

Fill in this information to identify your case:

Debtor 1	SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Eastern		District of CA
			(State)
Case number	24-23489-B-11		
	(if known)		

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. Schedule A/B: Property (Official Form 106A/B)

1a. Copy line 55, Total real estate, from Schedule A/B \$ 1,396,218.00

1b. Copy line 62, Total personal property, from Schedule A/B \$ 366,600.00

1c. Copy line 63, Total of all property on Schedule A/B..... \$ 1,762,818.00

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)

2a. Copy the total you listed in Column A, *Amount of claim*, at the bottom of the last page of Part 1 of Schedule D \$ 34,249,333.60

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... \$ 0.00

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... + \$ 8,925,047.10

Your total liabilities

\$ 43,074,380.70

Part 3: Summarize Your Income and Expenses

4. Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I \$ 14,902.60

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22c of Schedule J \$ 19,738.00

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name

Middle Name

Last Name

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

☒ Yes

7. What kind of debt do you have?

☐ Your debts are primarily consumer debts. Consumer debts are those “incurred by an individual primarily for a personal, family, or household purpose.” 11 U.S.C § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C § 159.

☒ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$

9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:

	Total claim
From Part 4 on <i>Schedule E/F</i> , copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. Total. Add lines 9a through 9f.	\$ 0.00

Fill in this information to identify your case and this filing:

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA
FARMS
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____
(State)

Case number 24-23489-B-11

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
- ☒ Yes. Where is the property?

1.1. _____
Street address, if available, or other description

6188 Luckehe Road

Live Oak CA 95953
City State ZIP Code

Sutter
County

What is the property? Check all that apply.

- ☐ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☐ Land
- ☐ Investment property
- ☐ Timeshare

☒ Other Processing Facility
Who has an interest in the property? Check one. _____

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ 2,000,000.00

Current value of the portion you own? \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.2. Walnuts
Street address, if available, or other description

6188 Luckehe Road

Live Oak CA 95953
City State ZIP Code

Sutter
County

What is the property? Check all that apply.

- ☐ Single-family home
- ☐ Duplex or multi-unit building
- ☐ Condominium or cooperative
- ☐ Manufactured or mobile home
- ☒ Land
- ☐ Investment property
- ☐ Timeshare

☐ Other _____
Who has an interest in the property? Check one. _____

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? \$ 825,000.00

Current value of the portion you own? \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name

Middle Name

Last Name

Case number (if known) 24-23489-B-11

1.3. Almonds

Street address, if available, or other description

6188 Luckehe Road

Live Oak

CA

95953

City

State

ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 1,732,800.00 \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

1.4. Tulare Walnuts

Street address, if available, or other description

APNs 08-240-040 & 041

Live Oak

CA

95953

City

State

ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 1,325,000.00 \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

1.5. Walnuts

Street address, if available, or other description

APNs 021-170-046 & 054

Gridley

CA

95953

City

State

ZIP Code

Butte

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 1,300,000.00 \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

Debtor 1 **SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS**

First Name Middle Name Last Name

Case number (if known) **24-23489-B-11**

1.6. **Peaches**

Street address, if available, or other description

APNs024-160-018 & 027

Gridley **CA** **95948**
City State ZIP Code

Butte
County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 562,500.00 \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

1.7. **Walnuts**

Street address, if available, or other description

APN 025-210-031

Gridley **CA** **95948**
City State ZIP Code

Butte
County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 1,775,000.00 \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

1.8. **Walnuts**

Street address, if available, or other description

442 E. Gridley Road

Gridley **CA** **95948**
City State ZIP Code

Butte
County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 840,000.00 \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

Debtor 1 **SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS**

First Name Middle Name Last Name

Case number (if known) **24-23489-B-11**

1.9. **Walnuts**

Street address, if available, or other description

APNs024-180-036 & 060

Gridley **CA** **95948**
City State ZIP Code

Butte

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 1,950,000.00 \$ 1,396,218.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

1.10 **Peaches**

Street address, if available, or other description

APN 09-010-094

Live Oak **CA** **95953**
City State ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 1,057,700.00 \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

1.11 **Walnuts**

Street address, if available, or other description

10904 Metteer Road

Live Oak **CA** **95953**
City State ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 939,375.00 \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

1.12 Peaches & Walnuts

Street address, if available, or other description

APNs 024-180-072 & 073

Gridley CA 95948
City State ZIP Code

Butte

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 1,740,000.00 \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

1.13 Walnuts

Street address, if available, or other description

1200 E. Gridley Road

Gridley CA 95948
City State ZIP Code

Butte

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 2,747,500.00 \$ 0.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

1.14 Walnuts

Street address, if available, or other description

527 Ord Ranch Road

Gridley CA 95948
City State ZIP Code

Butte

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ 1,177,500.00 \$

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

Debtor 1 **SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS**

First Name Middle Name Last Name

Case number (if known) **24-23489-B-11**

1.15 **Peaches**

Street address, if available, or other description

10421 Larkin Road

Live Oak CA 95953
City State ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ **262,500.00** \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

1.16 **Walnuts**

Street address, if available, or other description

9746 Sheldon Avenue

Live Oak CA 95953
City State ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ **245,000.00** \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

1.17 **Prunes and Almonds**

Street address, if available, or other description

APNs08-090-006, 11 & 12, 08-100-047, 076, 078, & 080

Live Oak CA 95953
City State ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ **5,550,000.00** \$ _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ **Check if this is community property** (see instructions)

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-111.18 Walnuts

Street address, if available, or other description

APNs 024-210-033 & 034

Gridley CA 95948
City State ZIP Code

Butte

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local
property identification number:** _____

Do not deduct secured claims or exemptions. Put
the amount of any secured claims on *Schedule D:
Creditors Who Have Claims Secured by Property.*

Current value of the entire property? **Current value of the portion you own?**

\$ 2,350,000.00 \$ _____

**Describe the nature of your ownership
interest (such as fee simple, tenancy by
the entireties, or a life estate), if known.**

☐ **Check if this is community property**
(see instructions)

1.19 Persimmons

Street address, if available, or other description

3854 Riviera Road

Live Oak CA 95953
City State ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local
property identification number:** _____

Do not deduct secured claims or exemptions. Put
the amount of any secured claims on *Schedule D:
Creditors Who Have Claims Secured by Property.*

Current value of the entire property? **Current value of the portion you own?**

\$ 620,000.00 \$ _____

**Describe the nature of your ownership
interest (such as fee simple, tenancy by
the entireties, or a life estate), if known.**

☐ **Check if this is community property**
(see instructions)

1.20 855 Harter Parkway

Street address, if available, or other description

Second and Third Floors

Yuba City CA 95993
City State ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☒ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

**Other information you wish to add about this item, such as local
property identification number:** _____

Do not deduct secured claims or exemptions. Put
the amount of any secured claims on *Schedule D:
Creditors Who Have Claims Secured by Property.*

Current value of the entire property? **Current value of the portion you own?**

\$ 4,500,000.00 \$ _____

**Describe the nature of your ownership
interest (such as fee simple, tenancy by
the entireties, or a life estate), if known.**

☐ **Check if this is community property**
(see instructions)

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

1.21 Walnuts

Street address, if available, or other description

9850 Sheldon Avenue

Live Oak CA 95953
City State ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☒ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local
property identification number: _____

Do not deduct secured claims or exemptions. Put
the amount of any secured claims on *Schedule D:*
Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 750,000.00 \$ _____

Describe the nature of your ownership
interest (such as fee simple, tenancy by
the entireties, or a life estate), if known.

☐ Check if this is community property
(see instructions)

1.22 Rental

Street address, if available, or other description

7840 Lyon Street

Sutter CA 95982
City State ZIP Code

Sutter

County

What is the property? Check all that apply.

- ☐ Single-family home
☒ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local
property identification number: _____

Do not deduct secured claims or exemptions. Put
the amount of any secured claims on *Schedule D:*
Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ 500,000.00 \$ _____

Describe the nature of your ownership
interest (such as fee simple, tenancy by
the entireties, or a life estate), if known.

☐ Check if this is community property
(see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages
you have attached for Part 1. Write that number here



\$ 1,396,218.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles
you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases.*

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1. Make:

Cadillac
Escalade

Model:

2023

Who has an interest in the property? Check one.

- ☐ Debtor 1 only

Do not deduct secured claims or exemptions. Put
the amount of any secured claims on *Schedule D:*
Creditors Who Have Claims Secured by Property.

Year: _____

Approximate mileage: 12000

Other information:

- ☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Current value of the entire property? **Current value of the portion you own?**

\$ 85,000.00 \$ 85,000.00

If you own or have more than one, describe here:

3.2. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ _____ \$ _____

3.3. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ _____ \$ _____

3.4. Make: _____

Model: _____

Year: _____

Approximate mileage: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ _____ \$ _____

4. **Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☒ No
☐ Yes

4.1. Make: _____

Model: _____

Year: _____

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ **Check if this is community property** (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? **Current value of the portion you own?**

\$ _____ \$ _____

If you own or have more than one, list here:

4.1. Make: _____

Model: _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Year: _____

Other information:

- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another
- ☐ Check if this is community property (see instructions)

Current value of the entire property?	Current value of the portion you own?
\$ _____	\$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....→

\$ 85,000.00

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name

Middle Name

Last Name

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

6. Household goods and furnishings*Examples:* Major appliances, furniture, linens, china, kitchenware☐ No☒ Yes. Describe

\$ 10,000.00

7. Electronics*Examples:* Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games☐ No☒ Yes. Describe

\$ 5,000.00

8. Collectibles of value*Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles☒ No☐ Yes. Describe

\$

9. Equipment for sports and hobbies*Examples:* Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments☒ No☐ Yes. Describe

\$

10. Firearms*Examples:* Pistols, rifles, shotguns, ammunition, and related equipment☐ No☒ Yes. Describe

\$ 1,000.00

11. Clothes*Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories☐ No☒ Yes. Describe

\$ 8,500.00

12. Jewelry*Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver☐ No☒ Yes. Describe

\$ 1,000.00

13. Non-farm animals*Examples:* Dogs, cats, birds, horses☒ No☐ Yes. Describe

\$

14 Any other personal and household items you did not already list, including any health aids you did not list☒ No☐ Yes. Give specific information

\$

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here →

\$ 25,500.00

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes

Cash: _____ \$ 900.00

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes.....

Institution name:

17.1. Checking account: Citizens Business Bank \$ 200.00

17.2. Checking account: _____ \$ _____

17.3. Savings account: _____ \$ _____

17.4. Savings account: _____ \$ _____

17.5. Certificates of deposit: _____ \$ _____

17.6. Other financial account: _____ \$ _____

17.7. Other financial account: _____ \$ _____

17.8. Other financial account: _____ \$ _____

17.9. Other financial account: _____ \$ _____

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes.....

Institution or issuer name:

_____ \$ _____

_____ \$ _____

_____ \$ _____

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

☐ No

☒ Yes. Give specific information about them.....

Name of entity:

SEE ATTACHED

% of ownership:

_____ % \$ _____

_____ % \$ _____

_____ % \$ _____

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) **24-23489-B-11**

First Name Middle Name Last Name

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific
 information about
 them.....

Issuer name:

_____	\$	_____
_____	\$	_____
_____	\$	_____

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each
 account separately..

Type of account: Institution name:

401(k) or similar plan:	_____	\$	_____
Pension plan:	_____	\$	_____
IRA:	_____	\$	_____
Retirement account:	_____	\$	_____
Keogh:	_____	\$	_____
Additional account:	_____	\$	_____
Additional account:	_____	\$	_____

22 Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

☒ No

☐ Yes

Institution name or individual:

Electric:	_____	\$	_____
Gas:	_____	\$	_____
Heating oil:	_____	\$	_____
Security deposit on rental unit:	_____	\$	_____
Prepaid rent:	_____	\$	_____
Telephone:	_____	\$	_____
Water:	_____	\$	_____
Rented furniture:	_____	\$	_____
Other:	_____	\$	_____

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes.....

Issuer name and description:

_____	\$	_____
_____	\$	_____
_____	\$	_____

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Case number (if known) **24-23489-B-11**

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c):

_____	\$ _____
_____	\$ _____
_____	\$ _____

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

☒ No

☐ Yes. Give specific information about them. .

	\$ _____
--	----------

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them. .

	\$ _____
--	----------

27. Licenses, franchises, and other general intangibles

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them. .

	\$ _____
--	----------

Money or property owed to you?

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

28. Tax refunds owed to you

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.....

--

Federal:	\$ _____
State:	\$ _____
Local:	\$ _____

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.

--

Alimony:	\$ _____
Maintenance:	\$ _____
Support:	\$ _____
Divorce settlement:	\$ _____
Property settlement:	\$ _____

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information.

	\$ _____
--	----------

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name

Middle Name

Last Name

31. Interests in insurance policies*Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance☐ No☒ Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

American General Life

Jaismin Pamma

\$ 10,000.00

\$

\$

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No☐ Yes. Give specific information.

\$

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment*Examples:* Accidents, employment disputes, insurance claims, or rights to sue☒ No☐ Yes. Describe each claim.

\$

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims☒ No☐ Yes. Describe each claim.

\$

35. Any financial assets you did not already list☒ No☐ Yes. Give specific information.

\$

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here

\$ 1,100.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**37. Do you own or have any legal or equitable interest in any business-related property?**☐ No. Go to Part 6.☒ Yes. Go to line 38.**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned☒ No☐ Yes. Describe....

\$

39. Office equipment, furnishings, and supplies*Examples:* Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices☐ No☒ Yes. Describe....

\$

5,000.00

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Case number (if known) **24-23489-B-11**

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☒ No

☐ Yes. Describe.....

\$

40. Inventory

☒ No

☐ Yes. Describe.....

\$

42 Interests in partnerships or joint ventures

☒ No

☐ Yes. Describe..... Name of entity:

% of ownership:

%

\$

%

\$

%

\$

43. Customer lists, mailing lists, or other compilations

☒ No

☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

☐ No

☐ Yes. Describe

\$

44. Any business-related property you did not already list

☒ No

☐ Yes. Give specific information

\$

\$

\$

\$

\$

\$

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here →

\$

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
 If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☐ No. Go to Part 7.

☒ Yes. Go to line 47.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☒ No

☐ Yes

\$

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name

Middle Name

Last Name

48. Crops—either growing or harvested

☐ No☒ Yes. Give specific information

Growing Crops

\$ 250,000.00

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

☒ No☐ Yes.....

\$

50. Farm and fishing supplies, chemicals, and feed

☒ No☐ Yes.....

\$

51. Any farm- and commercial fishing-related property you did not already list

☒ No☐ Yes. Give specific information

\$

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here

\$

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No☐ Yes. Give specific information.....

\$

\$

\$

54. Add the dollar value of all of your entries from Part 7. Write that number here

\$

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2..... ➔ \$ 1,396,218.00

56. Part 2: Total vehicles, line 5 \$ 85,000.00

57. Part 3: Total personal and household items, line 15 \$ 25,500.00

58. Part 4: Total financial assets, line 36 \$ 1,100.00

59. Part 5: Total business-related property, line 45 \$ 5,000.00

60. Part 6: Total farm- and fishing-related property, line 52 \$ 250,000.00

61. Part 7: Total other property not listed, line 54 + \$

62. Total personal property. Add lines 56 through 61 \$ 366,600.00 Copy personal property total ➔ + \$ 366,600.00

63. Total of all property on Schedule A/B. Add line 55 + line 62..... \$ 1,762,818.00

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

Name of Entity	% of Ownership
Bonanza Farms LLC	100%
Fortune Farmstead, Inc.	100%
Golden Valley Orchards LLC	50%
Imperial Orchards LLC	50%
Montana Tractor & Machinery	90%
Pamma Law Firm	100%
Riverside Ranches LLC	100%
Sutter Buttes Mercantile LLC	90%
West Horizon Farms LLC	100%

Fill in this information to identify your case:

Debtor 1	SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMAS		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <u>Eastern</u> District of <u>CA</u>			
Case number (If known)	<u>24-23489-B-11</u>		

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☒ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: <u>9850 Sheldon Ave (Home)</u> Line from <i>Schedule A/B</i> : <u> </u>	\$ <u>300,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>C.C.P. § 704.730</u>
Brief description: <u>vehicle</u> Line from <i>Schedule A/B</i> : <u>3.1</u>	\$ <u>85,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>C.C.P. § 704.010</u>
Brief description: <u>household goods</u> Line from <i>Schedule A/B</i> : <u>3.6</u>	\$ <u>10,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>C.C.P. § 704.020</u>

3. Are you claiming a homestead exemption of more than \$189,050?

(Subject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☐ No
☐ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☐ Yes

Debtor 1 **SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS**
 First Name Middle Name Last Name

Case number (if known) **24-23489-B-11**

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own <small>Copy the value from Schedule A/B</small>	Amount of the exemption you claim <small>Check only one box for each exemption</small>	Specific laws that allow exemption
Brief description: <u>electronics</u> Line from Schedule A/B: <u>3.7</u>	\$ <u>5,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>C.C.P. § 704.040</u>
Brief description: <u>clothes</u> Line from Schedule A/B: <u>3.11</u>	\$ <u>8,500.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>C.C.P. § 704.020</u>
Brief description: <u>jewelry</u> Line from Schedule A/B: <u>3.12</u>	\$ <u>1,000.00</u>	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	<u>C.C.P. § 704.040</u>
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	_____

Fill in this information to identify your case:

Debtor 1 **SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS**
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of (State)

Case number **24-23489-B-11**
(If known)

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A
Amount of claim
Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim

Column C
Unsecured portion
If any

2.1 Afg Funding Spv Cntrct

Describe the property that secures the claim:

\$ 25,000.00

\$ \$

Creditor's Name
3150 SW 38th Ave
Number Street

Equipment

Miami FL 33146
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
☐ Unliquidated
☒ Disputed

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

2.2 Ag West Farm Credit

Describe the property that secures the claim:

\$ 11,336,581.00

\$ \$

Creditor's Name
1800 Lassen Blvd
Number Street

Ag Real Estate

Yuba City CA 95993
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 11,361,581.00

page 1 of

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any			
2.3	Alliance Funding Group <small>Creditor's Name</small> 17542 17th Street <small>Number Street</small> Suite 200 Tustin CA 92780 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Equipment As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _			\$ 50,000.00	\$ 1.00	\$ _____
2.4	Ally <small>Creditor's Name</small> PO Box 380901 <small>Number Street</small> Bloomington MN 55438 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Automobile As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _			\$ 0.00	\$ _____	\$ _____
2.5	Amur Equipment <small>Creditor's Name</small> PO Box 2555 <small>Number Street</small> Grand Island NE 68801 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Equipment As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _			\$ 200,000.00	\$ _____	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 250,000.00					
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____					

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

Debtor 1

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any	
2.6	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Ascentium Capital</div> <div style="font-size: small;">Creditor's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">23970 Highway 59 N</div> <div style="font-size: small;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Kingwood TX 77339</div> <div style="font-size: small;">City State ZIP Code</div> <div style="margin-top: 10px;"> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> </div> <div style="margin-top: 10px;"> <p>Date debt was incurred _____</p> </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Describe the property that secures the claim:</div> <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> <div style="margin-top: 10px;"> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> </div> <div style="margin-top: 10px;"> <p>Last 4 digits of account number ____ _</p> </div>	\$ 200,000.00	\$ _____	\$ _____
2.7	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Balboa Capital</div> <div style="font-size: small;">Creditor's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">575 Anton Blvd</div> <div style="font-size: small;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">12th Floor</div> <div style="font-size: small;">City State ZIP Code</div> <div style="margin-top: 10px;"> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> </div> <div style="margin-top: 10px;"> <p>Date debt was incurred _____</p> </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Describe the property that secures the claim:</div> <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> <div style="margin-top: 10px;"> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> </div> <div style="margin-top: 10px;"> <p>Last 4 digits of account number ____ _</p> </div>	\$ 150,000.00	\$ _____	\$ _____
2.8	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Bank of Feather River</div> <div style="font-size: small;">Creditor's Name</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">35 S. Lindan Ave.</div> <div style="font-size: small;">Number Street</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Quincy CA 95971</div> <div style="font-size: small;">City State ZIP Code</div> <div style="margin-top: 10px;"> <p>Who owes the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> </div> <div style="margin-top: 10px;"> <p>Date debt was incurred _____</p> </div>	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Describe the property that secures the claim:</div> <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Ag Real Estate</div> <div style="margin-top: 10px;"> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> </div> <div style="margin-top: 10px;"> <p>Last 4 digits of account number ____ _</p> </div>	\$ 0.00	\$ _____	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 350,000.00			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____			

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.9	Blue Bridge Financial, LLC Creditor's Name 18301 Von Karman Ave Number Street Irvine CA 92612 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number ____ _	Describe the property that secures the claim: Equipment As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	\$ 90,000.00	\$ _____
2.10	Butte County Tax Collector Creditor's Name 25 County Center Dr. Number Street Ste. 125 Oroville CA 95965 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number ____ _	Describe the property that secures the claim: Real Property Taxes As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	\$ 150,000.00	\$ _____
2.11	Chrysler Capital Creditor's Name PO Box 660335 Number Street Dallas TX 75266 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number ____ _	Describe the property that secures the claim: Business Automobile As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____	\$ 73,402.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 313,402.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.12	Chrysler Capital <small>Creditor's Name</small> PO Box 660335 <small>Number Street</small> Dallas TX 75266 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Business Automobile</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 27,294.00	\$ _____
2.13	Citizens Bank <small>Creditor's Name</small> 700 Plumas Street <small>Number Street</small> Yuba City CA 95991 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Crops</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 1,000.00	\$ _____
2.14	Citizens Business Bank <small>Creditor's Name</small> 701 N Haven Ave <small>Number Street</small> Ontario CA 91764 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Crops</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 1,935,229.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 1,963,523.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.15	Crestmark <small>Creditor's Name</small> 5480 Corporate Dr <small>Number Street</small> Suite 350 Troy MI 48098 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 31,597.00	\$ _____
2.16	Currency Pay Capital <small>Creditor's Name</small> 8930 East Raintree Drive <small>Number Street</small> Scottsdale AZ 85260 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 1,000.00	\$ _____
2.17	Dee Gibbs Revocable Trust <small>Creditor's Name</small> 103 Echo Court <small>Number Street</small> Folsom CA 95630 <small>City State ZIP Code</small> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Ag Real Estate</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 215,000.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 247,597.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

Debtor 1

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

	Additional Page Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>	
2.18	Direct Capital <small>Creditor's Name</small> <div style="border: 1px solid black; padding: 2px;">PO Box 856502</div> <div style="display: flex; justify-content: space-between;"><small>Number</small> <small>Street</small></div> <div style="border: 1px solid black; padding: 2px; margin-top: 10px;">Minneapolis MN 55485</div> <div style="display: flex; justify-content: space-between;"><small>City</small> <small>State</small> <small>ZIP Code</small></div> <p>Who owes the debt? Check one.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt </div> <p>Date debt was incurred _____</p>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Equipment</div> <p>As of the date you file, the claim is: Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed </div> <p>Nature of lien. Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </div> <p>Last 4 digits of account number ____ _</p>	\$ 200,000.00	\$ _____	\$ _____
2.19	Diversified Financial <small>Creditor's Name</small> <div style="border: 1px solid black; padding: 2px;">1552 Laurel St</div> <div style="display: flex; justify-content: space-between;"><small>Number</small> <small>Street</small></div> <div style="border: 1px solid black; padding: 2px; margin-top: 10px;">San Carlos CA 94070</div> <div style="display: flex; justify-content: space-between;"><small>City</small> <small>State</small> <small>ZIP Code</small></div> <p>Who owes the debt? Check one.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt </div> <p>Date debt was incurred _____</p>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Equipment</div> <p>As of the date you file, the claim is: Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed </div> <p>Nature of lien. Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </div> <p>Last 4 digits of account number ____ _</p>	\$ 1,000.00	\$ _____	\$ _____
2.20	Diversified Financial Services <small>Creditor's Name</small> <div style="border: 1px solid black; padding: 2px;">PO Box 30238</div> <div style="display: flex; justify-content: space-between;"><small>Number</small> <small>Street</small></div> <div style="border: 1px solid black; padding: 2px; margin-top: 10px;">Omaha NE 68103</div> <div style="display: flex; justify-content: space-between;"><small>City</small> <small>State</small> <small>ZIP Code</small></div> <p>Who owes the debt? Check one.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt </div> <p>Date debt was incurred _____</p>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Equipment</div> <p>As of the date you file, the claim is: Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed </div> <p>Nature of lien. Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </div> <p>Last 4 digits of account number ____ _</p>	\$ 0.00	\$ _____	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 201,000.00			
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____			

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1:	Additional Page	Column A	Column B	Column C
	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.21	DLL Finance LLC <small>Creditor's Name</small> PO Box 2000 <small>Number Street</small> Johnston IA 50131 <small>City State ZIP Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Equipment</div>	\$ 59,879.00	\$ _____ \$ _____
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____ Last 4 digits of account number ____ _</p>				
2.22	Emma Holderness Trust <small>Creditor's Name</small> 476 Century Park Dr. <small>Number Street</small> Ste A Yuba City CA 95991 <small>City State ZIP Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Real Estate</div>	\$ 81,250.00	\$ _____ \$ _____
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p> <p>Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____ Last 4 digits of account number ____ _</p>				
2.23	EverBank Commercial Finance <small>Creditor's Name</small> PO Box 911608 <small>Number Street</small> Denver CO 80291 <small>City State ZIP Code</small>	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Equipment</div>	\$ 0.00	\$ _____ \$ _____
<p>As of the date you file, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____</p> <p>Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____ Last 4 digits of account number ____ _</p>				
Add the dollar value of your entries in Column A on this page. Write that number here:			\$ 141,129.00	
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:			\$ _____	

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1:	Additional Page	Column A	Column B	Column C
	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.24	FBN Comppeer <small>Creditor's Name</small> 1921 Premier Dr <small>Number Street</small> Mankato MN 56001 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Crops</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 2,000,000.00	\$ _____
2.25	FBN Finance, Inc <small>Creditor's Name</small> PO Box 64055 <small>Number Street</small> Saint Paul MN 55164 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Crops</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 500,000.00	\$ _____
2.26	Ferns, Adams & Associates <small>Creditor's Name</small> 2815 Mitchell Dr. <small>Number Street</small> Suite 210 Walnut Creek CA 94598 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 50,000.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 2,550,000.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any			
2.27	Financial Pacific Leasing <small>Creditor's Name</small> <div style="border: 1px solid black; padding: 2px;">3455 S 344th Way</div> <small>Number Street</small> <div style="border: 1px solid black; padding: 2px;">#300</div> <div style="border: 1px solid black; padding: 2px;">Federal Way WA 98001</div> <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 2px; display: inline-block;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _			\$ 95,000.00	\$ _____	\$ _____
2.28	First Northern Bank <small>Creditor's Name</small> <div style="border: 1px solid black; padding: 2px;">11 W. Court Street</div> <small>Number Street</small> <div style="border: 1px solid black; padding: 2px;">Suite A</div> <div style="border: 1px solid black; padding: 2px;">Woodland CA 95695</div> <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 2px; display: inline-block;">Crops</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _			\$ 0.00	\$ _____	\$ _____
2.29	First-Citizens Bank & Trust <small>Creditor's Name</small> <div style="border: 1px solid black; padding: 2px;">701 N Haven Ave</div> <small>Number Street</small> <div style="border: 1px solid black; padding: 2px;">Ontario CA 91764</div> <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 2px; display: inline-block;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _			\$ 100.00	\$ _____	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 95,100.00					
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____					

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>			
2.30	GM Financial <small>Creditor's Name</small> PO Box 183834 <small>Number Street</small> Arlington TX 76096 <small>City State ZIP Code</small> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Automobile As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _			\$ 0.00	\$ _____	\$ _____
2.31	Golden 1 Credit Union <small>Creditor's Name</small> PO Box 15249 <small>Number Street</small> Sacramento CA 95851 <small>City State ZIP Code</small> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Automobile As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _			\$ 111,511.14	\$ _____	\$ _____
2.32	Harrison Revocable Trust <small>Creditor's Name</small> 19984 County Rd 99 <small>Number Street</small> Woodland CA 95695 <small>City State ZIP Code</small> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Ag Real Estate As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _			\$ 225,000.00	\$ _____	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 336,511.14					
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____					

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.33	Hitachi Capital <small>Creditor's Name</small> 7808 Creekridge Circle <small>Number Street</small> Suite 250 Edina MN 55439 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____	\$ 9,000.00	\$ _____
2.34	Huntington Financial Corp. <small>Creditor's Name</small> 1750 S Telegraph Rd <small>Number Street</small> #307 Bloomfield Hills MI 48301 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____	\$ 1,000.00	\$ _____
2.35	HYG Financial Service Inc. <small>Creditor's Name</small> 600 S 4th St <small>Number Street</small> Mac N9300-100 Minneapolis MN 55415 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____	\$ 26,351.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 927,351.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.36	J. David Thomas 401 K/P/S Creditor's Name 476 Century Park Dr Number Street #A Yuba City CA 95991 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Real Estate As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 81,250.00	\$ _____
2.37	Jack Dilley Creditor's Name 476 Century Park Dr Number Street #A Yuba City CA 95991 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Real Estate As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 81,250.00	\$ _____
2.38	Jim Wolfgram Creditor's Name 1510 Malta Dr Number Street Yuba City CA 95993 City State ZIP Code Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Real Estate As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 81,250.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:			\$ 243,750.00	
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:			\$ _____	

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1:	Additional Page	Column A	Column B	Column C
	After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.39	John Deere Financial <small>Creditor's Name</small> <div style="border: 1px solid black; padding: 2px;">PO Box 6600</div> <small>Number Street</small> <div style="border: 1px solid black; padding: 2px;">Carol Stream IL 60197</div> <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 135,000.00	\$ _____
2.40	Key Equipment Finance <small>Creditor's Name</small> <div style="border: 1px solid black; padding: 2px;">1000 S McCaslin Blvd</div> <small>Number Street</small> <div style="border: 1px solid black; padding: 2px;">Superior CO 80027</div> <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 1,000.00	\$ _____
2.41	Kubota Credit Corp. <small>Creditor's Name</small> <div style="border: 1px solid black; padding: 2px;">PO Box 894717</div> <small>Number Street</small> <div style="border: 1px solid black; padding: 2px;">Los Angeles CA 90189</div> <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 0.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 136,000.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.42	M2 Equipment Financing Describe the property that secures the claim: <u>Equipment</u> Amount: \$ <u>25,000.00</u>			
Creditor's Name: <u>20800 Swenson Dr</u> Number Street <u>Suite 475</u> <u>Waukesha WI 53186</u> City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number ____				
2.43	May Avenue Investments Describe the property that secures the claim: <u>Real Estate</u> Amount: \$ <u>785,000.00</u>			
Creditor's Name: <u>6 Hidden Valley Road</u> Number Street <u>Monrovia CA 91016</u> City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number ____				
2.44	Meridian Equipment Finance Describe the property that secures the claim: <u>Equipment</u> Amount: \$ <u>50,000.00</u>			
Creditor's Name: <u>9 Old Lincoln Highway</u> Number Street <u>Malvern PA 19355</u> City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____ Last 4 digits of account number ____				
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ <u>860,000.00</u>		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.45	Midland Equipment Finance Creditor's Name 1801 Park 270 Drive Number Street Suite 200 St Louis MO 63146 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Equipment As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 50,000.00	\$ _____
2.46	Mitsubishi HC Capital America Creditor's Name 4041 MacArthur Blvd. Number Street #2 Newport Beach CA 92660 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Equipment As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 10,000.00	\$ _____
2.47	Northland Capital Creditor's Name 333 33rd Ave S Number Street Saint Cloud MN 56301 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Equipment As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 30,000.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 90,000.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

	Additional Page Part 1: After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim	Column C Unsecured portion <small>If any</small>
2.48	Pawnee Equipment Lease Pmt Describe the property that secures the claim: Equipment <hr/> <div style="display: flex; justify-content: space-between;"> <div> Creditor's Name 3801 Automation Way <small>Number Street</small> Suite 207 Fort Collins CO 80525 <small>City State ZIP Code</small> </div> <div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </div> </div> <div style="margin-top: 10px;"> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt </div> <div style="margin-top: 10px;"> Date debt was incurred _____ Last 4 digits of account number ____ _ </div>	\$ 25,000.00	\$ _____	\$ _____
2.49	Pawnee Financing Describe the property that secures the claim: Equipment <hr/> <div style="display: flex; justify-content: space-between;"> <div> Creditor's Name 3801 Automation Way <small>Number Street</small> Suite 207 Fort Collins CO 80525 <small>City State ZIP Code</small> </div> <div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </div> </div> <div style="margin-top: 10px;"> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt </div> <div style="margin-top: 10px;"> Date debt was incurred _____ Last 4 digits of account number ____ _ </div>	\$ 25,000.00	\$ _____	\$ _____
2.50	Pawnee Leasing Corporation Describe the property that secures the claim: Equipment <hr/> <div style="display: flex; justify-content: space-between;"> <div> Creditor's Name 3801 Automation Way <small>Number Street</small> Suite 207 Fort Collins CO 80525 <small>City State ZIP Code</small> </div> <div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </div> </div> <div style="margin-top: 10px;"> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt </div> <div style="margin-top: 10px;"> Date debt was incurred _____ Last 4 digits of account number ____ _ </div>	\$ 58,182.00	\$ _____	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 108,182.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.51	Plumas Bank <small>Creditor's Name</small> 1280 Bridge St <small>Number Street</small> Yuba City CA 95991 <small>City State ZIP Code</small> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div>Crops</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 500.00	\$ _____
2.52	Purchase Power <small>Creditor's Name</small> P.O. Box 371874 <small>Number Street</small> Pittsburgh PA 15250 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div>Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 0.00	\$ _____
2.53	Rabo Bank <small>Creditor's Name</small> PO Box 411995 <small>Number Street</small> St. Louis MO 63141 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div>Equipment and Real Estate</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 1,634,464.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 1,634,964.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.54	<div>RaboAgriFinance</div> <div><small>Creditor's Name</small></div> <div>PO Box 411995</div> <div><small>Number Street</small></div> <div>St. Louis MO 63141</div> <div><small>City State ZIP Code</small></div> <div> <p>Describe the property that secures the claim:</p> <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment and Real Estate</div> </div> <div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> </div> <div> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> </div> <div> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number ____ _</p> </div>	\$ 2,665,858.00	\$ _____	\$ _____
2.55	<div>Regis Bear, Inc.</div> <div><small>Creditor's Name</small></div> <div>991-444 Lomas Santa Fe</div> <div><small>Number Street</small></div> <div>Suite C</div> <div>Solana Beach CA 92075</div> <div><small>City State ZIP Code</small></div> <div> <p>Describe the property that secures the claim:</p> <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Personal Residence</div> </div> <div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> </div> <div> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> </div> <div> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number ____ _</p> </div>	\$ 750,000.00	\$ _____	\$ _____
2.56	<div>Stearns Bank</div> <div><small>Creditor's Name</small></div> <div>4140 Thielman Lane</div> <div><small>Number Street</small></div> <div>Suite 105</div> <div>St. Cloud MN 56301</div> <div><small>City State ZIP Code</small></div> <div> <p>Describe the property that secures the claim:</p> <div style="border: 1px solid black; padding: 5px; min-height: 40px;">Equipment</div> </div> <div> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input checked="" type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> </div> <div> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> </div> <div> <p>Date debt was incurred _____</p> <p>Last 4 digits of account number ____ _</p> </div>	\$ 1,000.00	\$ _____	\$ _____
<p>Add the dollar value of your entries in Column A on this page. Write that number here:</p>		\$ 3,416,858.00		
<p>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</p>		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.57	Sumitomo Mitsui Finance Creditor's Name 666 3rd Avenue Number Street New York NY 10017 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Equipment As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 1,000.00	\$ _____
2.58	Suncrest Bank Creditor's Name 700 Plumas Street Number Street Yuba City CA 95991 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Crops As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 500.00	\$ _____
2.59	Suncrest Bank Creditor's Name 501 W. Main Street Number Street Visalia CA 93291 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Crops As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 0.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 1,500.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1:	Additional Page After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.60	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Sunpower Capital</div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> Creditor's Name Describe the property that secures the claim: </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <div style="border-bottom: 1px solid black; width: 25%;">PO Box 844863</div> <div style="border-bottom: 1px solid black; width: 55%;">Solar Equipment</div> </div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> Number Street </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <div style="border-bottom: 1px solid black; width: 25%;">Los Angeles</div> <div style="border-bottom: 1px solid black; width: 10%;">CA</div> <div style="border-bottom: 1px solid black; width: 25%;">90084</div> </div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> City State ZIP Code </div> <div style="margin-top: 10px;"> <p>Who owes the debt? Check one.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another </div> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> </div> <div style="margin-top: 10px;"> <p>As of the date you file, the claim is: Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed </div> <p>Nature of lien. Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Date debt was incurred _____ Last 4 digits of account number ____ _ </div>	\$ 1,000.00	\$ _____	\$ _____
2.61	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Sunrun</div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> Creditor's Name Describe the property that secures the claim: </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <div style="border-bottom: 1px solid black; width: 25%;">PO Box 511612</div> <div style="border-bottom: 1px solid black; width: 55%;">Solar Equipment</div> </div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> Number Street </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <div style="border-bottom: 1px solid black; width: 25%;">Los Angeles</div> <div style="border-bottom: 1px solid black; width: 10%;">CA</div> <div style="border-bottom: 1px solid black; width: 25%;">90084</div> </div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> City State ZIP Code </div> <div style="margin-top: 10px;"> <p>Who owes the debt? Check one.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another </div> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> </div> <div style="margin-top: 10px;"> <p>As of the date you file, the claim is: Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed </div> <p>Nature of lien. Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Date debt was incurred _____ Last 4 digits of account number ____ _ </div>	\$ 1,000.00	\$ _____	\$ _____
2.62	<div style="border-bottom: 1px solid black; margin-bottom: 5px;">Sutter County Treasurer</div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> Creditor's Name Describe the property that secures the claim: </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <div style="border-bottom: 1px solid black; width: 25%;">PO Box 546</div> <div style="border-bottom: 1px solid black; width: 55%;">Real Property Taxes</div> </div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> Number Street </div> <div style="display: flex; justify-content: space-between; margin-bottom: 5px;"> <div style="border-bottom: 1px solid black; width: 25%;">Yuba City</div> <div style="border-bottom: 1px solid black; width: 10%;">CA</div> <div style="border-bottom: 1px solid black; width: 25%;">95992</div> </div> <div style="display: flex; justify-content: space-between; font-size: 0.8em;"> City State ZIP Code </div> <div style="margin-top: 10px;"> <p>Who owes the debt? Check one.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another </div> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> </div> <div style="margin-top: 10px;"> <p>As of the date you file, the claim is: Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed </div> <p>Nature of lien. Check all that apply.</p> <div style="display: flex; flex-direction: column; gap: 5px;"> <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input checked="" type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> Date debt was incurred _____ Last 4 digits of account number ____ _ </div>	\$ 200,000.00	\$ _____	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 202,000.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.63	Tandem Finance Describe the property that secures the claim: <u>Equipment</u> Amount: \$ <u>1,000.00</u>	\$ 1,000.00	\$	\$
Creditor's Name: <u>3801 Automation Way</u> Number: <u>UNIT 207</u> Street: <u>Fort Collins</u> State: <u>CO</u> ZIP Code: <u>80525</u> City: <u>Fort Collins</u> State: <u>CO</u> ZIP Code: <u>80525</u> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Date debt was incurred _____ Last 4 digits of account number _____				
2.64	TCF National Bank Describe the property that secures the claim: <u>Equipment</u> Amount: \$ <u>5,000.00</u>	\$ 5,000.00	\$	\$
Creditor's Name: <u>P O Box 77077</u> Number: <u>P O Box 77077</u> Street: <u>Minnieapolis</u> State: <u>MN</u> ZIP Code: <u>55480</u> City: <u>Minnieapolis</u> State: <u>MN</u> ZIP Code: <u>55480</u> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Date debt was incurred _____ Last 4 digits of account number _____				
2.65	Tellone Mortgage Fund LP Describe the property that secures the claim: <u>Real Estate</u> Amount: \$ <u>3,248,909.00</u>	\$ 3,248,909.00	\$	\$
Creditor's Name: <u>6200 E. Canyon Rim Road</u> Number: <u>Suite 201</u> Street: <u>Anaheim</u> State: <u>CA</u> ZIP Code: <u>92807</u> City: <u>Anaheim</u> State: <u>CA</u> ZIP Code: <u>92807</u> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Date debt was incurred _____ Last 4 digits of account number _____				
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 3,254,909.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.66	The Huntington National Bank Creditor's Name 11100 Wayzata Number Street Suite 700 Minnetonka MN 55305 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Equipment As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 1,000.00	\$ _____
2.67	TIAA Bank Creditor's Name PO Box 911608 Number Street Denver CO 80291 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Equipment As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 0.00	\$ _____
2.68	TimePayment Creditor's Name 200 Summit Dr Number Street Suite 100 Burlington MA 01803 City State ZIP Code Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: Equipment As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____ _	\$ 0.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 1,000.00		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

Debtor 1

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.69	UFS West LLC <small>Creditor's Name</small> 381 Sunrise Hwy <small>Number Street</small> 3rd Floor Lynbrook NY 11563 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Receivables</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input checked="" type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____	\$ 1,890,826.46	\$ _____
2.70	US Bank Equipment Finance <small>Creditor's Name</small> PO Box 790448 <small>Number Street</small> St Louis MO 63179 <small>City State ZIP Code</small> Who owes the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Equipment</div> As of the date you file, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____	\$ 1,000.00	\$ _____
2.71	Wells Fargo <small>Creditor's Name</small> PO Box 14411 <small>Number Street</small> Des Moines IA 50306 <small>City State ZIP Code</small> Who owes the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim relates to a community debt Date debt was incurred _____	Describe the property that secures the claim: <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">Real Estate</div> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Nature of lien. Check all that apply. <input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan) <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien) <input type="checkbox"/> Judgment lien from a lawsuit <input type="checkbox"/> Other (including a right to offset) _____ Last 4 digits of account number ____	\$ 360,000.00	\$ _____
Add the dollar value of your entries in Column A on this page. Write that number here:		\$ 2,251,826.46		
If this is the last page of your form, add the dollar value totals from all pages. Write that number here:		\$ _____		

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S.
PAMMA FARMS

First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 1: Additional Page		Column A	Column B	Column C
After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.		Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
2.72	<p>Zions Ag Finance</p> <p>Creditor's Name</p> <p>500 5th Street</p> <p>Number Street</p> <p>Ames 50010</p> <p>City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input checked="" type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	<p>Describe the property that secures the claim:</p> <p>Ag Real Estate</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input checked="" type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input checked="" type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number ____ _</p>	\$ 3,311,150.00	\$ _____
	<p>Creditor's Name</p> <p>Number Street</p> <p>City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	<p>Describe the property that secures the claim:</p> <p>_____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number ____ _</p>	\$ _____	\$ _____
	<p>Creditor's Name</p> <p>Number Street</p> <p>City State ZIP Code</p> <p>Who owes the debt? Check one.</p> <p><input type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim relates to a community debt</p> <p>Date debt was incurred _____</p>	<p>Describe the property that secures the claim:</p> <p>_____</p> <p>As of the date you file, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Nature of lien. Check all that apply.</p> <p><input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)</p> <p><input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)</p> <p><input type="checkbox"/> Judgment lien from a lawsuit</p> <p><input type="checkbox"/> Other (including a right to offset) _____</p> <p>Last 4 digits of account number ____ _</p>	\$ _____	\$ _____
<p>Add the dollar value of your entries in Column A on this page. Write that number here:</p>		\$ 3,311,150.00		
<p>If this is the last page of your form, add the dollar value totals from all pages. Write that number here:</p>		\$ 34,249,333.60		

First Name Middle Name Last Name

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

<div data-bbox="53 258 118 304" style="border: 1px solid black; width: 40px; height: 22px; margin-bottom: 5px;"></div> <div data-bbox="118 258 823 304" style="border-bottom: 1px solid black; padding-bottom: 5px;">Miller Law, Inc.</div> <div data-bbox="105 310 165 333" style="font-size: small;">Name</div> <div data-bbox="105 348 339 384" style="border-bottom: 1px solid black; padding-bottom: 5px;">323 Pershing Drive</div> <div data-bbox="105 382 282 405" style="font-size: small;">Number Street</div> <div data-bbox="105 466 282 499" style="border-bottom: 1px solid black; padding-bottom: 5px;">Playa Del Rey</div> <div data-bbox="105 495 149 520" style="font-size: small;">City</div> <div data-bbox="516 466 574 499" style="border-bottom: 1px solid black; padding-bottom: 5px;">CA</div> <div data-bbox="516 495 574 520" style="font-size: small;">State</div> <div data-bbox="657 466 742 499" style="border-bottom: 1px solid black; padding-bottom: 5px;">90293</div> <div data-bbox="657 495 748 520" style="font-size: small;">ZIP Code</div>	<div data-bbox="873 268 1412 300" style="border-bottom: 1px solid black; padding-bottom: 5px;">On which line in Part 1 did you enter the creditor? <u>2.69</u></div> <div data-bbox="873 310 1359 342" style="border-bottom: 1px solid black; padding-bottom: 5px;">Last 4 digits of account number _ _ _ _</div>
<div data-bbox="53 535 118 581" style="border: 1px solid black; width: 40px; height: 22px; margin-bottom: 5px;"></div> <div data-bbox="118 535 823 581" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 588 165 611" style="font-size: small;">Name</div> <div data-bbox="105 655 282 682" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 655 282 682" style="font-size: small;">Number Street</div> <div data-bbox="105 772 149 800" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 772 149 800" style="font-size: small;">City</div> <div data-bbox="516 772 574 800" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="516 772 574 800" style="font-size: small;">State</div> <div data-bbox="657 772 748 800" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="657 772 748 800" style="font-size: small;">ZIP Code</div>	<div data-bbox="873 546 1433 577" style="border-bottom: 1px solid black; padding-bottom: 5px;">On which line in Part 1 did you enter the creditor? _____</div> <div data-bbox="873 588 1359 619" style="border-bottom: 1px solid black; padding-bottom: 5px;">Last 4 digits of account number _ _ _ _</div>
<div data-bbox="53 812 118 858" style="border: 1px solid black; width: 40px; height: 22px; margin-bottom: 5px;"></div> <div data-bbox="118 812 823 858" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 865 165 890" style="font-size: small;">Name</div> <div data-bbox="105 934 282 961" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 934 282 961" style="font-size: small;">Number Street</div> <div data-bbox="105 1052 149 1079" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 1052 149 1079" style="font-size: small;">City</div> <div data-bbox="516 1052 574 1079" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="516 1052 574 1079" style="font-size: small;">State</div> <div data-bbox="657 1052 748 1079" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="657 1052 748 1079" style="font-size: small;">ZIP Code</div>	<div data-bbox="873 823 1433 854" style="border-bottom: 1px solid black; padding-bottom: 5px;">On which line in Part 1 did you enter the creditor? _____</div> <div data-bbox="873 865 1359 896" style="border-bottom: 1px solid black; padding-bottom: 5px;">Last 4 digits of account number _ _ _ _</div>
<div data-bbox="53 1089 118 1136" style="border: 1px solid black; width: 40px; height: 22px; margin-bottom: 5px;"></div> <div data-bbox="118 1089 823 1136" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 1142 165 1169" style="font-size: small;">Name</div> <div data-bbox="105 1213 282 1241" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 1213 282 1241" style="font-size: small;">Number Street</div> <div data-bbox="105 1331 149 1358" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 1331 149 1358" style="font-size: small;">City</div> <div data-bbox="516 1331 574 1358" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="516 1331 574 1358" style="font-size: small;">State</div> <div data-bbox="657 1331 748 1358" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="657 1331 748 1358" style="font-size: small;">ZIP Code</div>	<div data-bbox="873 1100 1433 1131" style="border-bottom: 1px solid black; padding-bottom: 5px;">On which line in Part 1 did you enter the creditor? _____</div> <div data-bbox="873 1142 1359 1173" style="border-bottom: 1px solid black; padding-bottom: 5px;">Last 4 digits of account number _ _ _ _</div>
<div data-bbox="53 1367 118 1413" style="border: 1px solid black; width: 40px; height: 22px; margin-bottom: 5px;"></div> <div data-bbox="118 1367 823 1413" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 1419 165 1446" style="font-size: small;">Name</div> <div data-bbox="105 1491 282 1518" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 1491 282 1518" style="font-size: small;">Number Street</div> <div data-bbox="105 1608 149 1635" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 1608 149 1635" style="font-size: small;">City</div> <div data-bbox="516 1608 574 1635" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="516 1608 574 1635" style="font-size: small;">State</div> <div data-bbox="657 1608 748 1635" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="657 1608 748 1635" style="font-size: small;">ZIP Code</div>	<div data-bbox="873 1377 1433 1409" style="border-bottom: 1px solid black; padding-bottom: 5px;">On which line in Part 1 did you enter the creditor? _____</div> <div data-bbox="873 1419 1359 1451" style="border-bottom: 1px solid black; padding-bottom: 5px;">Last 4 digits of account number _ _ _ _</div>
<div data-bbox="53 1644 118 1690" style="border: 1px solid black; width: 40px; height: 22px; margin-bottom: 5px;"></div> <div data-bbox="118 1644 823 1690" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 1696 165 1724" style="font-size: small;">Name</div> <div data-bbox="105 1768 282 1795" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 1768 282 1795" style="font-size: small;">Number Street</div> <div data-bbox="105 1856 149 1883" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="105 1856 149 1883" style="font-size: small;">City</div> <div data-bbox="516 1856 574 1883" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="516 1856 574 1883" style="font-size: small;">State</div> <div data-bbox="657 1856 748 1883" style="border-bottom: 1px solid black; padding-bottom: 5px;"></div> <div data-bbox="657 1856 748 1883" style="font-size: small;">ZIP Code</div>	<div data-bbox="873 1654 1433 1686" style="border-bottom: 1px solid black; padding-bottom: 5px;">On which line in Part 1 did you enter the creditor? _____</div> <div data-bbox="873 1696 1359 1728" style="border-bottom: 1px solid black; padding-bottom: 5px;">Last 4 digits of account number _ _ _ _</div>

Fill in this information to identify your case:

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA
FARMS
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of CA
(State)

Case number 24-23489-B-11
(If known)

☐ Check if this is an amended filing

Official Form 106E/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 claims and Part 2 for creditors with NONPRIORITY 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: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☒ No. Go to Part 2.
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority Amount	Nonpriority amount
2.1			
Priority Creditor's Name	Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____		
Number Street	When was the debt incurred? _____		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Domestic support obligations		
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Taxes and certain other debts you owe the government		
Is the claim subject to offset?	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
<input type="checkbox"/> No	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> Yes			

2.2			
Priority Creditor's Name	Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____		
Number Street	When was the debt incurred? _____		
City State ZIP Code	As of the date you file, the claim is: Check all that apply.		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Domestic support obligations		
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Taxes and certain other debts you owe the government		
Is the claim subject to offset?	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
<input type="checkbox"/> No	<input type="checkbox"/> Other. Specify _____		
<input type="checkbox"/> Yes			

page 1 of _____

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name

Middle Name

Last Name

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim

Priority
AmountNonpriority
amount

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Priority Creditor's Name

When was the debt incurred? _____

Number Street

As of the date you file, the claim is: Check all that apply.

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Priority Creditor's Name

When was the debt incurred? _____

Number Street

As of the date you file, the claim is: Check all that apply.

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number _____ \$ _____ \$ _____ \$ _____

Priority Creditor's Name

When was the debt incurred? _____

Number Street

As of the date you file, the claim is: Check all that apply.

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify _____

Is the claim subject to offset?

- ☐ No
☐ Yes

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 1: List All of Your NONPRIORITY Unsecured Claims**3. Do any creditors have nonpriority unsecured claims against you?**

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
- ☒ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1

Accion Opportunity Fund

Nonpriority Creditor's Name

Last 4 digits of account number _____

Total claim

\$ 72818.10

111 W St. John St

Number Street

San Jose

CA

95113

City

State

ZIP Code

When was the debt incurred? Feb 2023

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Unsecured Loan

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
- ☐ Yes

4.2

Allied Administrators for Delta Dental

Nonpriority Creditor's Name

Last 4 digits of account number _____

\$ 500.00

PO BOX 45739

Number Street

San Francisco

CA

94145

City

State

ZIP Code

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Insurance

Who incurred the debt? Check one.

- ☒ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
- ☐ Yes

4.3

American Express

Nonpriority Creditor's Name

Last 4 digits of account number _____

\$ 53,233.00

PO BOX 96001

Number Street

Los Angeles

CA

90096

City

State

ZIP Code

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

- ☒ Contingent
- ☐ Unliquidated
- ☒ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
- ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- ☐ Debts to pension or profit-sharing plans, and other similar debts
- ☒ Other. Specify Credit Card

Who incurred the debt? Check one.

- ☐ Debtor 1 only
- ☐ Debtor 2 only
- ☐ Debtor 1 and Debtor 2 only
- ☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
- ☐ Yes

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known)

24-23489-B-11

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.4

American Express

Nonpriority Creditor's Name

PO BOX 0001

Number Street

Los Angeles

CA

90096

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _ _ _ _

\$ 1,000.00

When was the debt incurred? _ _ _ _

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

4.5

American General Life Insurance

Nonpriority Creditor's Name

PO BOX 650104

Number Street

Dallas

TX

75265

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _ _ _ _

1,000.00

When was the debt incurred? _ _ _ _

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Insurance

4.6

American Modern Insurance Group

Nonpriority Creditor's Name

PO BOX 5323

Number Street

Cincinnati

OH

45201

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _ _ _ _

2,500.00

When was the debt incurred? _ _ _ _

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Insurance

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.7

Apple Card

Nonpriority Creditor's Name

PO BOX 7247

Number Street

Philadelphia

PA

19170

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

\$ 3,574.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

4.8

AT&T

Nonpriority Creditor's Name

PO BOX 5014

Number Street

Carol Stream

IL

60197

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

200.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify Utility

4.9

Bank of America

Nonpriority Creditor's Name

PO BOX 660441

Number Street

Dallas

TX

75266

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

100.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.10

Barclay Luxury

Last 4 digits of account number _____

\$ 1,235.00

Nonpriority Creditor's Name

PO BOX 60517

Number Street

City of Industry

CA

91716

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

4.11

Blue Shield Of California

Last 4 digits of account number _____

3,919.00

Nonpriority Creditor's Name

PO BOX 749415

Number Street

Los Angeles

CA

90074

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Insurance

4.12

Ca Department of Tax & Fee Administration

Last 4 digits of account number _____

5,000.00

Nonpriority Creditor's Name

PO BOX 942879

Number Street

Sacramento

CA

94279

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Tax

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.13 Capital Funding

Nonpriority Creditor's Name

2455 House Street

Number Street

Baltimore

MD

21230

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

\$ 1,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Loan**4.14 Capital One**

Nonpriority Creditor's Name

1680 Capital One Drive

Number Street

McLean

VA

22102

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

\$ 90,155.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify Credit Card**4.15 Capital One**

Nonpriority Creditor's Name

PO BOX 30285

Number Street

Salt Lake City

UT

84130

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

1,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.16

Citi Card

Nonpriority Creditor's Name

PO BOX 6500

Number Street

Sioux Falls

SD

57117

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

\$ 1,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

4.17

Clark Pest Control

Nonpriority Creditor's Name

PO BOX 1480

Number Street

Lodi

CA

95241

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

1,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Business

4.18

DFA of California

Nonpriority Creditor's Name

710 Striker Avenue

Number Street

Sacramento

CA

95834

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

1,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Business

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.19 Discover Card

Nonpriority Creditor's Name

PO BOX 6103

Number Street

Carol Stream

IL

60197

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

\$ 25,063.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card**4.20 EDD**

Nonpriority Creditor's Name

PO BOX 989061

Number Street

West Sacramento

CA

95798

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

15,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Tax**4.21 Evans Agriculture Consulting Inc.**

Nonpriority Creditor's Name

626 Pennington Rd

Number Street

Live Oak

CA

95953

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

2,500.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify Business

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.22

Evans Agriculture Consulting Inc.

Last 4 digits of account number _____

\$ 5,000.00

Nonpriority Creditor's Name

626 Pennington Rd

Number Street

Live Oak

CA

95953

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Business

4.23

Fieldin

Last 4 digits of account number _____

45,000.00

Nonpriority Creditor's Name

2600 Ventura Street, Suite 201

Number Street

Fresno

CA

93721

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Business

4.24

Franchise Tax Board

Last 4 digits of account number _____

12,000.00

Nonpriority Creditor's Name

PO BOX 942867

Number Street

Sacramento

CA

942867

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Tax

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.25

Industrial Credit

Last 4 digits of account number _____

\$ 45,000.00

Nonpriority Creditor's Name

PO BOX 4149

Number Street

Bellevue

WA

98009

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Business

4.26

Internal Revenue Service

Last 4 digits of account number _____

30,000.00

Nonpriority Creditor's Name

PO BOX 7346

Number Street

Philadelphia

PA

19101

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Tax

4.27

Internal Revenue Service

Last 4 digits of account number _____

125,000.00

Nonpriority Creditor's Name

PO BOX 7346

Number Street

Philadelphia

PA

19101

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Tax

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.28

Jenjil Packaging

Last 4 digits of account number _____

\$ 100,000.00

Nonpriority Creditor's Name

400 3rd Street

Number Street

Turlock

CA

95380

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent

☐ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Business

4.29

John Roth

Last 4 digits of account number _____

100,000.00

Nonpriority Creditor's Name

9075 Old Davis Rd

Number Street

Davis

CA

95618

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☒ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Loan

4.30

Luxury Card

Last 4 digits of account number _____

1,000.00

Nonpriority Creditor's Name

PO BOX 60517

Number Street

City of Industry

CA

91716

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No

☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent

☐ Unliquidated

☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Debts to pension or profit-sharing plans, and other similar debts

☒ Other. Specify Credit Card

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name

Middle Name

Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.31

Nutstar Software LLC

Last 4 digits of account number _____

\$ 1,000.00

Nonpriority Creditor's Name

1460 West 18th Street

Number Street

Merced

CA

95340

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Business

4.32

Pape Machinery

Last 4 digits of account number _____

25,000.00

Nonpriority Creditor's Name

460 N Danebo Avenue

Number Street

Eugene

OR

97402

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Business

4.33

PG&E

Last 4 digits of account number _____

\$ 112,000.00

Nonpriority Creditor's Name

PO BOX 997340

Number Street

Sacramento

CA

95899

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Utility

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.34

PG&E

Nonpriority Creditor's Name

PO BOX 997340

Number Street

Sacramento

CA

95899

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

\$ 100,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Utility

4.35

Recology Butte

Nonpriority Creditor's Name

2720 South Fifth Ave

Number Street

Oroville

CA

95965

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

100.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Utility

4.36

Sam's Club

Nonpriority Creditor's Name

PO BOX 71783

Number Street

Philadelphia

PA

19176

City

State

ZIP Code

Who incurred the debt? Check one.

☒ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

23,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.37

Spark Visa

Last 4 digits of account number _____

\$ 6,000.00

Nonpriority Creditor's Name

PO BOX 71083

Number Street

Charlotte

NC

28272

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

4.38

Sutter County Tax Collector

Last 4 digits of account number _____

10,000.00

Nonpriority Creditor's Name

PO BOX 546

Number Street

Yuba City

CA

95992

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Tax

4.39

Tri Counties Bank

Last 4 digits of account number _____

45,000.00

Nonpriority Creditor's Name

PO BOX 992570

Number Street

Redding

CA

96099

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Credit Card

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.40

Trident Property Management

Last 4 digits of account number _____

\$ 75,000.00

Nonpriority Creditor's Name

1110 Civic Center Blvd, Suite 102

Number Street

Yuba City

CA

95993

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify HOA Dues

4.41

Union Funding

Last 4 digits of account number _____

1,000.00

Nonpriority Creditor's Name

1835 E. Hallandale Beach Blvd #278

Number Street

Hallandale Beach

FL

33009

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Loan

4.42

Unique Funding

Last 4 digits of account number _____

1,000.00

Nonpriority Creditor's Name

1794 Iris Dr. SW

Number Street

Conyers

GA

30094

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Loan

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.43

United States Treasury

Last 4 digits of account number _____

\$ 60,000.00

Nonpriority Creditor's Name

324 East 2500 South

Number Street

Ogden

UT

84401

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Tax

4.44

US Bank

Last 4 digits of account number _____

150.00

Nonpriority Creditor's Name

PO BOX 790448

Number Street

St. Louis

MO

63179

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Business

4.45

US Small Business Administration

Last 4 digits of account number _____

1,900,000.00

Nonpriority Creditor's Name

14925 Kingsport Rd

Number Street

Fort Worth

TX

76155

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Loan

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.46 US Small Business Administration

Nonpriority Creditor's Name

14925 Kingsport Rd

Number Street

Fort Worth

TX

76155

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

\$ 2,000,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Loan**4.47 US Small Business Administration**

Nonpriority Creditor's Name

14925 Kingsport Rd

Number Street

Fort Worth

TX

76155

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

1,808,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Loan**4.48 US Small Business Administration**

Nonpriority Creditor's Name

14925 Kingsport Rd

Number Street

Fort Worth

TX

76155

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

Last 4 digits of account number _____

2,000,000.00

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Loan

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

Case number (if known) 24-23489-B-11

First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

4.49

West Horizon Association

Last 4 digits of account number _____

\$ 1,000.00

Nonpriority Creditor's Name

1110 Civic Center Blvd. #102

Number Street

Yuba City

CA

95993

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify HOA Dues

4.50

WG Fund

Last 4 digits of account number _____

100.00

Nonpriority Creditor's Name

77 Water Street Suite 2404

Number Street

New York

NY

10005

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Loan

4.51

Yuba County Tax Collector

Last 4 digits of account number _____

10,000.00

Nonpriority Creditor's Name

915 8th Street, Suite 103

Number Street

Marysville

CA

95901

City

State

ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only☐ Debtor 2 only☐ Debtor 1 and Debtor 2 only☒ At least one of the debtors and another☐ Check if this claim is for a community debt

Is the claim subject to offset?

☐ No☐ Yes

When was the debt incurred? _____

As of the date you file, the claim is: Check all that apply.

☒ Contingent☐ Unliquidated☒ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims☐ Debts to pension or profit-sharing plans, and other similar debts☒ Other. Specify Business Property Tax

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Part 2: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Name _____
Number _____ Street _____
City _____ State _____ ZIP Code _____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line _____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number _____

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS Case number (if known) 24-23489-B-11
First Name Middle Name Last Name

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$ <u>0.00</u>
	6b. Taxes and certain other debts you owe the Government	6b.	\$ <u>0.00</u>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$ <u>0.00</u>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+ \$ <u>0.00</u>
	6e. Total. Add lines 6a through 6d.	6e.	\$ <u>0.00</u>

		Total claim	
Total claims from Part 2	6f. Student loans	6f.	\$ <u>0.00</u>
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ <u>0.00</u>
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ <u>0.00</u>
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$ <u>8,925,047.10</u>
	6j. Total. Add lines 6f through 6i.	6j.	\$ <u>8,925,047.10</u>

Fill in this information to identify your case:			
Debtor	SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse If filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	Eastern		District of CA (State)
Case number (If known)	24-23489-B-11		

☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with your other schedules. You have 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: Property* (Official Form 106A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease	State what the contract or lease is for
2.1	<div>The Golden One Credit Union</div> <div>Name</div> <div>PO Box 15249</div> <div>Number Street</div> <div>Sacramento CA 95851</div> <div>City State ZIP Code</div>	Auto Loan
2.2	<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.3	<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.4	<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2.5	<div></div> <div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	

page 1 of _

Debtor 1

SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS

First Name

middle Name

Last Name

Case number (if known) 24-23489-B-11

Additional Page if You Have More Contracts or Leases

	Person or company with whom you have the contract or lease	What the contract or lease is for
2. _	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2. _	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2. _	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2. _	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2. _	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2. _	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	
2. _	<div>Name</div> <div>Number Street</div> <div>City State ZIP Code</div>	

Fill in this information to identify your case:

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA
FARMS
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of CA
(State)

Case number 24-23489-B-11
(If known)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a code debtor.)

☐ No
☒ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No. Go to line 3.
☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?
☐ No
☒ Yes. In which community state or territory did you live? CA. Fill in the name and current address of that person.

Jaismin Pamma

Name of your spouse, former spouse, or legal equivalent

9850 Sheldon Avenue

Number Street

Live Oak

CA

95953

City

State

ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a code debtor if your spouse is filing with you. List the person shown in line 2 again as a code debtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your code debtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1	<p>Jaismin Pamma Name 9850 Sheldon Avenue Number Street Live Oak CA 95953 City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____</p>
3.2	<p>Gurnam Pamma Name 9850 Sheldon Avenue Number Street Live Oak CA 95953 City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____</p>
3.3	<p>Surinder Pamma Name 9850 Sheldon Avenue Number Street Live Oak CA 95953 City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____ <input type="checkbox"/> Schedule E/F, line _____ <input type="checkbox"/> Schedule G, line _____</p>

page 1 of _____

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Case number (if known)

24-23489-B-11

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

<u>3.4</u>	<p><u>Shinda Upple</u> Name</p> <p><u>2336 River Blvd</u> Number Street</p> <p><u>Bakersfield</u> <u>CA</u> <u>93306</u> City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<u>3.5</u>	<p><u>Ajmail Sangha</u> Name</p> <p><u>17502 Stockdale Highway</u> Number Street</p> <p><u>Bakersfield</u> <u>CA</u> <u>93314</u> City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<u>3.6</u>	<p><u>Michael Procunier</u> Name</p> <p><u>2779 Kristen Street</u> Number Street</p> <p><u>Live Oak</u> <u>CA</u> <u>95953</u> City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<u>3.7</u>	<p><u>Sutter Buttes Mercantile LLC</u> Name</p> <p><u>PO Box 156</u> Number Street</p> <p><u>Live Oak</u> <u>CA</u> <u>95953</u> City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<u>3.8</u>	<p><u>Golden Valley Orchards LLC</u> Name</p> <p><u>855 Harter Parkway Suite 305</u> Number Street</p> <p><u>Yuba City</u> <u>CA</u> <u>95993</u> City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<u>3.9</u>	<p><u>Montana Tractor & Machinery LLC</u> Name</p> <p><u>855 Harter Parkway Suite 305</u> Number Street</p> <p><u>Yuba City</u> <u>CA</u> <u>95993</u> City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<u>3.10</u>	<p><u>Fortune Farmstead, Inc.</u> Name</p> <p><u>855 Harter Parkway Suite 305</u> Number Street</p> <p><u>Yuba City</u> <u>CA</u> <u>95993</u> City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<u>3.11</u>	<p><u>Riverside Ranches LLC</u> Name</p> <p><u>855 Harter Parkway Suite 305</u> Number Street</p> <p><u>Yuba City</u> <u>CA</u> <u>95993</u> City State ZIP Code</p>	<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>

page _____ of _____

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Case number (if known) 24-23489-B-11

Additional Page to List More Codebtors

Column 1: Your codebtor		Column 2: The creditor to whom you owe the debt
<p>3.12 <u>Bonanza Farms LLC</u> <small>Name</small></p> <p><u>855 Harter Parkway Suite 305</u> <small>Number Street</small></p> <p><u>Yuba City</u> <u>CA</u> <u>95993</u> <small>City State ZIP Code</small></p>		<p>Check all schedules that apply:</p> <p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3.13 <u>West Horizon Farms LLC</u> <small>Name</small></p> <p><u>855 Harter Parkway Suite 305</u> <small>Number Street</small></p> <p><u>Yuba City</u> <u>CA</u> <u>95993</u> <small>City State ZIP Code</small></p>		<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3.14 <u>Imperial Orchards LLC</u> <small>Name</small></p> <p><u>855 Harter Parkway Suite 305</u> <small>Number Street</small></p> <p><u>Yuba City</u> <u>CA</u> <u>95993</u> <small>City State ZIP Code</small></p>		<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3.15 <u>Pamma Law Firm</u> <small>Name</small></p> <p><u>855 Harter Parkway Suite 305</u> <small>Number Street</small></p> <p><u>Yuba City</u> <u>CA</u> <u>95993</u> <small>City State ZIP Code</small></p>		<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._ _____ <small>Name</small></p> <p>_____ <small>Number Street</small></p> <p>_____ <small>City State ZIP Code</small></p>		<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._ _____ <small>Name</small></p> <p>_____ <small>Number Street</small></p> <p>_____ <small>City State ZIP Code</small></p>		<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._ _____ <small>Name</small></p> <p>_____ <small>Number Street</small></p> <p>_____ <small>City State ZIP Code</small></p>		<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>
<p>3._ _____ <small>Name</small></p> <p>_____ <small>Number Street</small></p> <p>_____ <small>City State ZIP Code</small></p>		<p><input type="checkbox"/> Schedule D, line _____</p> <p><input type="checkbox"/> Schedule E/F, line _____</p> <p><input type="checkbox"/> Schedule G, line _____</p>

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of CA
(State)

Case number 24-23489-B-11
(If known) _____

MM / DD / YYYY

Schedule I: Your Income

12/15

Part 1: Describe Employment

11 years

\$ 15,425.20

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS Case number (if known) 24-23489-B-11
First Name Middle Name Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here→ 4.	\$ 0.00	\$ 15,425.20
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 0.00	\$ 4,704.26
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 1,350.56
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 153.78
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: _____	5h. +\$ 0.00	+\$ 0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$	\$ 6,208.60
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$	\$ 9,216.60
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm		
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		
	8a. \$ 4,905.00	\$ 0.00
8b. Interest and dividends		
	8b. \$ 781.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		
	8c. \$ 0.00	\$ 0.00
8d. Unemployment compensation		
	8d. \$ 0.00	\$ 0.00
8e. Social Security		
	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive		
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		
Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: _____	8h. +\$ 0	+\$ 0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 5,686.00	\$ 0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 5,686.00 +	\$ 9,216.60 = \$ 14,902.60
11. State all other regular contributions to the expenses that you list in Schedule J.		
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. + \$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12. \$ 14,902.60	
		Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of CA
(State)

Case number 24-23489-B-11
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☒ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?
- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

☐ No☒ Yes. Fill out this information for each dependent

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Son

15

☐ No
☒ Yes

Son

11

☐ No
☒ Yes☐ No
☐ Yes☐ No
☐ Yes☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

☐ No
☒ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 6,500.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 1,000.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 500.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 1,000.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

Debtor 1 **SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS**
First Name Middle Name Last Name

Case number (if known) **24-23489-B-11**

			Your expenses
5. Additional mortgage payments for your residence , such as home equity loans	5.	\$	0.00
6. Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	800.00
6b. Water, sewer, garbage collection	6b.	\$	150.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	300.00
6d. Other. Specify: _____	6d.	\$	
7. Food and housekeeping supplies	7.	\$	1,400.00
8. Childcare and children's education costs	8.	\$	1,000.00
9. Clothing, laundry, and dry cleaning	9.	\$	1,000.00
10. Personal care products and services	10.	\$	500.00
11. Medical and dental expenses	11.	\$	750.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12.	\$	950.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
14. Charitable contributions and religious donations	14.	\$	100.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	1,000.00
15b. Health insurance	15b.	\$	750.00
15c. Vehicle insurance	15c.	\$	150.00
15d. Other insurance. Specify: _____	15d.	\$	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16.	\$	
17. Installment or lease payments:			
17a. Car payments for Vehicle 1	17a.	\$	1,838.00
17b. Car payments for Vehicle 2	17b.	\$	
17c. Other. Specify: _____	17c.	\$	
17d. Other. Specify: _____	17d.	\$	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	
19. Other payments you make to support others who do not live with you. Specify: _____			
19.	\$		
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.			
20a. Mortgages on other property	20a.	\$	0.00
20b. Real estate taxes	20b.	\$	0.00
20c. Property, homeowner's, or renter's insurance	20d.	\$	0.00
20d. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
20e. Homeowner's association or condominium dues	20e.	\$	

Debtor 1 **SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS**
First Name Middle Name Last Name

Case number (if known) **24-23489-B-11**

21. **Other.** Specify: _____

21. **+\$** _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22a. \$ 19,738.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$ _____

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$ _____

23. Calculate your monthly net income.

23a. Copy line 12 (*your combined monthly income*) from *Schedule I*.

23a. \$ 14,902.60

23b. Copy your monthly expenses from line 22c above.

23b. \$ 19,738.00

23c. Subtract your monthly expenses from your monthly income.
 The result is your *monthly net income*.

23c. \$ -4,835.40

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA
FARMS
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of CA
(State)

Case number 24-23489-B-11
(If known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. 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 \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

x

Signature of Debtor 1
Sukhraj S. Pamma

Date 09/04/2024
MM / DD / YYYY

x

Signature of Debtor 2

Date _____
MM / DD / YYYY