL - POLICY NO. _____ 9096; COVERAGE PERIOD - 7/1/20- 7/1/21 (RETROACTIVE TO 7/1/11)	_____	_____	_____	UNDETERMINED
73.68.	COLONIAL PENN	EXCESS - POLICY NO. _____ XL150020; COVERAGE PERIOD - 7/1/85- 7/1/86	_____	_____	_____	UNDETERMINED
73.69.	ST. PAUL	EXCESS - POLICY NO. SUO _____ 5500527; COVERAGE PERIOD - 7/1/86- 7/1/87	_____	_____	_____	UNDETERMINED
73.70.	COLONIAL PENN	EXCESS - POLICY NO. XL _____ 150068; COVERAGE PERIOD - 7/1/86- 7/1/87	_____	_____	_____	UNDETERMINED

73.71.	CNA	UNKNOWN - POLICY NO. SR 208859; COVERAGE PERIOD - 9/1/87- 9/1/88	_____	_____	_____	UNDETERMINED
73.72.	UNITED NATIONAL INS. CO.	PROPERTY - POLICY NO. CP64688; COVERAGE PERIOD - 7/1/96- 7/1/97	_____	_____	_____	UNDETERMINED
73.73.	HOLLAND AMERICA INS. CO.	AUTO - POLICY NO. HAC 20401; COVERAGE PERIOD - 10/25/70-10/25/71	_____	_____	_____	UNDETERMINED
73.74.	PACIFIC INDEMNITY	PROPERTY - POLICY NO. CMP 32129; COVERAGE PERIOD - 11/1/70-11/1/73	_____	_____	_____	UNDETERMINED
73.75.	STUYVESANT INS. CO.	PROPERTY - POLICY NO. SMP 289 6527; COVERAGE PERIOD - 11/1/70-11/1/73	_____	_____	_____	UNDETERMINED
73.76.	TRANSAMERICA INS. CO.	PROPERTY - POLICY NO. SMP 521 8273; COVERAGE PERIOD - 11/1/70-11/1/73	_____	_____	_____	UNDETERMINED
73.77.	MARYLAND CASUALTY	SPECIAL - POLICY NO. 66- 157213; COVERAGE PERIOD - 6/1/71- 74 (?)	_____	_____	_____	UNDETERMINED
73.78.	NORTHWESTERN NATIONAL	PKG. - POLICY NO. SMP 161479; COVERAGE PERIOD - 11/1/73-11/1/76	_____	_____	_____	UNDETERMINED
73.79.	PURITAN INS. CO.	AUTO ONLY XS - POLICY NO. ML 65 07 45; COVERAGE PERIOD - 11/01/76-2/5/77	_____	_____	_____	UNDETERMINED
73.80.	CENTENNIAL INS. CO.	AUTO - POLICY NO. 371-01-41-95; COVERAGE PERIOD - 11/25/80-11/25/81	_____	_____	_____	UNDETERMINED

73.81.	CONTINENTAL	BOILER AND MACHINE - POLICY NO. 3688509; COVERAGE PERIOD - 11/25/80-11/25/83				UNDETERMINED
73.82.	CENTENNIAL INS. CO.	LIQUOR & MED. - POLICY NO. 291- 69-65-31; COVERAGE PERIOD - 11/25/80-11/25/83				UNDETERMINED
73.83.	CENTENNIAL	LIQUOR & MED. - POLICY NO. 291- 71-16-01; COVERAGE PERIOD - 7/1/83- 7/1/84				UNDETERMINED
73.84.	INTERNATIONAL INS. CO.	PROPERTY? - POLICY NO. 241 7331996; COVERAGE PERIOD - 7/1/85- 7/1/86				UNDETERMINED
73.85.	NATIONAL UNION INS. CO.	SPECIAL EVENTS POLICY (RENEWAL OF MGA 157 71 37)? - POLICY NO. MGA 157-73-52; COVERAGE PERIOD - 7/1/85- 7/1/86				UNDETERMINED
73.86.	COLONIAL PENN	UNKNOWN - POLICY NO. XL 150068; COVERAGE PERIOD - 7/1/86- 7/1/87				UNDETERMINED
73.87.	CNA	UNKNOWN - POLICY NO. SR 208859; COVERAGE PERIOD - 9/1/87- 9/1/88				UNDETERMINED
73.88.	INTERNATIONAL INS. CO. 45%	PROPERTY PACKAGE - POLICY NO. 241 7333472 ; COVERAGE PERIOD - 7/1/86- 7/1/87				UNDETERMINED
73.89.	PROPERTY PACKAGE	PROPERTY PACKAGE - POLICY NO. AJG 100126; COVERAGE PERIOD - 7/1/86- 7/1/87				UNDETERMINED

Debtor **The Roman Catholic Bishop of Santa Rosa**

Case number (if known) **23-10113**

73.90. CONTINENTAL INS. CO.30% PROPERTY PACKAGE - POLICY NO. SFP 298 11 17; COVERAGE PERIOD - 7/1/86-7/1/87 _____ UNDETERMINED

73.91. TRAVELERS 25% PROPERTY PACKAGE - POLICY NO. TXCMB-196T882-A-86; COVERAGE PERIOD - 7/1/86-7/1/87 _____ UNDETERMINED

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

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

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

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

78. Total of part 11

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

UNDETERMINED

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

- ☒ No
☐ Yes

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>	\$13,704,883.55	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$497,508.67	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$1,009,469.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$35,792.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$5,000.00	
88. Real property. <i>Copy line 56, Part 9.</i>	→	\$1,834,166.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	UNDETERMINED	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ UNDETERMINED	
91. Total. Add lines 80 through 90 for each column.91a.	\$15,252,653.22	+ 91b. \$1,834,166.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$17,086,819.22

Fill in this information to identify the case:

Debtor name: The Roman Catholic Bishop of Santa Rosa

United States Bankruptcy Court for the: Northern District of California

Case number (if known): 23-10113

☐ 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

Creditor's email address, if known

Date debt was incurred: _____

Last 4 digits of account number: ____ _

—

Do multiple creditors have an interest in the same property?

☐ No

☐ Yes. Have you already specified the relative priority?

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

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

Describe debtor's property that is subject to a lien

Describe the lien

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.** **\$0.00**

Fill in this information to identify the case:**Debtor name:** The Roman Catholic Bishop of Santa Rosa**United States Bankruptcy Court for the:** Northern District of California**Case number (if known):** 23-10113☐ 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 AANENSON, CARMEN 1318 THOMPSON LANE PETALUMA CA 94952	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	Total claim \$4,748.79	Priority amount \$4,748.79
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		Nonpriority amount \$0.00
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)			
2.2.	Priority creditor's name and mailing address ALVAREZ-PADILLA, ANA MARIA 1654 TARKENTON COURT SANTA ROSA CA 95403	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	Total claim \$1,757.25	Priority amount \$1,757.25
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		Nonpriority amount \$0.00
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)			

2.3.	Priority creditor's name and mailing address BLUM, DOUGLAS 108 STEINER CT SANTA ROSA CA 95404	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	Total claim \$2,649.34	Priority amount \$2,649.34
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

2.4.	Priority creditor's name and mailing address CARROLL, ANNETTE 553 WHITE BIRCH LANE WINDSOR CA 95492	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	Total claim \$2,275.11	Priority amount \$2,275.11
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

2.5.	Priority creditor's name and mailing address DE LA O, RACHAEL 1443 COUNTRY MANOR DRIVE SANTA ROSA CA 95401	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	Total claim \$9,236.65	Priority amount \$9,236.65
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

2.6.	Priority creditor's name and mailing address FERRIERA, RUSS 705 SOUSA COURT PETALUMA CA 94952	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	Total claim \$4,116.68	Priority amount \$4,116.68
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

2.7.	Priority creditor's name and mailing address FOSNAUGH, REGINA 7511 MYRTLE AVE EUREKA CA 95503	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	Total claim \$2,557.50	Priority amount \$2,557.50
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

2.8.	Priority creditor's name and mailing address GUEVARRA, WILMA 4 FEENEY DR ROHNERT PARK CA 94928	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	Total claim \$1,522.69	Priority amount \$1,522.69
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

2.9.	Priority creditor's name and mailing address JIMENEZ, FATIMA 957 CHARTER OAK AVE ST. HELENA CA 94574 Date or dates debt was incurred 2022-23 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCRUED PTO Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; background-color: #d3d3d3;"> <tr> <th style="padding: 2px;">Total claim</th> </tr> <tr> <td style="padding: 2px;">\$3,550.65</td> </tr> </table>	Total claim	\$3,550.65	<table border="1" style="width: 100%; background-color: #d3d3d3;"> <tr> <th style="padding: 2px;">Priority amount</th> </tr> <tr> <td style="padding: 2px;">\$3,550.65</td> </tr> </table> <table border="1" style="width: 100%; background-color: #d3d3d3;"> <tr> <th style="padding: 2px;">Nonpriority amount</th> </tr> <tr> <td style="padding: 2px;">\$0.00</td> </tr> </table>	Priority amount	\$3,550.65	Nonpriority amount	\$0.00
Total claim										
\$3,550.65										
Priority amount										
\$3,550.65										
Nonpriority amount										
\$0.00										
2.10.	Priority creditor's name and mailing address LEMUS, MARINA M 1532 GARY CT ROHNERT PARK CA 94928 Date or dates debt was incurred 2022-23 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCRUED PTO Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; background-color: #d3d3d3;"> <tr> <th style="padding: 2px;">Total claim</th> </tr> <tr> <td style="padding: 2px;">\$5,436.38</td> </tr> </table>	Total claim	\$5,436.38	<table border="1" style="width: 100%; background-color: #d3d3d3;"> <tr> <th style="padding: 2px;">Priority amount</th> </tr> <tr> <td style="padding: 2px;">\$5,436.38</td> </tr> </table> <table border="1" style="width: 100%; background-color: #d3d3d3;"> <tr> <th style="padding: 2px;">Nonpriority amount</th> </tr> <tr> <td style="padding: 2px;">\$0.00</td> </tr> </table>	Priority amount	\$5,436.38	Nonpriority amount	\$0.00
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Nonpriority amount										
\$0.00										
2.11.	Priority creditor's name and mailing address LYFORD, CHRISTOPHER 1873 REIMANN LANE WINDSOR CA 95492 Date or dates debt was incurred 2022-23 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCRUED PTO Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<table border="1" style="width: 100%; background-color: #d3d3d3;"> <tr> <th style="padding: 2px;">Total claim</th> </tr> <tr> <td style="padding: 2px;">\$5,755.93</td> </tr> </table>	Total claim	\$5,755.93	<table border="1" style="width: 100%; background-color: #d3d3d3;"> <tr> <th style="padding: 2px;">Priority amount</th> </tr> <tr> <td style="padding: 2px;">\$5,755.93</td> </tr> </table> <table border="1" style="width: 100%; background-color: #d3d3d3;"> <tr> <th style="padding: 2px;">Nonpriority amount</th> </tr> <tr> <td style="padding: 2px;">\$0.00</td> </tr> </table>	Priority amount	\$5,755.93	Nonpriority amount	\$0.00
Total claim										
\$5,755.93										
Priority amount										
\$5,755.93										
Nonpriority amount										
\$0.00										

2.12.	Priority creditor's name and mailing address LYNN, NICHOLAS 454 MERLOT DRIVE CLOVERDALE CA 95425	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	Total claim \$1,955.47	Priority amount \$1,955.47
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

2.13.	Priority creditor's name and mailing address NORCIA, LORI ANN 2340 MEYERS DRIVE SANTA ROSA CA 95403	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	Total claim \$1,220.42	Priority amount \$1,220.42
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

2.14.	Priority creditor's name and mailing address OBERTING, JOSEPH 6 CANTERBURY DRIVE NAPA CA 94558	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	Total claim \$1,140.83	Priority amount \$1,140.83
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

2.15.	Priority creditor's name and mailing address PETER, LYNNE 5049 DUPONT DR. SANTA ROSA CA 95409 Date or dates debt was incurred 2022-23 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCRUED PTO 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>\$937.82</td></tr></table>	Total claim	\$937.82	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$937.82</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$937.82	Nonpriority amount	\$0.00
Total claim										
\$937.82										
Priority amount										
\$937.82										
Nonpriority amount										
\$0.00										
2.16.	Priority creditor's name and mailing address PETERSON, ADRIAN 46 GLENBROOK DR HILLSBOROUGH CA 94010 Date or dates debt was incurred 2022-23 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCRUED PTO 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>\$4,292.90</td></tr></table>	Total claim	\$4,292.90	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$4,292.90</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$4,292.90	Nonpriority amount	\$0.00
Total claim										
\$4,292.90										
Priority amount										
\$4,292.90										
Nonpriority amount										
\$0.00										
2.17.	Priority creditor's name and mailing address PURIFICACION, DENNIS 130 KENNISON COURT VALLEJO CA 94589 Date or dates debt was incurred 2022-23 Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ACCRUED PTO 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>\$5,086.09</td></tr></table>	Total claim	\$5,086.09	<table border="1" style="width: 100%;"><tr><th>Priority amount</th></tr><tr><td>\$5,086.09</td></tr></table> <table border="1" style="width: 100%;"><tr><th>Nonpriority amount</th></tr><tr><td>\$0.00</td></tr></table>	Priority amount	\$5,086.09	Nonpriority amount	\$0.00
Total claim										
\$5,086.09										
Priority amount										
\$5,086.09										
Nonpriority amount										
\$0.00										

2.18.	Priority creditor's name and mailing address RIGHETTI, KELLY 2356 MARIA LUZ CT. WEST SANTA ROSA CA 95401	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	Total claim \$8,399.52	Priority amount \$8,399.52
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

2.19.	Priority creditor's name and mailing address WILLIAMS, SUSAN 5020 MAIDEN LANE SANTA ROSA CA 95409	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	Total claim \$1,227.08	Priority amount \$1,227.08
	Date or dates debt was incurred 2022-23	Basis for the claim: ACCRUED PTO		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		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

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

3.1. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Amount of claim
AMERICAN BIBLE SOCIETY 101 N INDEPENDENCE MALL FL 8 PHILADELPHIA PA 19106	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$143.68
Date or dates debt was incurred	Basis for the claim:	
VARIOUS	TRADE	
Last 4 digits of account number:	Is the claim subject to offset?	
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Amount of claim
ANDRADE, ANGELICA VILLAREAL 1039 DELMAR DR SANTA ROSA CA 95405	<input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	UNDETERMINED
Date or dates debt was incurred	Basis for the claim:	
VARIOUS	DFEH ADMINISTRATIVE CLAIM	
Last 4 digits of account number:	Is the claim subject to offset?	
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3. Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	Amount of claim
ARCHDIOCESE OF SAN FRANCISCO 1 PETER YORKE WAY SAN FRANCISCO CA 94109	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,410,000.00
Date or dates debt was incurred	Basis for the claim:	
VARIOUS	LOAN	
Last 4 digits of account number:	Is the claim subject to offset?	
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.4.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.5.	Nonpriority creditor's name and mailing address AT&T TELECONFERENCE SERVICES P.O. BOX 5002 CAROL STREAM IL 60197 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$75.29
3.6.	Nonpriority creditor's name and mailing address AUTOM 5226 S 31ST PL PHOENIX AZ 85040 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$894.77

3.7.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.8.	Nonpriority creditor's name and mailing address BARNETT, MELISSA 987 AIRWAY CT SANTA ROSA CA 95403 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WORKERS COMP Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.9.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.10. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.**Is the claim subject to offset?**

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.11. **Nonpriority creditor's name and mailing address**BRADY, ROBERTA
4020 FINLEY AVE
SANTA ROSA CA 95407**Date or dates debt was incurred**

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

WORKERS COMP

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.12. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.**Is the claim subject to offset?**

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.13.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.14.	Nonpriority creditor's name and mailing address CANALES, EDELWEISS CBE LAW GROUP 425 E 4TH ST STE E LONG BEACH CA 90802 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WORKERS COMP Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.15.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.16.	Nonpriority creditor's name and mailing address COTTER CHURCH SUPPLIES 1701 JAMES M. WOOD BLVD LOS ANGELES CA 90015 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$74.38
3.17.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.18.	Nonpriority creditor's name and mailing address DENVER BOOKBINDING CO INC. 1401 W 47TH AVE DENVER CO 80211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$485.05

3.19.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.20.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.21.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.22.	Nonpriority creditor's name and mailing address FEDERAL EXPRESS P.O. BOX 7221 PASADENA CA 91109 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$131.87
3.23.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.24.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.25.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.26.	Nonpriority creditor's name and mailing address FUERTE, ROSA M 900 S OAK ST UKIAH CA 95482 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WORKERS COMP Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.27.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.28.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.29.	Nonpriority creditor's name and mailing address HEALDSBURG PRINTING 30 MILL ST HEALDSBURG CA 94558 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$7,535.94
3.30.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.31.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. 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 Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.33.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.34. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.**Is the claim subject to offset?**

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.35. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.**Is the claim subject to offset?**

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.36. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.**Is the claim subject to offset?**

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.37.	Nonpriority creditor's name and mailing address LAMARK, MICHAEL 7983 COVERT LN SEBASTOPOL CA 95472 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WORKERS COMP Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.38.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.39.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.40. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.**Is the claim subject to offset?**

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.41. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.**Is the claim subject to offset?**

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.42. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.**Is the claim subject to offset?**

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.43.	Nonpriority creditor's name and mailing address MCCLINTOCK, TANYA 985 AIRWAY CT SANTA ROSA CA 95403 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WORKERS COMP Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.44.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.45.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.46.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.47.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.48.	Nonpriority creditor's name and mailing address MINUTEMAN PRESS 112 COMMERCIAL CT SUITE 4 SANTA ROSA CA 95407 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$1,024.62

3.49.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.50.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED AWKO DOE 24 C/O AYLSTOCK, WITKIN, KREIS & OVERHOLTZ PLLC 17 E. MAIN STREET SUITE 200 PENSACOLA FL 32502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.51.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED AWKO DOE 27 C/O AYLSTOCK, WITKIN, KREIS & OVERHOLTZ PLLC 17 E. MAIN STREET SUITE 200 PENSACOLA FL 32502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.52.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED B.T./152 C/O HERMAN LAW 9434 DESCHUTES ROAD SUITE 1000 PALO CEDRO CA 96073 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.53.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED C/O ANTHONY DAVIS, ESQ. DAVIS DIXON KIRBY LLP 519 SW THIRD AVE. STE 601 PORTLAND OR 97204 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.54.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED C/O TRACEY COWAN, ESQ. 1519 ROBERT C BLAKES SR. DRIVE NEW ORLEANS LA 70130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.55.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED DOE 58/37B C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.56.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED DOE SR 1020 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.57.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED DOE SR 1021 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.58.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9076-21/99 C/O MARY ALEXANDER & ASSOC 19100 VON KARMAN AVENUE SUITE 800 IRVINE CA 92612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.59.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9143-21/37A C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.60.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9144-21 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.61.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9178-21/83 C/O THE ZALKIN LAW FIRM, P.C. 10590 WEST OCEAN AIR DRIVE SUITE 125 SAN DIEGO CA 92130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.62.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9183-21/109 C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.63.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9303-21/130 C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.64.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9306-21/128 C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.65.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9323-21 C/O BOUCHER LLP 21600 OXNARD STREET SUITE 600 WOODLAND HILLS CA 91367 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.66.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9324-21 C/O BOUCHER LLP 21600 OXNARD STREET SUITE 600 WOODLAND HILLS CA 91367 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.67.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9325-21 C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.68.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9326-21 C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.69.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9327-21 C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.70.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9342-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.71.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9346-21 C/O KETTERER, BROWNE & ASSOCIATES, LLC 336 SOUTH MAIN STREET BEL AIR MD 21014 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.72.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9348-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.73.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9349-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.74.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9350-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.75.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9351.21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.76.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9352-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.77.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9353-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.78.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9354-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.79.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9355-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.80.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9356-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.81.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9357-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.82.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9360-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.83.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9361-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.84.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9362-21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.85.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9363-21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.86.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9364-21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.87.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9365-21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.88.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9366.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.89.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9367.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. 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 NAME INTENTIONALLY OMITTED FILE NO. 9368.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.91.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9369.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.92.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9370.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.93.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9371.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.94.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9372.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.95.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9373.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.96.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9374.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.97.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9375.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.98.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9376.21 C/O SLATER SLATER SCHULMAN LLP 8383 WILSHIRE BOULEVARD SUITE 255 BEVERLY HILLS CA 90211 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.99.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9383-21 C/O THE ZALKIN LAW FIRM, P.C. 10590 WEST OCEAN AIR DRIVE SUITE 125 SAN DIEGO CA 92130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.100.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9385-21 C/O AYLSTOCK, WITKIN, KREIS & OVERHOLTZ PLLC 17 E. MAIN STREET SUITE 200 PENSACOLA FL 32502 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.101.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9387-21 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.102.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9395-21 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.103.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9401-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.104.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9402-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.105.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9403-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.106.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9404-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.107.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9405-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.108.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED FILE NO. 9406-21 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.109. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9407-21
C/O JEFF ANDERSON & ASSOCIATES
12011 SAN VICENTE BOULEVARD
SUITE 700
LOS ANGELES CA 90049

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:**

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.110. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9408-21
C/O JEFF ANDERSON & ASSOCIATES
12011 SAN VICENTE BOULEVARD
SUITE 700
LOS ANGELES CA 90049

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:**

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.111. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9409-21
C/O JEFF ANDERSON & ASSOCIATES
12011 SAN VICENTE BOULEVARD
SUITE 700
LOS ANGELES CA 90049

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:**

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.112. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9410-21
C/O JEFF ANDERSON & ASSOCIATES
12011 SAN VICENTE BOULEVARD
SUITE 700
LOS ANGELES CA 90049

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.113. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9411-21
C/O JEFF ANDERSON & ASSOCIATES
12011 SAN VICENTE BOULEVARD
SUITE 700
LOS ANGELES CA 90049

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.114. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9413-21
C/O BOUCHER LLP
21600 OXNARD STREET
SUITE 600
WOODLAND HILLS CA 91367

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.115. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9414-21
C/O BOUCHER LLP
21600 OXNARD STREET
SUITE 600
WOODLAND HILLS CA 91367

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.116. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9415-21
C/O LIAKOS LAW, APC
955 DEEP VALLEY DRIVE
SUITE 3900
PALOS VERDES PENINSULA CA 90274

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.117. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9416-21
C/O LIAKOS LAW, APC
955 DEEP VALLEY DRIVE
SUITE 3900
PALOS VERDES PENINSULA CA 90274

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.118. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9420-21
C/O PEIFFER WOLF CARR KANE CONWAY &
WISE
4 EMBARCADERO CENTER
STE 1400
SAN FRANCISCO CA 94111

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.119. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9455-21
C/O KRANKEMANN LAW OFFICES P.C.
420 E ST.
STE 100
SANTA ROSA CA 95404

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.120. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9475-21
C/O HERMAN LAW
9434 DESCHUTES ROAD
SUITE 1000
PALO CEDRO CA 96073

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.121. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9477-21
C/O THE ZALKIN LAW FIRM, P.C.
10590 WEST OCEAN AIR DRIVE
SUITE 125
SAN DIEGO CA 92130

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.122. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9485-21
C/O LIAKOS LAW, APC
955 DEEP VALLEY DRIVE
SUITE 3900
PALOS VERDES PENINSULA CA 90274

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.123. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
FILE NO. 9720-21/144
C/O MARY ALEXANDER & ASSOC
19100 VON KARMAN AVENUE
SUITE 800
IRVINE CA 92612

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.124. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
J.F./FILE NO. 9431-21
C/O HERMAN LAW
9434 DESCHUTES ROAD
SUITE 1000
PALO CEDRO CA 96073

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.125. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JANE DOE SR 1156
C/O JEFF ANDERSON & ASSOCIATES
12011 SAN VICENTE BOULEVARD
SUITE 700
LOS ANGELES CA 90049

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.126. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JANE DOE SR 1706
C/O JEFF ANDERSON & ASSOCIATES
12011 SAN VICENTE BOULEVARD
SUITE 700
LOS ANGELES CA 90049

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.127. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JANE DOE T.S./192
C/O BOUCHER LLP
21600 OXNARD STREET
SUITE 600
WOODLAND HILLS CA 91367

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.128. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JENNIFER DOE SR 565/1102
C/O JOSEPH GEORGE JR. LAW CORP
601 UNIVERSITY AVENUE
SUITE 270
SACRAMENTO CA 95825

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.129. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JENNIFER DOE SR 592/1103
C/O JOSEPH GEORGE JR. LAW CORP
601 UNIVERSITY AVENUE
SUITE 270
SACRAMENTO CA 95825

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.130.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JENNIFER DOE SR 593/1104 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.131.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE 1032/82C C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.132.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE 11/80 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.133. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN DOE 110
C/O WINER, BURRITT & SCOTT, LLP
1901 HARRISON STREET
SUITE 1100
OAKLAND CA 94612

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.134. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN DOE 129
C/O JOSEPH GEORGE JR. LAW CORP
601 UNIVERSITY AVENUE
SUITE 270
SACRAMENTO CA 95825

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.135. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN DOE 130
C/O JOSEPH GEORGE JR. LAW CORP
601 UNIVERSITY AVENUE
SUITE 270
SACRAMENTO CA 95825

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.136.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE 159 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.137.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE 164 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.138.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE 167/321 C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.139.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE 1676/169 C/O MATTHEWS & ASSOCIATES 250 VALLOMBROSA AVENUE SUITE 266 CHICO CA 95926 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.140.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE 178 C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.141.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE 27/25 C/O MATTHEWS & ASSOCIATES 250 VALLOMBROSA AVENUE SUITE 266 CHICO CA 95926 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.142.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE 38A C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.143.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE 551 C/O WINER, BURRITT & SCOTT, LLP 1901 HARRISON STREET SUITE 1100 OAKLAND CA 94612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.144.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE A.C./193 C/O BOUCHER LLP 21600 OXNARD STREET SUITE 600 WOODLAND HILLS CA 91367 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.145.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE AF/133 C/O PAUL MONES, P.C. 13101 WASHINGTON BOULEVARD SUITE 240 LOS ANGELES CA 90066 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.146.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE CM C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.147.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE J.F./61 C/O BOUCHER LLP 21600 OXNARD STREET SUITE 600 WOODLAND HILLS CA 91367 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.148.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE JW C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. 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 NAME INTENTIONALLY OMITTED JOHN DOE K.B./162 C/O MARY ALEXANDER & ASSOC 19100 VON KARMAN AVENUE SUITE 800 IRVINE CA 92612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.150.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE ND C/O PANISH SHEA BOYLE RAVIPUDI LLP 11111 SANTA MONICA BOULEVARD SUITE 700 LOS ANGELES CA 90025 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.151.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SF 1732 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.152.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1015 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.153.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1025/49 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.154.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1028/81 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.155.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1029/82A C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.156.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1030/82B C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.157.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1034/82D C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.158.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1136 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.159.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1137 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.160.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1143 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.161.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1173 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.162.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1188 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.163.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1190 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.164.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1232 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.165.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1256 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.166.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1498 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.167.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1499 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.168.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1500 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.169.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1529 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.170.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1542 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.171.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1543 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.172.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1647 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.173.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1663 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.174.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 1889 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.175. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN DOE SR 1947
C/O JEFF ANDERSON & ASSOCIATES
12011 SAN VICENTE BOULEVARD
SUITE 700
LOS ANGELES CA 90049

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.176. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN DOE SR 2043
C/O JEFF ANDERSON & ASSOCIATES
12011 SAN VICENTE BOULEVARD
SUITE 700
LOS ANGELES CA 90049

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.177. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN DOE SR 2066
C/O JEFF ANDERSON & ASSOCIATES
12011 SAN VICENTE BOULEVARD
SUITE 700
LOS ANGELES CA 90049

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.178.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE SR 2067 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.179.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE/30 C/O THE KEANE LAW FIRM, P.C. 548 MARKET STREET NUMBER 23851 SAN FRANCISCO CA 94104 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.180.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN DOE/FILE NO. 9429-21 C/O LEVIN SIMES ABRAMS 1700 MONTGOMERY STREET SUITE 250 SAN FRANCISCO CA 94111 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.181. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN EL DOE
C/O BAER TREGER LLP
1999 AVENUE OF THE STARS
SUITE 1100
LOS ANGELES CA 90067

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.182. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN FR DOE OAK
C/O THE ZALKIN LAW FIRM, P.C.
10590 WEST OCEAN AIR DRIVE
SUITE 125
SAN DIEGO CA 92130

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.183. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN GS DOE/200
C/O JOSEPHS AND BLUM
1436 UNION STREET
SAN FRANCISCO CA 94109

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.184.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN JZ ROE SR/485 C/O THE ZALKIN LAW FIRM, P.C. 10590 WEST OCEAN AIR DRIVE SUITE 125 SAN DIEGO CA 92130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.185.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN M.C. DOE C/O ABBEY,WEITZENBERG, WARREN & EMERY, P.C. 100 STONY POINT RD SUITE 200 SANTA ROSA CA 95401 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.186.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN P.J. DOE (SCV-272317) C/O THE RAMIREZ FRIM 7121 MAGNOLIA AVENUE SUITE M RIVERSIDE CA 92504 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.187.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN PL ROE SR/477 C/O THE ZALKIN LAW FIRM, P.C. 10590 WEST OCEAN AIR DRIVE SUITE 125 SAN DIEGO CA 92130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.188.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN PV ROE SR 424 C/O THE ZALKIN LAW FIRM, P.C. 10590 WEST OCEAN AIR DRIVE SUITE 125 SAN DIEGO CA 92130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.189.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN RF ROE SR/503 C/O THE ZALKIN LAW FIRM, P.C. 10590 WEST OCEAN AIR DRIVE SUITE 125 SAN DIEGO CA 92130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.190.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN RR ROE SR/471 C/O THE ZALKIN LAW FIRM, P.C. 10590 WEST OCEAN AIR DRIVE SUITE 125 SAN DIEGO CA 92130 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.191.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN SR-10 DOE/308 C/O MANLY, STEWART & FINALDI 19100 VON KARMAN AVENUE SUITE 800 IRVINE CA 92612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.192.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN SR-13 DOE/307 C/O MANLY, STEWART & FINALDI 19100 VON KARMAN AVENUE SUITE 800 IRVINE CA 92612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.193. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN SR-14 DOE/337
C/O MANLY, STEWART & FINALDI
19100 VON KARMAN AVENUE
SUITE 800
IRVINE CA 92612

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.194. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN SR-17 DOE/ 596
C/O MANLY, STEWART & FINALDI
19100 VON KARMAN AVENUE
SUITE 800
IRVINE CA 92612

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.195. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN SR-2 DOE/51
C/O MANLY, STEWART & FINALDI
19100 VON KARMAN AVENUE
SUITE 800
IRVINE CA 92612

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.196. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN SR-3 DOE/52
C/O MANLY, STEWART & FINALDI
19100 VON KARMAN AVENUE
SUITE 800
IRVINE CA 92612

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.197. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN SR-4 DOE/53A
C/O MANLY, STEWART & FINALDI
19100 VON KARMAN AVENUE
SUITE 800
IRVINE CA 92612

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.198. **Nonpriority creditor's name and mailing address**

NAME INTENTIONALLY OMITTED
JOHN SR-5 DOE/53B
C/O MANLY, STEWART & FINALDI
19100 VON KARMAN AVENUE
SUITE 800
IRVINE CA 92612

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.199.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN SR-6 DOE/53C C/O MANLY, STEWART & FINALDI 19100 VON KARMAN AVENUE SUITE 800 IRVINE CA 92612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.200.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN SR-7 DOE/54 C/O MANLY, STEWART & FINALDI 19100 VON KARMAN AVENUE SUITE 800 IRVINE CA 92612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.201.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN SR-8 DOE C/O MANLY, STEWART & FINALDI 19100 VON KARMAN AVENUE SUITE 800 IRVINE CA 92612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.202.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN SR-9 DOE/258 C/O MANLY, STEWART & FINALDI 19100 VON KARMAN AVENUE SUITE 800 IRVINE CA 92612 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.203.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOHN V.A. DOE C/O ABBEY, WEITZENBERG, WARREN & EMERY, P.C. 100 STONY POINT RD SUITE 200 SANTA ROSA CA 95401 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.204.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 1881 C/O JEFF ANDERSON & ASSOCIATES 12011 SAN VICENTE BOULEVARD SUITE 700 LOS ANGELES CA 90049 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.205.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 554/1092 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.206.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 556/1090 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. 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 NAME INTENTIONALLY OMITTED JOSEPH DOE SR 557/1091 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.208.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 559/1093 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.209.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 561/1096 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.210.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 563/1099 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.211.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 564/1100 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.212.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 567/1105 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.213.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 569/109 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.214.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 569/1109 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.215.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 570/1110 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.216.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 577/1107 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.217.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 581/1087 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.218.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 586/1081 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.219.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED JOSEPH DOE SR 594/1089 C/O JOSEPH GEORGE JR. LAW CORP 601 UNIVERSITY AVENUE SUITE 270 SACRAMENTO CA 95825 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.220.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED L.J./151 C/O HERMAN LAW 9434 DESCHUTES ROAD SUITE 1000 PALO CEDRO CA 96073 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.221.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED M.K./FILE NO.9438-21 C/O HERMAN LAW 9434 DESCHUTES ROAD SUITE 1000 PALO CEDRO CA 96073 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.222.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED M.U./146 C/O HERMAN LAW 9434 DESCHUTES ROAD SUITE 1000 PALO CEDRO CA 96073 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.223.	Nonpriority creditor's name and mailing address NAME INTENTIONALLY OMITTED R.O./FILE NO.9437-21 C/O HERMAN LAW 9434 DESCHUTES ROAD SUITE 1000 PALO CEDRO CA 96073 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.224.	Nonpriority creditor's name and mailing address NICOLAY CONSULTING GROUP 231 SANSOME ST SUITE 300 SAN FRANCISCO CA 94104 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$6,583.42
3.225.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.226.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. 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 PACIFIC GAS & ELECTRIC P.O. BOX 997300 SACRAMENTO CA 95899 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$812.95
3.228.	Nonpriority creditor's name and mailing address PARDE, SUSAN 8136 COUNTRYSIDE CT WINDSOR CA 95492 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WAGE/HOUR CLAIM Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.229.	Nonpriority creditor's name and mailing address PASTOR OF ASSUMPTION OF OUR LADY CATHOLIC CHURCH OF FERNDALE 546 BERDING ST FERNDALE CA 95536 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.230.	Nonpriority creditor's name and mailing address PASTOR OF BLESSED SACRAMENT CATHOLIC MISSION OF ELK 5750 HWY 1 ELK CA 95432 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.231.	Nonpriority creditor's name and mailing address PASTOR OF CHRIST THE KING CATHOLIC CHURCH OF MCKINLEYVILLE 1951 MCKINLEYVILLE AVE MCKINLEYVILLE CA 95519 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN

3.232. **Nonpriority creditor's name and mailing address**

PASTOR OF HOLY FAMILY CATHOLIC CHURCH
OF AMERICAN CANYON
200 ANTONINA AVE
AMERICAN CANYON CA 94503

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

INDEMNIFICATION/CONTRIBUTION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNKNOWN

3.233. **Nonpriority creditor's name and mailing address**

PASTOR OF HOLY SPIRIT CATHOLIC CHURCH
OF SANTA ROSA
1244 ST. FRANCIS ROAD
SANTA ROSA CA 95409

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

INDEMNIFICATION/CONTRIBUTION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNKNOWN

3.234. **Nonpriority creditor's name and mailing address**

PASTOR OF OUR LADY OF GOOD COUNSEL
CATHOLIC CHURCH OF FORT BRAGG
255 S. HAROLD ST.
FORT BRAGG CA 95437

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

INDEMNIFICATION/CONTRIBUTION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNKNOWN

3.235.	Nonpriority creditor's name and mailing address PASTOR OF OUR LADY OF GUADALUPE CATHOLIC CHURCH OF WINDSOR 8400 OLD REDWOOD HWY WINDSOR CA 95492 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.236.	Nonpriority creditor's name and mailing address PASTOR OF OUR LADY OF PERPETUAL HELP CATHOLIC CHURCH OF CALISTOGA 901 WASHINGTON ST CALISTOGA CA 94515 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.237.	Nonpriority creditor's name and mailing address PASTOR OF OUR LADY OF THE REDWOODS CATHOLIC CHURCH OF GARBERVILLE 515 MAPLE ST GARBERVILLE CA 95542 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN

3.238.	Nonpriority creditor's name and mailing address PASTOR OF OUR LADY QUEEN OF PEACE CATHOLIC CHURCH 14435 UHL AVE CLEARLAKE CA 95422	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	Amount of claim UNKNOWN
	Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.239.	Nonpriority creditor's name and mailing address PASTOR OF RESURRECTION CATHOLIC CHURCH OF SANTA ROSA 303 STONY POINT RD SANTA ROSA CA 95401	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	Amount of claim UNKNOWN
	Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.240.	Nonpriority creditor's name and mailing address PASTOR OF SACRED HEART CATHOLIC CHURCH OF EUREKA 2085 MYRTLE AVE EUREKA CA 95501	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	Amount of claim UNKNOWN
	Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.241.	Nonpriority creditor's name and mailing address PASTOR OF SAINT JOSEPH CATHOLIC CHURCH OF COTATI 150 ST. JOSEPH WAY COTATI CA 94931 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.242.	Nonpriority creditor's name and mailing address PASTOR OF ST BERNARD CATHOLIC CHURCH OF EUREKA 615 H STREET EUREKA CA 95501 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.243.	Nonpriority creditor's name and mailing address PASTOR OF ST. ALOYSIUS CATHOLIC CHURCH OF POINT ARENA 70 SCHOOL ST POINT ARENA CA 95468 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN

3.244. Nonpriority creditor's name and mailing address PASTOR OF ST. ANTHONY CATHOLIC CHURCH OF MENDOCINO 10700 LANSING ST. MENDOCINO CA 95460 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.245. Nonpriority creditor's name and mailing address PASTOR OF ST. ANTHONY OF PADUA CATHOLIC CHURCH OF WILLITS 61 W. SAN FRANCISCO AVE WILLITS CA 95490 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.246. Nonpriority creditor's name and mailing address PASTOR OF ST. APOLLINARIS CATHOLIC CHURCH OF NAPA 3700 LASSEN ST. NAPA CA 94558 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN

3.247.	Nonpriority creditor's name and mailing address PASTOR OF ST. CATHERINE OF SIENA CATHOLIC MISSION OF MONTE RIO 20389 FOOTHILL DR MONTE RIO CA 95462 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.248.	Nonpriority creditor's name and mailing address PASTOR OF ST. COLMAN CATHOLIC MISSION OF CAZADERO 5695 CAZADERO HWY CAZADERO CA 95421 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.249.	Nonpriority creditor's name and mailing address PASTOR OF ST. ELIZABETH ANN SETON CATHOLIC CHURCH OF ROHNERT PARK 4595 SNYDER LANE ROHNERT PARK CA 94928 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN

3.250.	Nonpriority creditor's name and mailing address PASTOR OF ST. ELIZABETH CATHOLIC CHURCH OF GUERNEVILLE 14095 WOODLAND DR GUERNEVILLE CA 95446	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	Amount of claim UNKNOWN
	Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.251.	Nonpriority creditor's name and mailing address PASTOR OF ST. ELIZABETH SETON CATHOLIC MISSION OF PHILO 8771 PHILO SCHOOL RD PHILO CA 95466	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	Amount of claim UNKNOWN
	Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.252.	Nonpriority creditor's name and mailing address PASTOR OF ST. EUGENE CATHEDRAL OF SANTA ROSA 2323 MONTGOMERY DR SANTA ROSA CA 95405	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	Amount of claim UNKNOWN
	Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.253. **Nonpriority creditor's name and mailing address**

PASTOR OF ST. FRANCIS SOLANO CATHOLIC
CHURCH OF SONOMA
469 THIRD STREET WEST
SONOMA CA 95476

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

INDEMNIFICATION/CONTRIBUTION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNKNOWN

3.254. **Nonpriority creditor's name and mailing address**

PASTOR OF ST. HELENA CATHOLIC CHURCH OF
ST. HELENA
1340 TAINTER ST
ST. HELENA CA 94574

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

INDEMNIFICATION/CONTRIBUTION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNKNOWN

3.255. **Nonpriority creditor's name and mailing address**

PASTOR OF ST. JAMES CATHOLIC CHURCH OF
PETALUMA
125 SONOMA MOUNTAIN PKWY
PETALUMA CA 94954

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

INDEMNIFICATION/CONTRIBUTION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNKNOWN

3.256.	Nonpriority creditor's name and mailing address PASTOR OF ST. JOAN OF ARC CATHOLIC CHURCH OF YOUNTVILLE 6404 WASHINGTON ST YOUNTVILLE CA 94599 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.257.	Nonpriority creditor's name and mailing address PASTOR OF ST. JOHN THE BAPTIST CATHOLIC CHURCH OF HEALDSBURG 208 MATHESON ST HEALDSBURG CA 95448 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.258.	Nonpriority creditor's name and mailing address PASTOR OF ST. JOHN THE BAPTIST CATHOLIC CHURCH OF NAPA 960 CAYMUS ST. NAPA CA 94559 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN

3.259.	Nonpriority creditor's name and mailing address PASTOR OF ST. JOSEPH CATHOLIC CHURCH OF CRESCENT CITY 319 E STREET CRESCENT CITY CA 95531 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.260.	Nonpriority creditor's name and mailing address PASTOR OF ST. JOSEPH CATHOLIC CHURCH OF FORTUNA 2312 NEWBURG RD FORTUNA CA 95540 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.261.	Nonpriority creditor's name and mailing address PASTOR OF ST. JOSEPH CATHOLIC CHURCH OF MIDDLETOWN 21396 HWY 175 MIDDLETOWN CA 95461 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN

3.262.	Nonpriority creditor's name and mailing address PASTOR OF ST. KATERI TEKAKWITHA CATHOLIC MISSION OF HOOPA KATERI LANE HOOPA CA 95546 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.263.	Nonpriority creditor's name and mailing address PASTOR OF ST. LEO THE GREAT CATHOLIC CHURCH OF BOYES HOT SPRINGS 601 W AGUA CALIENTE RD SONOMA CA 95476 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.264.	Nonpriority creditor's name and mailing address PASTOR OF ST. MARY CATHOLIC CHURCH OF ARCATA 1690 JANES RD ARCATA CA 95521 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN

3.265. **Nonpriority creditor's name and mailing address**

PASTOR OF ST. MARY IMMACULATE CATHOLIC
CHURCH OF LAKEPORT
801 N. MAIN ST.
LAKEPORT CA 95453

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:**

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

INDEMNIFICATION/CONTRIBUTION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNKNOWN

3.266. **Nonpriority creditor's name and mailing address**

PASTOR OF ST. MARY OF THE ANGELS
CATHOLIC CHURCH OF UKIAH
900 S. OAK ST.
UKIAH CA 95482

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:**

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

INDEMNIFICATION/CONTRIBUTION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNKNOWN

3.267. **Nonpriority creditor's name and mailing address**

PASTOR OF ST. PETER CATHOLIC CHURCH OF
CLOVERDALE
491 S. FRANKLIN ST.
CLOVERDALE CA 95425

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:**

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

INDEMNIFICATION/CONTRIBUTION

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNKNOWN

3.268.	Nonpriority creditor's name and mailing address PASTOR OF ST. PHILIP THE APOSTLE CATHOLIC CHURCH OF OCCIDENTAL 3730 BOHEMIAN HWY. OCCIDENTAL CA 95465	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	Amount of claim UNKNOWN
	Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.269.	Nonpriority creditor's name and mailing address PASTOR OF ST. ROSE OF LIMA CATHOLIC CHURCH OF SANTA ROSA 398 TENTH ST. SANTA ROSA CA 95401	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	Amount of claim UNKNOWN
	Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.270.	Nonpriority creditor's name and mailing address PASTOR OF ST. SEBASTIAN CATHOLIC CHURCH OF SEBATOPOL 7983 COVERT LN SEBATOPOL CA 95472	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	Amount of claim UNKNOWN
	Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
	Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.271. Nonpriority creditor's name and mailing address PASTOR OF ST. THOMAS AQUINAS CATHOLIC CHURCH OF NAPA 2725 ELM ST. NAPA CA 94558	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	Amount of claim UNKNOWN
Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.272. Nonpriority creditor's name and mailing address PASTOR OF ST. VINCENT DE PAUL CATHOLIC CHURCH OF PETALUMA 35 LIBERTY ST PETALUMA CA 94952	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	Amount of claim UNKNOWN
Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.273. Nonpriority creditor's name and mailing address PASTOR OF STAR OF THE VALLEY CATHOLIC CHURCH OF SANTA ROSA 545 WHITE OAK DR SANTA ROSA CA 95409	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	Amount of claim UNKNOWN
Date or dates debt was incurred VARIOUS	Basis for the claim: INDEMNIFICATION/CONTRIBUTION	
Last 4 digits of account number:	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.274.	Nonpriority creditor's name and mailing address PASTOR OF VIETNAMESE MARTYRS CATHOLIC CHURCH OF SANTA ROSA 2652 STONY POINT RD SANTA ROSA CA 95407 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INDEMNIFICATION/CONTRIBUTION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNKNOWN
3.275.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.276.	Nonpriority creditor's name and mailing address PERKINS, MARILYN 4020 FINLEY AVE SANTA ROSA CA 95407 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WORKERS COMP Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.277.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.278.	Nonpriority creditor's name and mailing address PURIFICACION, DENNIS 130 KENNISON CT VELLEJO CA 94589 Date or dates debt was incurred 2023 Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: EMPLOYEE EXPENSE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$35.37
3.279.	Nonpriority creditor's name and mailing address RIVERA, MANUEL 987 AIRWAY CT SANTA ROSA CA 95403 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WORKERS COMP Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.280.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.281.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.282.	Nonpriority creditor's name and mailing address Name and Address Intentionally Omitted Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ABUSE CLAIM AGAINST DEBTOR. CLAIMANT'S NAME AND ADDRESS TO BE FILED UNDER SEAL. Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.283. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.**Is the claim subject to offset?**

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.284. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.**Is the claim subject to offset?**

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.285. **Nonpriority creditor's name and mailing address**STIMMEL, ELIZABETH
50 URSULINE RD
SANTA ROSA CA 95403**Date or dates debt was incurred**

VARIOUS

Last 4 digits of account number:**As of the petition filing date, the claim is:***Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

WORKERS COMP

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.286.	Nonpriority creditor's name and mailing address SWING, VICKIE 342 W NAPA ST SONOMA CA 95476 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WORKERS COMP Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED
3.287.	Nonpriority creditor's name and mailing address TOGETHER & ASAMBLEA 3852 E FIRST ST LOS ANGELES CA 90063 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim \$53.70
3.288.	Nonpriority creditor's name and mailing address VALENCIA, EZEQUIEL 50 URSULINE RD PETALUMA CA 95403 Date or dates debt was incurred VARIOUS Last 4 digits of account number:	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WORKERS COMP Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Amount of claim UNDETERMINED

3.289. **Nonpriority creditor's name and mailing address**

WENG-REEDER, SUSYE M.
1810 HUMBOLDT ST
SANTA ROSA CA 95404

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

EEOC ADMINISTRATIVE CLAIM

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.290. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

3.291. **Nonpriority creditor's name and mailing address**

Name and Address Intentionally Omitted

Date or dates debt was incurred

VARIOUS

Last 4 digits of account number:

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

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Basis for the claim:

ABUSE CLAIM AGAINST DEBTOR.
CLAIMANT'S NAME AND ADDRESS TO BE
FILED UNDER SEAL.

Is the claim subject to offset?

- ☒ No
☐ Yes

Amount of claim

UNDETERMINED

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
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.229	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.231	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.232	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.233	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.234	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.235	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.236	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.237	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.238	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.239	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.240	_____
LEWIS ROCA ROTHGERBER CHRISTIE LLP ROBERT M CHARLES JR 203 REDWOOD SHORES PKWY.,STE 670 REDWOOD CITY CA 94065	Part 2 line 3.241	_____

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.242

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.243

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.244

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.245

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.246

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.249

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.250

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.252

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.253

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.254

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.255

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.256

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.257

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.258

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.259

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.260

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.261

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.263

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.264

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.265

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.266

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.267

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.268

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.269

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.270

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.271

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.272

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.273

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.230

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.247

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.248

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.251

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.262

LEWIS ROCA ROTHGERBER CHRISTIE LLP
ROBERT M CHARLES JR
203 REDWOOD SHORES PKWY.,STE 670
REDWOOD CITY CA 94065

Part 2 line 3.274

PAUL GASPARI, ESQ.
WEINTRAUB TOBIN CHEDIAK COLEMAN GRODIN
LAW CORP.
475 SANSOME ST.
SUITE 510
SAN FRANCISCO CA 94111

Part 2 line 3.3

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.		\$67,867.10
5b. Total claims from Part 2	5b.	+	\$1,427,851.04
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.		\$1,495,718.14

Fill in this information to identify the case:**Debtor name:** The Roman Catholic Bishop of Santa Rosa**United States Bankruptcy Court for the:** Northern District of California**Case number (if known):** 23-10113☐ 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.	<table><tr><td>Title of contract</td><td>SOFTWARE AGREEMENT</td></tr><tr><td>State what the contract or lease is for</td><td>ACCOUNTING SOFTWARE MAINTENANCE</td></tr><tr><td>Nature of debtor's interest</td><td></td></tr><tr><td>State the term remaining</td><td>QUARTERLY</td></tr><tr><td>List the contract number of any government contract</td><td></td></tr></table>	Title of contract	SOFTWARE AGREEMENT	State what the contract or lease is for	ACCOUNTING SOFTWARE MAINTENANCE	Nature of debtor's interest		State the term remaining	QUARTERLY	List the contract number of any government contract		ACCUFUND INC. 103 4TH STREET SUITE 110 CASTLE ROCK CO 80104
Title of contract	SOFTWARE AGREEMENT											
State what the contract or lease is for	ACCOUNTING SOFTWARE MAINTENANCE											
Nature of debtor's interest												
State the term remaining	QUARTERLY											
List the contract number of any government contract												
2.2.	<table><tr><td>Title of contract</td><td>INSURANCE POLICY</td></tr><tr><td>State what the contract or lease is for</td><td>LIABILITY INSURANCE; POLICY NO. WS1009022</td></tr><tr><td>Nature of debtor's interest</td><td></td></tr><tr><td>State the term remaining</td><td>7/30/23</td></tr><tr><td>List the contract number of any government contract</td><td></td></tr></table>	Title of contract	INSURANCE POLICY	State what the contract or lease is for	LIABILITY INSURANCE; POLICY NO. WS1009022	Nature of debtor's interest		State the term remaining	7/30/23	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 AIG VIA CATHOLIC MUTUAL C/O CMG AGENCY, INC. 10843 OLD MILL RD STE 300 OMAHA NE 68154
Title of contract	INSURANCE POLICY											
State what the contract or lease is for	LIABILITY INSURANCE; POLICY NO. WS1009022											
Nature of debtor's interest												
State the term remaining	7/30/23											
List the contract number of any government contract												
2.3.	<table><tr><td>Title of contract</td><td>INSURANCE POLICY</td></tr><tr><td>State what the contract or lease is for</td><td>LIABILITY INSURANCE; CERTIFICATE NUMBER 9096</td></tr><tr><td>Nature of debtor's interest</td><td></td></tr><tr><td>State the term remaining</td><td>7/1/23</td></tr><tr><td>List the contract number of any government contract</td><td></td></tr></table>	Title of contract	INSURANCE POLICY	State what the contract or lease is for	LIABILITY INSURANCE; CERTIFICATE NUMBER 9096	Nature of debtor's interest		State the term remaining	7/1/23	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 AON VIA CATHOLIC MUTUAL C/O CMG AGENCY, INC. 10843 OLD MILL RD STE 300 OMAHA NE 68154
Title of contract	INSURANCE POLICY											
State what the contract or lease is for	LIABILITY INSURANCE; CERTIFICATE NUMBER 9096											
Nature of debtor's interest												
State the term remaining	7/1/23											
List the contract number of any government contract												

- 2.4. **Title of contract** CONSULTING AGREEMENT
State what the contract or lease is for INSURANCE CONSULTING ON AN AS NEEDED BASIS
Nature of debtor's interest _____
State the term remaining 07/01/2023, 30 DAYS 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**
ARTHUR J GALLAGHER & CO
FILE # 42163
P.O. BOX 742886
LOS ANGELES CA 90074
- 2.5. **Title of contract** COMMERCIAL PURCHASE AND/OR SERVICES AGREEMENT
State what the contract or lease is for SECURITY ALARM MONITORING SERVICE
Nature of debtor's interest _____
State the term remaining MONTHLY EXTENSION, 30 DAYS NOTICE, PAID THROUGH 05/01/2023
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**
BAY ALARM
P.O. BOX 51041
LOS ANGELES CA 90051-5337
- 2.6. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
BLESSED SACRAMENT MISSION
P.O. BOX 28
ELK CA 95432
- 2.7. **Title of contract** RETIREMENT PLAN ADVISORY SERVICES AGREEMENT
State what the contract or lease is for PRIEST PENSION PLANS INVESTMENT ADVISOR
Nature of debtor's interest _____
State the term remaining NO EXPIRATION, 30 DAYS 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**
CAPTRUST FINANCIAL ADVISORS
DONNA KILLEBREW
4208 SIX FORKS RD
#1700
RALEIGH NC 27609
- 2.8. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
CARDINAL NEWMAN HIGH SCHOOL
4320 OLD REDWOOD HWY
SANTA ROSA CA 95403

- 2.9. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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
CATHOLIC CEMETERIES
985 AIRWAY CT
SANTA ROSA CA 95403
- 2.10. **Title of contract** COMMERCIAL LEASE
State what the contract or lease is for COMMERCIAL LEASE FOR OFFICE PORTION AT 985 AIRWAY COURT
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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
CATHOLIC CHARITIES OF SANTA ROSA
987 AIRWAY CT
SANTA ROSA CA 95402
- 2.11. **Title of contract** INSURANCE POLICY
State what the contract or lease is for COMMERCIAL AND LIABILITY INSURANCE; CERTIFICATE NUMBER 9096
Nature of debtor's interest _____
State the term remaining 7/1/23
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
CATHOLIC MUTUAL RELIEF SOCIETY OF AMERICA
C/O CMG AGENCY, INC.
10843 OLD MILL RD
STE 300
OMAHA NE 68154
- 2.12. **Title of contract** INSURANCE POLICY
State what the contract or lease is for COMMERCIAL AND LIABILITY GAP COVERAGE; CERTIFICATE NO. CERTIFICATE NUMBER 9096
Nature of debtor's interest _____
State the term remaining 7/1/23
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
CATHOLIC UMBRELLA POOL II
C/O CHURCH MUTUAL
PO BOX 2912
MILWAUKEE WI 53201
- 2.13. **Title of contract** STAFFING SERVICE AGREEMENT
State what the contract or lease is for TEMPORARY STAFFING AGENCY AGREEMENT
Nature of debtor's interest _____
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
CERTIFIED EMPLOYMENT GROUP
1421 GUERNEVILLE ROAD
SUITE 114
SANTA ROSA CA 95403

- 2.14. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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
CHRIST THE KING
1951 MCKINLEYVILLE AVE
PO BOX 2367
MCKINLEYVILLE CA 95519
- 2.15. **Title of contract** INSURANCE POLICY
State what the contract or lease is for AUTO INSURANCE; POLICY NO. 09-403873
Nature of debtor's interest _____
State the term remaining 7/1/23
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
CHURCH MUTUAL
C/O CMG AGENCY, INC.
10843 OLD MILL RD
STE 300
OMAHA NE 68154
- 2.16. **Title of contract** INSURANCE POLICY
State what the contract or lease is for WORKERS COMPENSATION; POLICY NO. 07-503275
Nature of debtor's interest _____
State the term remaining 3/22/26
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
CHURCH MUTUAL
C/O CMG AGENCY, INC.
10843 OLD MILL RD
STE 300
OMAHA NE 68154
- 2.17. **Title of contract** IT CONSULTING AGREEMENT
State what the contract or lease is for SOFTWARE CONSULTING SERVICES
Nature of debtor's interest _____
State the term remaining MONTHLY
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
COMPUTERWORKS NFP
SOLUTIONS
2002 IOWA AVE
SUITE 105
RIVERSIDE CA 92507
- 2.18. **Title of contract** TMS3 TRIBUNAL MANAGEMENT SOFTWARE LICENSE AGREEMENT
State what the contract or lease is for TMSWIN3 TRIBUNAL MANAGEMENT SOFTWARE FOR WINDOWS
Nature of debtor's interest _____
State the term remaining 11/13/2023, 30 DAYS 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
ESO SOLUTIONS (FORMERLY
DIGITAL INNOVATION)
P.O. BOX 679449
DALLAS TX 75267-9449

- 2.19. **Title of contract** STAFFING SERVICE AGREEMENT
State what the contract or lease is for TEMPORARY STAFFING SERVICE
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
GAVA TALENT SOLUTIONS, LLC
809-B CUESTA DRIVE
SUITE 2172
MOUNTAIN VIEW CA 94040
- 2.20. **Title of contract** INSURANCE POLICY
State what the contract or lease is for CRIME INSURANCE; POLICY NO. BDJ-H210422-00
Nature of debtor's interest _____
State the term remaining 3/22/23
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**
HANOVER INSURANCE COMPANY
C/O ARTHUR J. GALLAGHER
595 MARKET STREET
SUITE 2100
SAN FRANCISCO CA 94105
- 2.21. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
HOLY FAMILY
1241 NIEBAUM LN
RUTHERFORD CA 94573
- 2.22. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
HOLY FAMILY MISSION
1241 NIEBAUM LN
RUTHERFORD CA 94573
- 2.23. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
HOLY SPIRIT
1244 ST. FRANCIS ROAD
SANTA ROSA CA 95409

- 2.24. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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
HOLY TRINITY MISSION
1951 MCKINLEYVILLE AVE
PO BOX 2367
MCKINLEYVILLE CA 95519
- 2.25. **Title of contract** DIRECT HIRE SERVICE AGREEMENT
State what the contract or lease is for HIRE SERVICE
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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
HOWROYD-WRIGHT EMPLOYMENT
AGENCY, INC. DBA APPLE ONE
EMPLOYMENT SERVICE
P.O. BOX 29048
GLENDALE CA 91209-9048
- 2.26. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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
HUMBOLT STATE NEMAN CENTER
700 UNION ST
ARCATA CA 95521
- 2.27. **Title of contract** MASTER SERVICE AGREEMENT
State what the contract or lease is for PAYROLL PROCESSING
Nature of debtor's interest _____
State the term remaining NO EXPIRATION, 30 DAYS OF 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
INNOVATIVE BUSINESS SOLUTIONS
6400 REDWOOD DRIVE
ROHNERT PARK CA 94928
- 2.28. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for DEPARTMENT OF TREASURY RESPONSE ASSISTANCE
Nature of debtor's interest _____
State the term remaining NO EXPIRATION, 30 DAYS OF 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
LOCKTON INVESTMENT ADVISORS
LLC
DT999224
P.O. BOX 219153
KANSAS CITY MO 64121-9153

- 2.29. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SERVICES TO OBTAIN EFFICIENCY VIA POOLED RESOURCES
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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
MARIAN SISTERS OF SANTA ROSA
400 ANGELA DR
SANTA ROSA CA 95403
- 2.30. **Title of contract** MEMORANDUM
State what the contract or lease is for PRIEST REMUNERATION
Nature of debtor's interest _____
State the term remaining 6/30/23
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
MARY QUEEN OF APOSTLES
PROVINCE
C/O ST. JOSEPH CATHOLIC
CHURCH
P.O. BOX 167
PLENTYWOOD MT 59254-0167
- 2.31. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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
MARY STAR OF THE SEA
39141 CHURCH ST
GUALALA CA 95445
- 2.32. **Title of contract** COLLECTION REPORTING AGREEMENT
State what the contract or lease is for ASSESSMENT TO NATIONAL ORGANIZATION
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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
NATIONAL DIOCESAN
ASSESSMENT
P.O. BOX 96992
WASHINGTON DC 20090-6992
- 2.33. **Title of contract** MASTER SERVICE AGREEMENT
State what the contract or lease is for CONSULTING SERVICES FOR EMPLOYEE BENEFIT PLAN
Nature of debtor's interest _____
State the term remaining 03/25/2024, 90 DAYS OF 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
NICOLAY CONSULTING GROUP
ACCOUNTS RECEIVABLE DEPT
231 SANSOME ST.
SUITE 300
SAN FRANCISCO CA 94104

- 2.34. **Title of contract** ONEFORM SERVICES AGREEMENT
State what the contract or lease is for MINISTERIAL SERVICES IN CONNECTION WITH THE ADMINISTRATION OF LAY RETIREMENT PLANS
Nature of debtor's interest _____
State the term remaining NO EXPIRATION, 30 DAYS 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**
ONE AMERICA
ONE AMERICA SQUARE
P.O. BOX 368
INDIANAPOLIS IN 46206
- 2.35. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
OUR LADY OF GOOD COUNSEL
255 S. HAROLD ST.
FORT BRAGG CA 95437
- 2.36. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
OUR LADY OF GUADALUPE
8400 OLD REDWOOD HWY
WINDSOR CA 95492
- 2.37. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
OUR LADY OF MT. CARMEL
MISSION
26300 ASTI RD
CLOVERDALE CA 95425
- 2.38. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
OUR LADY OF PERPETUAL HELP
901 WASHINGTON ST
CALISTOGA CA 94515

- 2.39. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
OUR LADY OF THE LAKES MISSION
PO BOX 1350
MIDDLETOWN CA 95461
- 2.40. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
OUR LADY OF THE PINES MISSION
PO BOX 1350
MIDDLETOWN CA 95461
- 2.41. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
OUR LADY OF THE REDWOODS
515 MAPLE ST
PO BOX 115
GARBERVILLE CA 95542
- 2.42. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
OUR LADY QUEEN OF PEACE
14435 UHL AVE
PO BOX 460
CLEARLAKE CA 95422
- 2.43. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
OUR LADY QUEEN OF PEACE
MISSION
PO BOX 364
COVELO CA 95426

- 2.44. **Title of contract** LICENSE AND SERVICES AGREEMENT
State what the contract or lease is for ERP SOFTWARE FOR PARISHES
Nature of debtor's interest _____
State the term remaining NO EXPIRATION, 30 DAYS OF 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
PARISHSOFT LLC
3767 RANCHERO DRIVE
UNIT 100
ANN ARBOR MI 48108-2770
- 2.45. **Title of contract** DOMAIN REGISTRAR
State what the contract or lease is for DOMAIN REGISTRATION
Nature of debtor's interest _____
State the term remaining 12/4/2025
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
PDR LTD. D/B/A
PUBLICDOMAINREGISTRY.COM
501, IT BUILDING NO 3
NESCO IT PARK, NESCO COMPLEX,
WESTERN EXPRESS HIGHWAY,
GOREGAON (EAST)
MUMBAI 400063
INDIA
- 2.46. **Title of contract** PURCHASE AGREEMENT/EQUIPMENT AND SOFTWARE MAINTENANCE AGREEMENT
State what the contract or lease is for IT HARDWARE AND RELATED SERVICES
Nature of debtor's interest _____
State the term remaining 4/15/2023, 90 DAYS 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
PITNEY BOWES
P.O. BOX 981022
BOSTON MA 02298-1022
- 2.47. **Title of contract** LEASE AGREEMENT
State what the contract or lease is for IT HARDWARE AND RELATED SERVICES, DIGITAL MAILING SYSTEM
Nature of debtor's interest _____
State the term remaining 10/25/2024, 90 DAYS 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
PITNEY BOWES
P.O. BOX 981022
BOSTON MA 02298-1022
- 2.48. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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
QUEEN OF THE ROSARY MISSION
3892 COUNTRY CLUB RD
LUCERNE CA 95458

- | | | | |
|-------|---|--|--|
| 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 | AGREEMENT
HOSTING, DATA INTEGRATION AND SET-UP FEES FOR EARNING PLATFORM FOR SCHOOLS, PER STUDENT FEE
<hr/> 06/30/2025
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RENAISSANCE LEARNING, INC.
2911 PEACH STREET
WISCONSIN RAPIDS WI 54495-8036 |
| 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 | SERVICES AGREEMENT
TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
<hr/> NO EXPIRATION
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RESURRECTION CHURCH
303 STONY POINT RD
SANTA ROSA CA 95401 |
| 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 | IT HOSTING AGREEMENT
IT NETWORKING SERVICES
<hr/> EXPIRES 12/31/23
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
RIGHT NETWORKS
14 HAMPSHIRE DRIVE
HUDSON NH 03051 |
| 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 | SERVICES AGREEMENT
TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
<hr/> NO EXPIRATION
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SACRED HEART CHURCH
2085 MYRTLE AVE
EUREKA CA 95501 |
| 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 | INSTALLMENT PAYMENT AGREEMENT
DOCUWARE CLOUD SERVICES IN COMBINATION WITH TIAA
<hr/> 8/13/2023
<hr/> | State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
SCOTT TECHNOLOGY GROUP
1143 NORTH MARKET BLVD
#7
SACRAMENTO CA 95834 |

- 2.54. **Title of contract** LICENCE AGREEMENT
State what the contract or lease is for SOFTWARE SERVICES
Nature of debtor's interest _____
State the term remaining EXPIRES 12/31/23
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**
SOFTERWARE INC
601 OFFICE CENTER DRIVE
SUITE 200
FORT WASHINGTON PA 19034
- 2.55. **Title of contract** SONIC SERVICE AGREEMENT AND SERVICE LEVEL AGREEMENT
State what the contract or lease is for PHONE AND E-FAX
Nature of debtor's interest _____
State the term remaining N/A, 30 DAYS 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**
SONICNET LLC
2260 APOLLO WAY
SANTA ROSA CA 95407
- 2.56. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
SSU NEMNAN CENTER
1798 E. COTATI AVE
PENGROVE CA 94591
- 2.57. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST ALOYSIUS
70 SCHOOL ST
PO BOX 66
POINT ARENA CA 95468
- 2.58. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. ANTHONY MENDOCINO
10700 LANSING ST.
MENDOCINO CA 95460

- 2.59. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. ANTHONY OF PADUA
61 W. SAN FRANCISCO AVE
WILLITS CA 95490
- 2.60. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. APOLLONARIS
3700 LASSEN ST.
NAPA CA 94558
- 2.61. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. BERNARD
615 H STREET
EUREKA CA 95501
- 2.62. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. CATHERINE OF SIENA MISSION
20389 FOOTHILL DR
MONTE RIO CA 95462
- 2.63. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. COLMAN CATHOLIC MISSION
5695 CAZADERO HWY
CAZADERO CA 95421

- 2.64. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. ELIZABETH ANN SETON
4595 SNYDER LANE
ROHNERT PARK CA 94928
- 2.65. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. ELIZABETH GUERNEVILLE
14095 WOODLAND DR
GUERNEVILLE CA 95446
- 2.66. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. ELIZABETH SETON MISSION
900 S. OAK ST
UKIAH CA 95482
- 2.67. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. EUGENE CATHEDRAL
2323 MONTGOMERY DR
SANTA ROSA CA 95405
- 2.68. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. FRANCIS MISSION
13370 SPRING ST
HOPLAND CA 95449

- 2.69. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. FRANCIS SOLANO CHURCH
469 THIRD STREET WEST
SONOMA CA 95476
- 2.70. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. HELENA
1340 TANTER ST
ST. HELENA CA 94574
- 2.71. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. JAMES CHURCH
125 SONOMA MOUNTAIN PKWY
PETALUMA CA 94954
- 2.72. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. JOAN OF ARC
6404 WASHINGTON ST
YOUNTVILLE CA 94599
- 2.73. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. JOHN NAPA
960 CAYMUS ST.
NAPA CA 94559

- 2.74. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. JOHN THE BAPTIST CHURCH
208 MATHESON ST
HEALDSBURG CA 95448
- 2.75. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. JOSEPH COTATI
150 ST. JOSEPH WAY
COTATI CA 94931
- 2.76. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. JOSEPH CRESCENT CITY
319 E STREET
CRESCENT CITY CA 95531
- 2.77. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. JOSEPH FORTUNA
2312 NEWBURG RD
FORTUNA CA 95540
- 2.78. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. JOSEPH MIDDLETOWN
21396 HWY 175
PO BOX 1350
MIDDLETOWN CA 95461

- 2.79. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. JOSEPH MISSION BLUE LAKE
340 GREENWOOD AVE
BLUE LAKE CA 95525
- 2.80. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. JOSEPH MISSION EUREKA
615 H STREET
EUREKA CA 95501
- 2.81. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. KATERI TEKAKAWITHA
KATERI LANE
P.O. BOX 429
HOOPA CA 95546
- 2.82. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. LEO THE GREAT
601 W AGUA CALIENTE RD
PO BOX 666
BOYES HOT SPRINGS, CA 95416
SONOMA CA 95476
- 2.83. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. MARY ARCATA
1690 JANES RD
ARCATA CA 95521

- 2.84. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. MARY IMMACULATE
801 N. MAIN ST.
LAKEPORT CA 95453
- 2.85. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. MARY OF THE ANGELS
900 S. OAK ST.
UKIAH CA 95482
- 2.86. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. PATRICK MISSION
2312 NEWBURG RD
FORTUNA CA 95540
- 2.87. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. PATRICK MISSION
546 BERDING ST
PO BOX 1097
FERNDAL CA 95536
- 2.88. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
ST. PETER CHURCH
491 S. FRANKLIN ST.
CLOVERDALE CA 95425

- | | | | |
|-------|--|--|---|
| 2.89. | Title of contract | 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 | TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA | |
| | Nature of debtor's interest | _____ | ST. PETER MISSION
4085 MAIN ST
KELSEYVILLE CA 95451 |
| | State the term remaining | NO EXPIRATION | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.90. | Title of contract | 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 | TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA | |
| | Nature of debtor's interest | _____ | ST. PHILIP THE APOSTLE
3730 BOHEMIAN HWY.
OCCIDENTAL CA 95465 |
| | State the term remaining | NO EXPIRATION | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.91. | Title of contract | 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 | TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA | |
| | Nature of debtor's interest | _____ | ST. ROBERT ST. ANN MISSION
345 KLAMATH BLVD
KLAMATH CA 95548 |
| | State the term remaining | NO EXPIRATION | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.92. | Title of contract | 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 | TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA | |
| | Nature of debtor's interest | _____ | ST. ROSE OF LIMA
398 TENTH ST.
SANTA ROSA CA 95401 |
| | State the term remaining | NO EXPIRATION | |
| | List the contract number of any government contract | _____ | |
| | | | |
| 2.93. | Title of contract | 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 | TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA | |
| | Nature of debtor's interest | _____ | ST. SEBASTIAN
7983 COVERT LN
SEBASTOPOL CA 95472 |
| | State the term remaining | NO EXPIRATION | |
| | List the contract number of any government contract | _____ | |

- 2.94. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
 ST. TERESA OF AVILA
 17120 BODEGA HWY.
 PO BOX 339
 OCCIDENTAL, CA 95465
 BODEGA CA 94922
- 2.95. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
 ST. THOMAS AQUINAS
 2725 ELM ST.
 NAPA CA 94558
- 2.96. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
 ST. VINCENT DE PAUL CHURCH
 35 LIBERTY ST
 PETALUMA CA 94952
- 2.97. **Title of contract** SERVICES AGREEMENT
State what the contract or lease is for TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
Nature of debtor's interest _____
State the term remaining NO EXPIRATION
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**
 STAR OF THE VALLEY
 545 WHITE OAK DR
 SANTA ROSA CA 95409
- 2.98. **Title of contract** INSTALLMENT PAYMENT AGREEMENT
State what the contract or lease is for DOCUWARE CLOUD SERVICES VIA SCOTT TECHNOLOGY GROUP
Nature of debtor's interest _____
State the term remaining 8/13/2023, 30 DAYS 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**
 TIAA FSB
 CONTRACT 41759478
 P.O. BOX 911608
 DENVER CO 80291-1608

- 2.99. **Title of contract** MASTER SERVICE AGREEMENT **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** UTILITIES, TOO; INTERNET (INCL. HARDWARE) AND DATA STORAGE
- Nature of debtor's interest** _____ TPX COMMUNICATIONS
P.O. BOX 509013
SAN DIEGO CA 92150-9013
- State the term remaining** EXPIRES 04/30/2024
- List the contract number of any government contract** _____
-
- 2.100. **Title of contract** INSURANCE POLICY **State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**
- State what the contract or lease is for** FIDUCIARY LIABILITY INSURANCE; POLICY NO. 105961906
- Nature of debtor's interest** _____ TRAVELERS CASUALTY AND SURIETY CO OF AMERICA (THE TRAVELERS COMPANIES, INC.)
C/O ARTHUR J. GALLAGHER
595 MARKET STREET
SUITE 2100
SAN FRANCISCO CA 94105
- State the term remaining** 7/1/23
- List the contract number of any government contract** _____
-
- 2.101. **Title of contract** 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** TO PROVIDE CERTAIN SUPPORT SERVICES PARISHES, MISSIONS AND ENTITIES WITHIN THE DIOCESE OF SANTA ROSA
- Nature of debtor's interest** _____ VIETNAMESE MARTYRS
2652 STONY POINT RD
SANTA ROSA CA 95407
- State the term remaining** NO EXPIRATION
- List the contract number of any government contract** _____

Fill in this information to identify the case:**Debtor name:** The Roman Catholic Bishop of Santa Rosa**United States Bankruptcy Court for the:** Northern District of California**Case number (if known):** 23-10113☐ 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. CARDINAL NEWMAN HIGH SCHOOL	4320 OLD REDWOOD HWY SANTA ROSA CA 95403	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.2. DE LA SALLE INSTITUTE	4401 REDWOOD ROAD NAPA CA 94558	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.3. HANNA BOYS CENTER	17000 ARNOLD DR SONOMA CA 95476	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.4. JUSTIN-SIENA HIGH SCHOOL	4026 MAHER ST NAPA CA 94558	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.5. MONT LA SALLE	4405 REDWOOD RD NAPA CA 94558	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.6. PASTOR OF CHRIST THE KING CATHOLIC CHURCH OF MCKINLEYVILLE	1951 MCKINLEYVILLE AVE MCKINLEYVILLE CA 95519	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.7. 1 PASTOR OF HOLY SPIRIT CATHOLIC CHURCH OF SANTA ROSA	1244 ST. FRANCIS ROAD SANTA ROSA CA 95409	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.8. 1 PASTOR OF OUR LADY OF GUADALUPE CATHOLIC CHURCH OF WINDSOR	8400 OLD REDWOOD HWY WINDSOR CA 95492	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.9. 1 PASTOR OF OUR LADY OF PERPETUAL HELP CATHOLIC CHURCH OF CALISTOGA	901 WASHINGTON ST CALISTOGA CA 94515	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.10. 1 PASTOR OF OUR LADY OF THE REDWOODS CATHOLIC CHURCH OF GARBERVILLE	515 MAPLE ST GARBERVILLE CA 95542	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.11. 1 PASTOR OF RESURRECTION CATHOLIC CHURCH OF SANTA ROSA	303 STONY POINT RD SANTA ROSA CA 95401	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.12. 1 PASTOR OF SACRED HEART CATHOLIC CHURCH OF EUREKA	2085 MYRTLE AVE EUREKA CA 95501	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.13. 1 PASTOR OF ST BERNARD CATHOLIC CHURCH OF EUREKA	615 H STREET EUREKA CA 95501	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.14. 1 PASTOR OF ST. ANTHONY CATHOLIC CHURCH OF MENDOCINO	10700 LANSING ST. MENDOCINO CA 95460	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.15. 1 PASTOR OF ST. APOLLINARIS CATHOLIC CHURCH OF NAPA	3700 LASSEN ST NAPA CA 94558	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.16. 1 PASTOR OF ST. ELIZABETH ANN SETON CATHOLIC CHURCH OF ROHNERT PARK	4595 SNYDER LANE ROHNERT PARK CA 94928	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.17. 1 PASTOR OF ST. ELIZABETH CATHOLIC CHURCH OF GUERNEVILLE	14095 WOODLAND DR GUERNEVILLE CA 95446	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.18. PASTOR OF ST. EUGENE 1 CATHEDRAL OF SANTA ROSA	2323 MONTGOMERY DR SANTA ROSA CA 95405	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.19. PASTOR OF ST. FRANCIS 1 SOLANO CATHOLIC CHURCH OF SONOMA	469 THIRD STREET WEST SONOMA CA 95476	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.20. PASTOR OF ST. HELENA 1 CATHOLIC CHURCH OF ST. HELENA	1340 TAINTER ST ST HELENA CA 94574	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.21. PASTOR OF ST. MARY 1 CATHOLIC CHURCH OF ARCATA	1690 JANES RD ARCATA CA 95521	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.22. PASTOR OF ST. MARY 1 IMMACULATE CATHOLIC CHURCH OF LAKEPORT	801 N. MAIN ST. LAKEPORT CA 95453	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.23. PASTOR OF ST. PETER 1 CATHOLIC CHURCH OF CLOVERDALE	491 S. FRANKLIN ST. CLOVERDALE CA 95425	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.24. PASTOR OF ST. ROSE OF 1 LIMA CATHOLIC CHURCH OF SANTA ROSA	398 TENTH ST. SANTA ROSA CA 95401	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.25. PASTOR OF ST. SEBASTIAN 1 CATHOLIC CHURCH OF SEBATOPOL	7983 COVERT LN SEBATOPOL CA 95472	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.26. PASTOR OF ST. THOMAS 1 AQUINAS CATHOLIC CHURCH OF NAPA	2725 ELM ST. NAPA CA 94558	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.27. PASTOR OF ST. VINCENT DE 1 PAUL CATHOLIC CHURCH OF PETALUMA	35 LIBERTY ST PETALUMA CA 94952	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.28. ROMAN CATHOLIC DIOCESE ¹ OF OAKLAND	2121 HARRISTON ST STE 100 OAKLAND CA 94612	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.29. ROMAN CATHOLIC WELFARE ¹ CORP.	4300 OLD REDWOOD HWY SANTA ROSA CA 95403	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.30. SALESIAN COLLEGE ¹ PREPATORY	2851 SALESIAN AVE RICHMOND CA 94804	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.31. SANTA ROSA URSULINE ¹ CORP.	9248 LAKEWOOD DR WINDSOR CA 95492	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.32. ST JOSEPH'S CATHOLIC ¹ CHURCH	201 HENDERSON ST EUREKA CA 95501	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
2.33. URSULINE SISTERS OF THE ¹ WESTERN PROVINCE	90 URSULINE RD SANTA ROSA CA 95403	_____	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G

¹CO-DEFENDANT IN ABUSE LITIGATION

Fill in this information to identify the case:

Debtor name: The Roman Catholic Bishop of Santa Rosa

United States Bankruptcy Court for the: Northern District of California

Case number (if known): 23-10113

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

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

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

Declaration and signature

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

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

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

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

Executed on 4/6/2023
MM/DD/YYYY

x /s/ Deacon Joe Oberting
Signature of individual signing on behalf of debtor

Deacon Joe Oberting
Printed name

Chief Financial Officer
Position or relationship to debtor