

**UNITED STATES BANKRUPTCY COURT  
DISTRICT OF NEW JERSEY –  
CAMDEN VICINAGE**

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**In re:**

**ALUMINUM SHAPES L.L.C.,**

**Debtor.<sup>1</sup>**

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§

§ **Chapter 11**

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§ **Case No. 21-16520- JNP**

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**GLOBAL NOTES AND STATEMENTS OF LIMITATIONS, METHODOLOGY,  
AND DISCLAIMERS REGARDING DEBTOR’S SCHEDULES OF ASSETS  
AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS**

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**Introduction**

The Schedules of Assets and Liabilities (collectively, the “Schedules”) and Statements of Financial Affairs (collectively, the “Statements,” and, together with the Schedules, the “Schedules and Statements”) filed by Aluminum Shapes L.L.C. (“Shapes”) as debtor and debtor-in-possession (collectively, the “Debtor”) in the United States Bankruptcy Court for the District of New Jersey (the “Bankruptcy Court”), were prepared in accordance with section 521 of title 11 of the United States Code (the “Bankruptcy Code”), and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the “Bankruptcy Rules”) by management of the Debtor, with the assistance of the Debtor’s professional advisors, and are unaudited.

The Schedules and Statements have been signed by Mr. Jordan Meyers, Interim CFO of Shapes. Mr. Meyers has not (nor could have) personally verified the accuracy of each such statement and representation, including, for example, statements and representations concerning amounts owed to creditors, classification of such amounts, and their addresses. In addition, Mr. Meyers has not (nor could have) personally verified the completeness of the Schedules and Statements, nor the accuracy of any information contained therein. In reviewing and signing the Schedules and Statements, Mr. Meyers necessarily relied upon various personnel of the Debtor and the Debtor’s professional advisors and their efforts, statements, and representations in connection therewith. Although management has made reasonable efforts to ensure that the Schedules and Statements are accurate and complete based upon information that was available to them at the time of preparation, subsequent information or discovery thereof may result in material changes to the Schedules and Statements, and inadvertent errors or omissions may exist.

These Global Notes and Statements of Limitations, Methodology, and Disclaimers Regarding the Debtor’s Schedules and Statements (the “Global Notes”) pertain to, are incorporated

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<sup>1</sup> The Debtor in this chapter 11 case, along with the last four digits of the Debtor’s federal tax identification number, as applicable, is as follows: Aluminum Shapes L.L.C. (6288). The address of the Debtor’s headquarters is: 9000 River Road, Delair, NJ 08110.

by reference in, and comprise an integral part of all of the Schedules and Statements. The Global Notes should be referred to and reviewed in connection with any review of the Schedules and Statements. The Global Notes are in addition to any specific notes contained in any Debtor's Schedules or Statements. Disclosure of information in one Schedule, Statement, exhibit, or continuation sheet, even if incorrectly placed, shall be deemed to be disclosed in the correct Schedule, Statement, exhibit, or continuation sheet.

**The Schedules, Statements, and Global Notes should not be relied upon by any persons for information relating to current or future financial conditions, events, or performance of the Debtor.**

### **Global Notes and Overview of Methodology**

1. **General Reservation of Rights.** Although the Debtor's management has made every reasonable effort to ensure that the Schedules and Statements are as accurate and complete as possible under the circumstances based on information that was available to them at the time of preparation, subsequent information or discovery may result in material changes to the Schedules and Statements, and inadvertent errors or omissions may have occurred, some of which may be material. Because the Schedules and Statements contain unaudited information, which remains subject to further review, verification, and potential adjustment, there can be no assurance that the Schedules and Statements are complete. The Debtor reserves all rights to amend the Schedules and Statements from time to time, in any and all respects, as may be necessary or appropriate, including the right to dispute or otherwise assert offsets or defenses to any claim reflected in the Schedules and Statements as to amount, liability, or classification, or to otherwise subsequently designate any claim ("Claim") as "disputed," "contingent," or "unliquidated." Furthermore, nothing contained in the Schedules and Statements shall constitute an admission of any claims or a waiver of any of the Debtor's rights with respect to this chapter 11 case, including issues involving substantive consolidation, recharacterization, equitable subordination, and/or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code and other relevant non-bankruptcy laws to recover assets or avoid transfers. Any specific reservation of rights contained elsewhere in the Global Notes does not limit in any respect the general reservation of rights contained in this paragraph.
2. **Description of Case and "As Of" Information Date.** On August 15, 2021 (the "Petition Date"), the Debtor filed a voluntary petition for relief under chapter 11 of the Bankruptcy Code in the Bankruptcy Court. The Debtor continues to operate its business and manage its assets as a debtor-in-possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code. No request for the appointment of a trustee or examiner has been made in this chapter 11 case. Unless otherwise stated herein, assets and liabilities are reported as of July 31, 2021.
3. **Basis of Presentation.** The Schedules and Statements purport to reflect the assets and liabilities of the Debtor. The Debtor reserves all rights relating to the legal ownership of assets and liabilities and nothing in the Schedules or Statements shall constitute a waiver or relinquishment of such rights. Information contained in the Schedules and Statements has been derived from the Debtor's books and records. The Schedules and Statements do

not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles nor are they intended to be fully reconcilable to audited financial statements.

4. **Totals.** All totals that are included in the Schedules and Statements represent totals of all known amounts included in the Debtor's books and records. To the extent there are unknown or undetermined amounts, the actual totals may be different than the listed total, and the difference may be material. In addition, the amounts shown for total liabilities exclude items identified as "unknown," "disputed," "contingent," "unliquidated," or "undetermined," and, thus, ultimate liabilities may differ materially from those stated in the Schedules and Statements.
5. **Excluded Assets and Liabilities.** The Debtor has excluded certain categories of assets and liabilities from the Schedules and Statements, including but not limited to certain deferred expenses and deferred revenue items, lease assets and related lease liabilities and certain accrued liabilities. The Debtor has also excluded potential claims arising on account of the potential rejection of executory contracts and unexpired leases, to the extent such claims exist. Certain immaterial assets and liabilities that are not reported or tracked centrally may have been excluded.
6. **Amendments and Supplements; All Rights Reserved.** Reasonable efforts have been made to prepare and file complete and accurate Schedules and Statements; inadvertent errors or omissions, however, may exist. The Debtor reserves all rights, but is not required, to amend and/or supplement the Schedules and Statements from time to time as is necessary and appropriate.
7. **References.** References to applicable loan agreements and related documents are necessary for a complete description of the collateral and the nature, extent, and priority of liens and/or claims. Nothing in the Global Notes or the Schedules and Statements shall be deemed a modification or interpretation of the terms of such agreements.
8. **Currency.** All amounts are reflected in U.S. dollars. Amounts originally denominated in foreign currencies have been converted to US dollar equivalents in accordance with the Debtor's pre-filing accounting practices.
9. **Book Value.** Unless otherwise indicated, the Debtor's assets and liabilities are shown on the basis of its net book values as of July 31, 2021. Thus, unless otherwise noted, the Schedules and Statements reflect the carrying value of the assets and liabilities as recorded on the Debtor's books. Net book values may vary, sometimes materially, from market values. The Debtor does not intend to amend these Schedules and Statements to reflect market values.
10. **Paid Claims.** The Bankruptcy Court authorized the Debtor to pay certain outstanding prepetition Claims—including, but not limited to, payments to employees, taxes, customers, and certain vendors—pursuant to various "first day" orders entered by the Bankruptcy Court. Accordingly, certain outstanding liabilities as of the Petition Date may

have been reduced by post-petition payments made on account of prepetition liabilities. Where the Schedules list creditors and set forth the Debtor's scheduled amount of such Claims, such scheduled amounts reflect amounts owed as of the Petition Date, after incorporating invoices received post-petition for prepetition services. Where the Debtor made post-petition payments on certain prepetition claims pursuant to "first day" orders entered by the Bankruptcy Court, the Schedules mark such claims as contingent and unliquidated. In addition, to the extent the Debtor later pays any of the Claims listed in the Schedules and Statements pursuant to any orders entered by the Bankruptcy Court, the Debtor reserves all rights to amend or supplement the Schedules and Statements or take other action, such as filing Claim objections, as is necessary and appropriate to avoid overpayment or duplicate payments for liabilities.

11. **Recharacterization.** Notwithstanding that the Debtor has made reasonable efforts to correctly characterize, classify, categorize, or designate certain Claims, assets, executory contracts, unexpired leases, and other items reported in the Schedules and Statements, the Debtor nonetheless may have improperly characterized, classified, categorized, or designated certain items. The Debtor reserves all rights to recharacterize, reclassify, recategorize, or re-designate items reported in the Schedules and Statements at a later time as they determine to be necessary and appropriate.
12. **Claims of Third-Party Entities.** Although the Debtor has made reasonable efforts to classify properly each Claim listed in the Schedules as being either disputed or undisputed, liquidated or unliquidated, and/or contingent or non-contingent, the Debtor has not been able to fully reconcile all payments made to certain third-party entities on account of the Debtor's obligations to both such entity and its affiliates. Therefore, to the extent that the Debtor has classified its estimate of Claims of a creditor as disputed, for example, all Claims of such creditor's affiliates listed in the Schedules and Statements shall similarly be considered disputed, whether or not they are individually designated as such.
13. **Liabilities.** The Debtor allocates liabilities between the prepetition and post-petition periods based on the information and research conducted in connection with the preparation of the Schedules and Statements. As additional information becomes available, and further research is conducted, particularly with respect to the Debtor's payable accounts, the allocation of liabilities between the prepetition and post-petition periods may change. The Debtor reserves the right to, but is not required to, amend the Schedules and Statements as they deem appropriate to reflect this.

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

14. **Guarantees and Other Secondary Liability Claims.** Where guarantees have been identified, they have been included in the relevant liability Schedule for the Debtor affected by such guarantee. The Debtor has also listed such guarantees on the applicable Schedule H. It is possible that certain guarantees embedded in the Debtor's executory contracts,

unexpired leases, secured financings, debt instruments, and other such agreements may have been inadvertently omitted. The Debtor reserves its rights to amend the Schedules to the extent that additional guarantees are identified or such guarantees are discovered to have expired or be unenforceable.

15. **Intercompany Claims.** The Debtor's intercompany balances are reported as of July 31, 2021. Intercompany balances were obtained from unaudited financial statements of the Debtor. The intercompany balances reflect transactions arising from activity between a Debtor and non-Debtor affiliates.
16. **Intellectual Property Rights.** Exclusion of certain intellectual property shall not be construed to be an admission that such intellectual property rights have been abandoned, have been terminated or otherwise expired by their terms, or have been assigned or otherwise transferred pursuant to a sale, acquisition, or other transaction. Conversely, inclusion of certain intellectual property shall not be construed to be an admission that such intellectual property rights have not been abandoned, have not been terminated or otherwise expired by their terms, or have not been assigned or otherwise transferred pursuant to a sale, acquisition, or other transaction. The Debtor has made significant efforts to attribute intellectual property to the rightful Debtor owner. Accordingly, the Debtor reserves all of its rights with respect to the legal status of any and all such intellectual property rights.
17. **Executory Contracts and Unexpired Leases.** The Debtor has not set forth executory contracts or unexpired leases as assets in the Schedules and Statements. The Debtor's executory contracts and unexpired leases have been set forth in Schedule G. In addition, while the Debtor has made diligent attempts to properly identify all executory contracts and unexpired leases, inadvertent errors, omissions, or over-inclusion may have occurred.
18. **Claims Description.** Schedules D and E/F permit the Debtor to designate a Claim as "disputed," "contingent," and/or "unliquidated." Any failure to designate a Claim on a given Debtor's Schedules and Statements as "disputed," "contingent," or "unliquidated" does not constitute an admission by the Debtor that such amount is not "disputed," "contingent," or "unliquidated" or that such Claim is not subject to objection. The Debtor reserves all rights to dispute any Claim reflected on their respective Schedules and Statements on any grounds, including, without limitation, liability or classification, or to otherwise subsequently designate such Claims as "disputed," "contingent," or "unliquidated." In addition, the Debtor reserves its rights to object to any listed Claim on the grounds that, among other things, the Claim has already been satisfied.
19. **Causes of Action.** Despite its reasonable efforts, the Debtor may not have listed all of its causes of action or potential causes of action against third parties as assets in its Schedules and Statements, including, without limitation, avoidance actions arising under chapter 5 of the Bankruptcy Code and actions under other relevant non-bankruptcy laws to recover assets. The Debtor reserves all of its rights for any claims, causes of action, or avoidance actions they may have, and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any such claims, causes of actions, or avoidance actions or in any way prejudice or impair the assertion of such claims.

20. **Undetermined Amounts.** Claim amounts that could not readily be quantified by the Debtor are scheduled as “unknown,” “TBD,” or “undetermined”. The description of an amount as “unknown,” “TBD,” or “undetermined” is not intended to reflect upon the materiality of such amount.
21. **Liens.** Property and equipment listed in the Schedules and Statements are presented without consideration of any liens that may attach (or have attached) to such property or equipment.
22. **Employee Addresses.** Current employee, former employee, and director addresses have been removed from entries listed throughout the Schedules and Statements, where applicable.
23. **Estimates.** To prepare and file the Schedules as close to the Petition Date as possible, management was required to make certain estimates and assumptions that affected the reported amounts of these assets and liabilities. The Debtor reserves all rights to amend the reported amounts of assets and liability to reflect changes in those estimates or assumptions.
24. **Credits and Adjustments.** The claims of individual creditors for, among other things, goods, products, services, or taxes are listed as the amounts entered on the Debtor’s books and records and may not reflect credits, allowances, or other adjustments due from such creditors to the Debtor. The Debtor reserves all of its rights with regard to such credits, allowances, and other adjustments, including the right to assert claims objections and/or setoffs with respect to the same.
25. **Setoffs.** The Debtor incurs certain setoffs and other similar rights during the ordinary course of business. Offsets in the ordinary course can result from various items, including, without limitation, intercompany transactions, pricing discrepancies, returns, warranties, negotiations and/or disputes between the Debtor and its vendors and customers. These offsets and other similar rights are consistent with the ordinary course of business in the Debtor’s industry and are not tracked separately. Therefore, although such offsets and other similar rights may have been accounted for when certain amounts were included in the Schedules, offsets are not independently accounted for, and as such, are excluded from the Schedules.
26. **Global Notes Control.** In the event that the Schedules and Statements differ from these Global Notes, the Global Notes shall control.
27. **Confidentiality:** There may be instances in the Schedules and Statements where the Debtor has deemed it necessary and appropriate to redact from the public record information such as names, addresses, or amounts. Typically, the Debtor has used this approach because of an agreement between the Debtor and a third party, concerns of confidentiality, or concerns for the privacy of, or otherwise preserving the confidentiality of, personally identifiable information.

**General Disclosures Applicable to Schedules**

28. **Classifications.** Listing a Claim (a) on Schedule D as “secured,” (b) on Schedule E/F as “priority,” or (c) on Schedule E/F as “unsecured,” or a contract on Schedule G as “executory” or “unexpired,” does not in each case constitute an admission by the Debtor of the legal rights of the claimant, or a waiver of the Debtor’s right to recharacterize or reclassify such Claim or contract.
29. **Schedule A/B - Real and Personal Property.**
- a) Schedule A/B.3. Bank account balances are as of the end of business on Petition Date.
  - b) Schedule A/B.8. Prepaid balances are as of the end of business on Petition Date.
  - c) Schedule A/B.11. Accounts Receivable balances are as of the end of business on Petition Date.
  - d) Schedule A/B.15. Equity interests in subsidiaries and affiliates arise from common stock ownership. For purposes of these Schedules, the value of the Debtor’s interests is undetermined. The book values of certain assets may materially differ from their fair market values and/or the liquidation of the assets prepared in connection with the Disclosure Statement.
30. **Schedule D - Creditors Holding Secured Claims.** The Claims listed on Schedule D arose or were incurred on various dates; a determination of the date upon which each Claim arose or was incurred would be unduly burdensome and cost prohibitive. Accordingly, not all such dates are included for each Claim. All Claims listed on Schedule D, however, appear to have arisen or have been incurred before August 15, 2021.

Except as otherwise agreed pursuant to a stipulation or order entered by the Bankruptcy Court, the Debtor reserves its rights to dispute or challenge the validity, perfection, or immunity from avoidance of any lien purported to be granted or perfected in any specific asset of a secured creditor listed on Schedule D. Moreover, although the Debtor has scheduled Claims of various creditors as secured Claims, the Debtor reserves all of its rights to dispute or challenge the secured nature of any such creditor’s Claim or the characterization of the structure of any such transaction or any document or instrument related to such creditor’s Claim. Further, while the Debtor has included the results of Uniform Commercial Code searches, the listing of such results is not, nor shall it be deemed, an admission as to the validity of any such lien. The descriptions provided in Schedule D are solely intended to be a summary and not an admission of liability. The Debtor made reasonable, good faith efforts to include all known liens on Schedule D but may have inadvertently omitted to include an existing lien because of, among other things, the possibility that a lien may have been imposed after the Uniform Commercial Code searches were performed or a vendor may not have filed the requisite perfection documentation.

Except as specifically stated on Schedule D, real property lessors, utility companies, and other parties that may hold security deposits have not been listed on Schedule D. The Debtor reserves its rights to amend Schedule D to the extent that the Debtor determines that any Claims associated with such agreements should be reported on Schedule D.

Moreover, the Debtor has not included on Schedule D parties that may believe their Claims are secured through setoff rights or inchoate statutory lien rights.

31. **Schedule E/F— Creditors Holding Unsecured Claims.** The Debtor has not listed on Schedule E/F any tax related obligations, save for open tax audits, which the Debtor has been granted authority to pay pursuant to the *Order Authorizing the Debtor to Pay Certain Prepetition Taxes and Related Obligations*, [Docket No. 42]. The Debtor believes that all such Claims have been or will be satisfied in the ordinary course during this chapter 11 case pursuant to the authority granted in the relevant order.

The Debtor has used reasonable efforts to report all general unsecured Claims against the Debtor on Schedule E/F based upon the Debtor's existing books and records as of the Petition Date; however, inadvertent errors or omissions may have occurred. The Claims listed on Schedule E/F arose or were incurred on various dates. In certain instances, the date on which a Claim arose is an open issue of fact. In addition, the Claims of individual creditors for, among other things, goods or services are listed as either the lower of the amounts invoiced by such creditor or the amounts entered on the Debtor's books and records and may not reflect credits, rebates, or allowances due from such creditors to the Debtor. The Claims and amounts listed in respect of certain trade payables reflect amounts owed as of the Petition Date.

The Debtor may pay additional Claims listed on Schedule E/F during this chapter 11 case pursuant to these and other orders of the Bankruptcy Court and reserves all of its rights to update Schedule E/F to reflect such payments. In addition, certain Claims listed on Schedule E/F may be entitled to priority under section 503(b)(9) of the Bankruptcy Code.

Schedule E/F reports employee claims arising in the ordinary course of business related to wages, salaries, and other employee benefits, including paid time off. These claims are listed as of the petition date; however pursuant to the *Order Authorizing the Debtor to Pay Certain Prepetition Wages, Salaries and Reimbursable Employee Expenses*, [Docket No. 46] (the "Wage Order"), amounts earned within 180 days of the Petition Date and under the cap set by section 507(a)(4) of the Bankruptcy Code will be paid in the ordinary course of business. As such, amounts owed at confirmation may vary with what is presented in the Schedules. Accordingly, where the Debtor made post-petition payments on certain prepetition Claims pursuant to the Wage Order, the Schedules mark such claims as contingent and unliquidated. For the sake of clarity, to the extent the Debtor later pays any of the Claims listed in the Schedules and Statements pursuant to any orders entered by the Bankruptcy Court, the Debtor reserves all rights to amend or supplement the Schedules and Statements or take other action, such as filing Claim objections, as is necessary and appropriate to avoid overpayment or duplicate payments for liabilities.



The Debtor also lists two Paycheck Protection Program (“PPP”) loans with Wells Fargo Bank N.A. and Customers Bank. While the amounts listed are the face value of the loans, the Debtor anticipates that both loans will be fully forgiven and thus will reduce the general unsecured claim pool by the amounts of the loans.

Schedule E/F also contains information regarding pending litigation involving the Debtor. The dollar amount of potential Claims associated with any such pending litigation is listed as “undetermined” and marked as contingent, unliquidated, and disputed in the Schedules and Statements. Some of the litigation Claims listed on Schedule E/F may be subject to subordination pursuant to section 510 of the Bankruptcy Code. Schedule E/F also includes potential or threatened legal disputes that are not formally recognized by an administrative, judicial, or other adjudicative forum due to certain procedural conditions that counterparties have yet to satisfy.

32. **Schedule G — Executory Contracts and Unexpired Leases.** While reasonable efforts have been made to ensure the accuracy of Schedule G, the Debtor’s business is complex, and inadvertent errors, omissions, or overinclusion may have occurred. Each lease and contract listed in Schedule G may include one or more ancillary documents, including any underlying assignment and assumption agreements, amendments, supplements, full and partial assignments, renewals and partial releases, which may not be listed on Schedule G. Certain of the leases and contracts listed on Schedule G may contain certain renewal options, guarantees of payment, options to purchase, rights of first refusal, and other miscellaneous rights. Such rights, powers, duties, and obligations are not set forth on Schedule G. In addition, the Debtor may have entered into various other types of agreements in the ordinary course of business, such as financing agreements, indemnity agreements, subordination, non-disturbance agreements, supplemental agreements, amendments/letter agreements, title agreements, and confidentiality agreements. Such documents may not be set forth on Schedule G. Certain of the executory contracts may not have been memorialized in writing and could be subject to dispute.

The Debtor reserves all of its rights to dispute the validity, status, or enforceability of any contracts, agreements, or leases set forth in Schedule G and to amend or supplement such Schedule as necessary. Omission of a contract or agreement from Schedule G does not constitute an admission that such omitted contract or agreement is not an executory contract or unexpired lease. Likewise, inclusion of any agreement on Schedule G does not constitute an admission that such agreement is an executory contract or unexpired lease, or that such agreement was in effect on the Petition Date or is valid and enforceable, and the Debtor reserves all rights in that regard, including, that any agreement is not executory, has expired pursuant to its terms, or was terminated prepetition.

33. **Schedule H — Co-debtors.** Although the Debtor has made every effort to ensure the accuracy of Schedule H, inadvertent errors, omissions, or inclusions may have occurred. The Debtor hereby reserves all rights to dispute the validity, status, and enforceability of any obligations set forth on Schedule H and to further amend or supplement such Schedule as necessary.

The Debtor further reserves all rights, claims, and causes of action with respect to the obligations listed on Schedule H, including the right to dispute or challenge the characterization or the structure of any transaction, document, or instrument related to a creditor's claim. The listing of a contract, guarantee, or other obligation on Schedule H shall not be deemed an admission that such obligation is binding, valid, or enforceable.

In the ordinary course of its business, the Debtor is involved in pending or threatened litigation and claims arising out of the conduct of its business. These matters may involve multiple plaintiffs and defendants, some or all of whom may assert cross-claims and counterclaims against other parties. Because such claims are listed elsewhere in the Statements and Schedules, they may not have been set forth individually on Schedule H.

Schedule H also reflects guarantees by the Debtor. The Debtor may not have identified certain guarantees that are embedded in the Debtor's executory contracts, unexpired leases, debt instruments, and other such agreements. Further, the Debtor believes that certain of the guarantees reflected on Schedule H may have expired or may no longer be enforceable. Thus, the Debtor reserves its right, but shall not be required, to amend the Schedules to the extent that additional guarantees are identified, or such guarantees are discovered to have expired or are unenforceable.

#### **General Disclosures Applicable to Statements**

34. **Question 3.** For certain creditors receiving payment, the Debtor maintains multiple addresses for such vendor. Efforts have been made to attribute the correct address, however, in certain instances, alternate addresses may be applicable for a party listed in response to Question 3.
35. **Question 4.** For purposes of the Schedules and Statements, the Debtor defines insiders as individuals that, based upon the totality of circumstances, have a controlling interest in, or exercise sufficient control over the Debtor so as to dictate corporate policy and the disposition of assets. The Debtor does not take any position with respect to (a) such person's influence over the control of the Debtor; (b) the management responsibilities or functions of such individual; (c) the decision-making or corporate authority of such individual; or (d) whether such individual could successfully argue that he or she is not an "insider" under applicable law, including the federal securities law, or with respect to any theories of liability or any other purpose. As such, the Debtor reserves all rights to dispute whether someone identified in response to Question 4 is in fact an "insider" as defined in section 101(31) of the Bankruptcy Code.
36. **Question 7.** The Debtor reserves all its rights and defenses with respect to any and all listed lawsuits and administrative proceedings. The listing of any such suits and proceedings shall not constitute an admission by the Debtor of any liabilities or that the actions or proceedings were correctly filed against the Debtor. The Debtor also reserves its rights to assert that a Debtor is not an appropriate party to such actions or proceedings.

- 37. **Question 10.** The Debtor has made best efforts to collect applicable and responsive information however, certain *de minimis* losses, which are not tracked separately, may have been omitted.
- 38. **Question 13.** While the Debtor has made reasonable efforts to respond comprehensively to Question 13, certain *de minimis* asset sales and transfers may be omitted unintentionally. In addition, the Debtor regularly sells certain non-core assets, including certain real and personal property assets related to 3<sup>rd</sup> parties in the ordinary course of business. Accordingly, such dispositions made in the ordinary course of business have not been reflected in Question 13.
- 39. **Question 26d.** The Debtor routinely provides financial information to current and potential banks, customers, suppliers, advisors, governmental authorities, landlords, investors, and other financial institutions in the ordinary course, and in association with its debt restructuring efforts.
- 40. **Question 27.** No consumable inventory is recorded on the Debtor's financial statements.
- 41. **Question 30.** For this question, please reference Statement of Financial Affairs, Question 4.

## Fill in this information to identify the case:

Debtor Aluminum Shapes, L.L.C.United States Bankruptcy Court for the: New JerseyCase number 21-16520  
(if known)☐ Check if this is an amended filing

## Official Form 206Sum

## Summary of Assets and Liabilities for Non-Individuals

12/15

## Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)1a. **Real property:**Copy line 88 from *Schedule A/B* . . . . .

\$20,900,000.00

1b. **Total personal property:**Copy line 91A from *Schedule A/B* . . . . .

\$114,970,921.41

1c. **Total of all property:**Copy line 92 from *Schedule A/B* . . . . .

\$135,870,921.41

## Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D* . . . . .

\$15,376,951.21

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206EF)3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 6a of Schedule E/F . . . . .

\$510,243.35

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 6b of Schedule E/F . . . . .

+

\$16,858,991.69

4. **Total liabilities** . . . . .

Lines 2 + 3a + 3b

\$32,746,186.25

## Fill in this information to identify the case:

Debtor Aluminum Shapes, L.L.C.United States Bankruptcy Court for the: New JerseyCase number  
(if known) 21-16520☐ Check if this is an  
amended filing

## Official Form 206A/B

## Schedule A/B: Assets - Real and Personal Property

12/15

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

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

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

**Part 1: CASH AND CASH EQUIVALENTS****1. DOES THE DEBTOR HAVE ANY CASH OR CASH EQUIVALENTS?**

- ☐ No. Go to Part 2.  
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of  
debtor's interest**2. CASH ON HAND**

2.1. PETTY CASH \$1,214.32

**3. CHECKING, SAVINGS, MONEY MARKET, OR FINANCIAL BROKERAGE ACCOUNTS  
(IDENTIFY ALL)**

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
3.1. M&T BANK	CHECKING	4169	\$0.00
3.2. M&T BANK	OPERATING	4151	\$48,833.67

**4. OTHER CASH EQUIVALENTS**

NONE

**5 Total of Part 1.**  
ADD LINES 2 THROUGH 4 (INCLUDING AMOUNTS ON ANY ADDITIONAL SHEETS). COPY THE  
TOTAL TO LINE 80.

\$50,047.99

**Part 2: DEPOSITS AND PREPAYMENTS****6. DOES THE DEBTOR HAVE ANY DEPOSITS OR PREPAYMENTS?**

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

Current value of  
debtor's interest**7. DEPOSITS, INCLUDING SECURITY DEPOSITS AND UTILITY DEPOSITS**

DESCRIPTION, INCLUDING NAME OF HOLDER OF DEPOSIT

Current value of  
debtor's interest**7. DEPOSITS, INCLUDING SECURITY DEPOSITS AND UTILITY DEPOSITS**

DESCRIPTION, INCLUDING NAME OF HOLDER OF DEPOSIT

NONE

**8. PREPAYMENTS, INCLUDING PREPAYMENTS ON EXECUTORY CONTRACTS, LEASES, INSURANCE, TAXES, AND RENT**

DESCRIPTION, INCLUDING NAME OF HOLDER OF PREPAYMENT

8.1.	PREPAID INSURANCE - CONNOR STRONG	\$99,313.56
8.2.	PREPAID INSURANCE - ICW	\$87,625.35
8.3.	PROFESSIONAL FEE RETAINER - BERWYN CAPITAL	\$35,000.00
8.4.	PROFESSIONAL FEE RETAINER - EPIQ CORPORATE RESTRUCTURING, LLC	\$26,335.93
8.5.	PROFESSIONAL FEE RETAINER - OBERMAYER	\$23,684.00
8.6.	PROFESSIONAL FEE RETAINER - RIVERON CONSULTING, LLC	\$46,727.79

**9 Total of Part 2.**

ADD LINES 7 THROUGH 8. COPY THE TOTAL TO LINE 81.

\$318,686.63

**Part 3: ACCOUNTS RECEIVABLE****10. DOES THE DEBTOR HAVE ANY ACCOUNTS RECEIVABLE?**

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

Current value of  
debtor's interest**11. ACCOUNTS RECEIVABLE**

90 DAYS OR LESS	\$507,055.03	\$126,998.76	=	\$380,056.27
	face amount	doubtful or uncollectable accounts	→	
OVER 90 DAYS	\$194,878.68	\$194,878.68	=	\$0.00
	face amount	doubtful or uncollectable accounts	→	

**12 Total of Part 3.**

CURRENT VALUE ON LINES 11A + 11B = LINE 12. COPY THE TOTAL TO LINE 82.

\$380,056.27

**Part 4: INVESTMENTS****13. DOES THE DEBTOR OWN ANY INVESTMENTS?**

- ☐ No. Go to Part 5.  
☒ Yes. Fill in the information below.

Valuation method used  
for current valueCurrent value of  
debtor's interest**14. MUTUAL FUNDS OR PUBLICLY TRADED STOCKS NOT INCLUDED IN PART 1**

NAME OF FUND OR STOCK:

**15. NON-PUBLICLY TRADED STOCK AND INTERESTS IN INCORPORATED AND UNINCORPORATED BUSINESSES, INCLUDING ANY INTEREST IN AN LLC, PARTNERSHIP, OR JOINT VENTURE**

Name of entity	% of ownership		
15.1. INVESTMENT IN ALUMINUM SHAPES RP, LLC	100%	UNKNOWN	UNKNOWN
15.2. INVESTMENT IN FOREVER OUTDOOR LLC	100%	UNKNOWN	UNKNOWN
15.3. INVESTMENT IN SHAPES REALTY LLC	100%	UNKNOWN	UNKNOWN

	Valuation method used for current value	Current value of debtor's interest
16. GOVERNMENT BONDS, CORPORATE BONDS, AND OTHER NEGOTIABLE AND NON-NEGOTIABLE INSTRUMENTS NOT INCLUDED IN PART 1		
DESCRIBE:		
17 Total of Part 4. ADD LINES 14 THROUGH 16. COPY THE TOTAL TO LINE 83.		UNDETERMINED

Part 5: INVENTORY, EXCLUDING AGRICULTURE ASSETS

18. DOES THE DEBTOR OWN ANY INVENTORY (EXCLUDING AGRICULTURE ASSETS)?				
<input type="checkbox"/> No. Go to Part 6.				
<input checked="" type="checkbox"/> Yes. Fill in the information below.				
General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. RAW MATERIALS				
19.1. LOG, BILLET, & SCRAP	7/31/2021	\$232,176.71	COST	\$232,176.71
20. WORK IN PROGRESS				
20.1. EXTRUDED ALUMINUM	N/A	\$9,537.34	COST	\$9,537.34
21. FINISHED GOODS, INCLUDING GOODS HELD FOR RESALE				
21.1. PACKED ALUMINUM	N/A	\$53,279.71	COST	\$53,279.71
22. OTHER INVENTORY OR SUPPLIES				
22.1. PARTS	N/A	\$400,000.00	COST	\$400,000.00
23 Total of Part 5. ADD LINES 19 THROUGH 22. COPY THE TOTAL TO LINE 84.				\$694,993.76
24. Is any of the property listed in Part 5 perishable?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes Book value Valuation method Current value				
26. Has any of the property listed in Part 5 been appraised by a professional within the last year?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Part 6: FARMING AND FISHING-RELATED ASSETS (OTHER THAN TITLED MOTOR VEHICLES AND LAND)

27. DOES THE DEBTOR OWN OR LEASE ANY FARMING AND FISHING-RELATED ASSETS (OTHER THAN TITLED MOTOR VEHICLES AND LAND)?			
<input checked="" type="checkbox"/> No. Go to Part 7.			
<input type="checkbox"/> Yes. Fill in the information below.			
General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. CROPS—EITHER PLANTED OR HARVESTED			
29. FARM ANIMALS EXAMPLES: LIVESTOCK, POULTRY, FARM-RAISED FISH EXAMPLES: LIVESTOCK, POULTRY, FARM-RAISED FISH			
30. FARM MACHINERY AND EQUIPMENT (OTHER THAN TITLED MOTOR VEHICLES) (OTHER THAN TITLED MOTOR VEHICLES)			

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
30. FARM MACHINERY AND EQUIPMENT (OTHER THAN TITLED MOTOR VEHICLES) (OTHER THAN TITLED MOTOR VEHICLES)			
31. FARM AND FISHING SUPPLIES, CHEMICALS, AND FEED			
32. OTHER FARMING AND FISHING-RELATED PROPERTY NOT ALREADY LISTED IN PART 6			
33. Total of Part 6. ADD LINES 28 THROUGH 32. COPY THE TOTAL TO LINE 85.			NOT APPLICABLE
34. Is the debtor a member of an agricultural cooperative? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is any of the debtor's property stored at the cooperative? <input type="checkbox"/> No <input type="checkbox"/> Yes			
35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
36. Is a depreciation schedule available for any of the property listed in Part 6? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
37. Has any of the property listed in Part 6 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>Part 7: OFFICE FURNITURE, FIXTURES, AND EQUIPMENT; AND COLLECTIBLES</b>			
38. DOES THE DEBTOR OWN OR LEASE ANY OFFICE FURNITURE, FIXTURES, EQUIPMENT, OR COLLECTIBLES? <input type="checkbox"/> No. Go to Part 8. <input checked="" type="checkbox"/> Yes. Fill in the information below.			
General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. OFFICE FURNITURE			
39.1. SEE ATTACHED EXHIBIT 39	UNKNOWN	UNKNOWN	UNKNOWN
40. OFFICE FIXTURES			
41. OFFICE EQUIPMENT, INCLUDING ALL COMPUTER EQUIPMENT AND COMMUNICATION SYSTEMS EQUIPMENT AND SOFTWARE			
41.1. SEE ATTACHED EXHIBIT 41	UNKNOWN	UNKNOWN	UNKNOWN
42. COLLECTIBLES EXAMPLES: ANTIQUES AND FIGURINES; PAINTINGS, PRINTS, OR OTHER ARTWORK; BOOKS, PICTURES, OR OTHER ART OBJECTS; CHINA AND CRYSTAL; STAMP, COIN, OR BASEBALL CARD COLLECTIONS; OTHER COLLECTIONS, MEMORABILIA, OR COLLECTIBLES EXAMPLES: ANTIQUES AND FIGURINES; PAINTINGS, PRINTS, OR OTHER ARTWORK; BOOKS, PICTURES, OR OTHER ART OBJECTS; CHINA AND CRYSTAL; STAMP, COIN, OR BASEBALL CARD COLLECTIONS; OTHER COLLECTIONS, MEMORABILIA, OR COLLECTIBLES			
43. Total of Part 7. ADD LINES 39 THROUGH 42. COPY THE TOTAL TO LINE 86.			UNDETERMINED
44. Is a depreciation schedule available for any of the property listed in Part 7? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			



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

- ☒ No  
☐ Yes

**Part 8: MACHINERY, EQUIPMENT, AND VEHICLES****46. DOES THE DEBTOR OWN OR LEASE ANY MACHINERY, EQUIPMENT, OR VEHICLES?**

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

**General description**

Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)

**Net book value of debtor's interest**  
(Where available)

**Valuation method used for current value**

**Current value of debtor's interest**

**47. AUTOMOBILES, VANS, TRUCKS, MOTORCYCLES, TRAILERS, AND TITLED FARM VEHICLES**

47.1.	BUICK ENCLAVE 2016 - VIN: KL4CJASB1GB678618	UNKNOWN	UNKNOWN	UNKNOWN
47.2.	FORD F350 VIN: 1FT8W3B60HEE23387	UNKNOWN	UNKNOWN	UNKNOWN
47.3.	FORD F450 - VIN: 1FT8W4DT0KEC73278	UNKNOWN	UNKNOWN	UNKNOWN

**48. WATERCRAFT, TRAILERS, MOTORS, AND RELATED ACCESSORIES** EXAMPLES: BOATS, TRAILERS, MOTORS, FLOATING HOMES, PERSONAL WATERCRAFT, AND FISHING VESSELS

NONE

**49. AIRCRAFT AND ACCESSORIES**

NONE

**50. OTHER MACHINERY, FIXTURES, AND EQUIPMENT (EXCLUDING FARM MACHINERY AND EQUIPMENT)**

50.1.	SEE ATTACHED EXHIBIT 50	UNKNOWN	APPRAISED VALUE	\$7,473,000.00
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**51 Total of Part 8.**

ADD LINES 47 THROUGH 50. COPY THE TOTAL TO LINE 87.

\$7,473,000.00

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

- ☒ No  
☐ Yes

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

- ☐ No  
☒ Yes

**Part 9: REAL PROPERTY****54. DOES THE DEBTOR OWN OR LEASE ANY REAL PROPERTY?**

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

**55. ANY BUILDING, OTHER IMPROVED REAL ESTATE, OR LAND WHICH THE DEBTOR OWNS OR IN WHICH THE DEBTOR HAS AN INTEREST**

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

**Nature and extent of debtor's interest in property**

**Net book value of debtor's interest**  
(Where available)

**Valuation method used for current value**

**Current value of debtor's interest**

55.1.	FACTORY AND WAREHOUSE - 9000 RIVER ROAD, DELAIR, NJ 08110. APPROX 500,000 SQ. FT ON +/- 25 ACRES	OWNER	UNKNOWN	APPRAISED VALUE	\$20,900,000.00
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56

Total of Part 9.  
ADD THE CURRENT VALUE ON LINES 55.1 THROUGH 55.6 AND ENTRIES FROM ANY ADDITIONAL SHEETS. COPY THE TOTAL TO LINE 88.

\$20,900,000.00

57.

Is a depreciation schedule available for any of the property listed in Part 9?  
☒ No  
☐ Yes

58.

Has any of the property listed in Part 9 been appraised by a professional within the last year?  
☐ No  
☒ Yes

Part 10:

INTANGIBLES AND INTELLECTUAL PROPERTY

59.

DOES THE DEBTOR HAVE ANY INTERESTS IN INTANGIBLES OR INTELLECTUAL PROPERTY?  
☐ No. Go to Part 11.  
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. PATENTS, COPYRIGHTS, TRADEMARKS, AND TRADE SECRETS NONE			
61. INTERNET DOMAIN NAMES AND WEBSITES NONE			
62. LICENSES, FRANCHISES, AND ROYALTIES NONE			
63. CUSTOMER LISTS, MAILING LISTS, OR OTHER COMPILATIONS NONE			
64. OTHER INTANGIBLES, OR INTELLECTUAL PROPERTY NONE			
65. GOODWILL			
65.1. GOODWILL	\$6,905,863.74	BOOK	\$6,905,863.74

66

Total of Part 10.  
ADD LINES 60 THROUGH 65. COPY THE TOTAL TO LINE 89.

\$6,905,863.74

67.

Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?  
☒ No  
☐ Yes

68.

Is there an amortization or other similar schedule available for any of the property listed in Part 10?  
☒ No  
☐ Yes

69.

Has any of the property listed in Part 10 been appraised by a professional within the last year?  
☒ No  
☐ Yes

Part 11:

ALL OTHER ASSETS

70.

DOES THE DEBTOR OWN ANY OTHER ASSETS THAT HAVE NOT YET BEEN REPORTED ON THIS FORM?  
INCLUDE ALL INTERESTS IN EXECUTORY CONTRACTS AND UNEXPIRED LEASES NOT PREVIOUSLY REPORTED ON THIS FORM.  
☐ No. Go to Part 12.  
☒ Yes. Fill in the information below.

71.

NOTES RECEIVABLE

Current value of debtor's interest

			Current value of debtor's interest
71. NOTES RECEIVABLE			
DESCRIPTION (INCLUDE NAME OF OBLIGOR)			
NONE			
72. TAX REFUNDS AND UNUSED NET OPERATING LOSSES (NOLS)			
DESCRIPTION (FOR EXAMPLE, FEDERAL, STATE, LOCAL)			
72.1.	FEDERAL AND NEW JERSEY STATE NOLS	Tax year 2019	\$99,130,169.00
73. INTERESTS IN INSURANCE POLICIES OR ANNUITIES			
NONE			
74. CAUSES OF ACTION AGAINST THIRD PARTIES (WHETHER OR NOT A LAWSUIT HAS BEEN FILED)			
NONE			
75. OTHER CONTINGENT AND UNLIQUIDATED CLAIMS OR CAUSES OF ACTION OF EVERY NATURE, INCLUDING COUNTERCLAIMS OF THE DEBTOR AND RIGHTS TO SET OFF CLAIMS			
NONE			
76. TRUSTS, EQUITABLE OR FUTURE INTERESTS IN PROPERTY			
NONE			
77. OTHER PROPERTY OF ANY KIND NOT ALREADY LISTED EXAMPLES: SEASON TICKETS, COUNTRY CLUB MEMBERSHIP EXAMPLES: SEASON TICKETS, COUNTRY CLUB MEMBERSHIP			
77.1.	INTERCOMPANY RECEIVABLE - FOREVER OUTDOOR LLC		\$18,104.02
78	Total of Part 11. ADD LINES 71 THROUGH 77. COPY THE TOTAL TO LINE 90.		\$99,148,273.02
79. Has any of the property listed in Part 11 been appraised by a professional within the last year?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$50,047.99	
81. Deposits and prepayments. Copy line 9, Part 2.	\$318,686.63	
82. Accounts receivable. Copy line 12, Part 3.	\$380,056.27	
83. Investments. Copy line 17, Part 4.	UNDETERMINED	
84. Inventory. Copy line 23, Part 5.	\$694,993.76	
85. Farming and fishing-related assets. Copy line 33, Part 6.		
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	UNDETERMINED	

87.	Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$7,473,000.00	
88.	Real property. Copy line 56, Part 9. .... →		\$20,900,000.00
89.	Intangibles and intellectual property. Copy line 66, Part 10.	\$6,905,863.74	
90.	All other assets. Copy line 78, Part 11. .... +	\$99,148,273.02	
91.	Total. Add lines 80 through 90 for each column. .... 91a.	\$114,970,921.41	+ 91b. \$20,900,000.00
92.	Total of all property on Schedule A/B. Lines 91a + 91b = 92. ....		\$135,870,921.41

## EXHIBIT 39

Aluminum Shapes, L.L.C.  
Case Number 21-16520

**SCHEDULE A&B, PART 7, QUESTION #39**  
**OFFICE FURNITURE**

#	Count	Description	Net book value of interest	Valuation method used for current value	Current value of debtor's interest
39.1	6	Conference Tables	UNKNOWN	UNKNOWN	UNKNOWN
39.2	327	Conference Room/General Office/ Other Chairs	UNKNOWN	UNKNOWN	UNKNOWN
39.3	104	Desks	UNKNOWN	UNKNOWN	UNKNOWN
39.4	112	Desk Chairs	UNKNOWN	UNKNOWN	UNKNOWN
39.5	24	Credenzas	UNKNOWN	UNKNOWN	UNKNOWN
39.6	6	Armoires	UNKNOWN	UNKNOWN	UNKNOWN
39.7	44	Office Tables	UNKNOWN	UNKNOWN	UNKNOWN
39.8	28	Small File Cabinets	UNKNOWN	UNKNOWN	UNKNOWN
39.9	125	Large File Cabinets	UNKNOWN	UNKNOWN	UNKNOWN
39.10	14	TVs	UNKNOWN	UNKNOWN	UNKNOWN
39.11	21	Refrigerators	UNKNOWN	UNKNOWN	UNKNOWN
39.12	3	Chest Freezer	UNKNOWN	UNKNOWN	UNKNOWN
39.13	6	Couches	UNKNOWN	UNKNOWN	UNKNOWN
39.14	1	Benches	UNKNOWN	UNKNOWN	UNKNOWN
39.15	43	Bookshelves	UNKNOWN	UNKNOWN	UNKNOWN
39.16	52	Folding Chairs	UNKNOWN	UNKNOWN	UNKNOWN
39.17	15	Folding Tables	UNKNOWN	UNKNOWN	UNKNOWN
39.18	1	Drawing/Light Table	UNKNOWN	UNKNOWN	UNKNOWN
39.19	1	Microwave Oven	UNKNOWN	UNKNOWN	UNKNOWN
39.20	25	Breakroom/Picnic Style Table	UNKNOWN	UNKNOWN	UNKNOWN
39.21	4	Round Banquet Tables	UNKNOWN	UNKNOWN	UNKNOWN

## EXHIBIT 41

Aluminum Shapes, L.L.C.

Case Number 21-16520

**SCHEDULE A&B, PART 7, QUESTION #41**  
**OFFICE EQUIPMENT INCLUDING COMPUTERS + SOFTWARE**

#	Count	Description	Net book value of interest	Valuation method used for current value	Current value of debtor's interest
41.1	122	PCs	UNKNOWN	UNKNOWN	UNKNOWN
41.2	19	Laptops	UNKNOWN	UNKNOWN	UNKNOWN
41.3	205	Monitors	UNKNOWN	UNKNOWN	UNKNOWN
41.4	125	Keyboards	UNKNOWN	UNKNOWN	UNKNOWN
41.5	125	Mice	UNKNOWN	UNKNOWN	UNKNOWN
41.6	40	Printers (small)	UNKNOWN	UNKNOWN	UNKNOWN
41.7	8	Printers (large)	UNKNOWN	UNKNOWN	UNKNOWN
41.8	26	Cameras	UNKNOWN	UNKNOWN	UNKNOWN
41.9	12	Physical Servers	UNKNOWN	UNKNOWN	UNKNOWN

## EXHIBIT 50

Aluminum Shapes, L.L.C.  
Case Number 21-16520

**SCHEDULE A&B, PART 8, QUESTION #50**  
**OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT**

#	Count	Description	Net book value of interest	Valuation method used for current value	Current value of debtor's interest
50.1	1	Saw, Radial Arm, Metal Cutting, 1999, 16", Original Saw, 35769, with Roller Feed Conveyor; and Torit Dust Collector, 991210505	UNKNOWN	APPRAISED VALUE	\$1,500
50.2	1	Saw, Cut-Off, Cold, 1997, B&O, B-824, Power Clamping; with Feed and Exit Conveyors; and Torit Dust Collector, Asset #1094, B97-00131	UNKNOWN	APPRAISED VALUE	\$10,000
50.3	1	Saw, Cut-Off, Horizontal Acting, 20", Oliver, Approximately 10 hp Motor; with Hammond Dust Collector, 204838	UNKNOWN	APPRAISED VALUE	\$2,500
50.4	1	Saw, Cut-Off, 24", Oliver, with Hammond Dust Collector, Asset #2035, 200180	UNKNOWN	APPRAISED VALUE	\$4,000
50.5	1	Saw, Cut-Off, Upacting, 10" x 22", Metlsaw, CS2 T1022, with Hydraulic Clamp; Allen-Bradley Model PanelView 1000 PLC Control; Feed and Exit Conveyors; Stacking Table; and Dustkop Dust Collector, 563	UNKNOWN	APPRAISED VALUE	\$25,000
50.6	1	Brake, Press, 1957, 90-Ton, Verson, 306-F, 22" x 96" Permanently Flanged Bed Size, 6" Stroke, 16-1/6" Shut Height, 5" Ram Adjustment, 13765/300	UNKNOWN	APPRAISED VALUE	\$5,000
50.7	1	Brake, Hydraulic Press, 1977, 90-Ton, Cincinnati, 90CB, 12' Bed Length, 8" Stroke, 7" Throat, 102" Distance Between Housing, 41356	UNKNOWN	APPRAISED VALUE	\$20,000
50.8	1	Brake, Press, 1949, Approximately 115-Ton, Verson, B-58, 10' Bed Length, 8" Stroke, 102" Distance Between Housings, 7968	UNKNOWN	APPRAISED VALUE	\$2,500
50.9	1	Lathe, Gap Bed, Quick Change Geared Head, 20/27 x 80" Between Centers, Birmingham, YCL2080, 10 hp Motor, 45 to 1,600 rpm Spindle Speed Range, Treading, 4-48	UNKNOWN	APPRAISED VALUE	\$5,000
50.10	1	Brake, Press, 1967, 150-Ton, Cyril Bath, 150-10, 12' Bed Length, 8" Throat, 120" Distance Between Housings, 6734	UNKNOWN	APPRAISED VALUE	\$5,000
50.11	1	Brake, Press, 1955, 100-Ton, Mercury, 10010, 12' x 8 Gauge Capacity, 4" Stroke, 5" Adjustment, 13" Shut Height, 5528-305	UNKNOWN	APPRAISED VALUE	\$3,500
50.12	1	Brake, Press, 1950, Approximately 100-Ton, Airtherm, 2512, 10' x 10 Gauge, 3" Stroke, 5" Adjustment, 1127	UNKNOWN	APPRAISED VALUE	\$2,500
50.13	1	Press, Non-Geared End Wheel, 1926, Approximately 50-Ton, Ferracute, P3, 16461	UNKNOWN	APPRAISED VALUE	\$250
50.14	1	Grinder, Surface, 6" x 18", Chevalier, Super 618, 2 hp Direct Drive Spindle, Power X- and Y-Axis Feed; with 6" x 18" Electromagnetic Chuck; and 2-Axis Digital Readout, 02S-0001	UNKNOWN	APPRAISED VALUE	\$1,800

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.15	1	Brake, Press, 1943, 135-Ton, Cincinnati, 5, 12' Bed Length, 8" Throat, 102" Distance Between Housings, 16K63	UNKNOWN	APPRAISED VALUE	\$4,000
50.16	1	Brake, Press, 1969, 225-Ton, Cincinnati, 9, 12' Bed Length, 3" Stroke, 8" Throat, 150" Distance Between Housings, 37216	UNKNOWN	APPRAISED VALUE	\$9,500
50.17	2	Saw, Cut-Off, 16", Oliver, 94-DHX, Each with Hammond Dust Collector, 95716, 95532	UNKNOWN	APPRAISED VALUE	\$4,000
50.18	1	Press, OBI, Non-Geared, 1949, 72-Ton, Niagara, A4, 20" x 31" Bed Size, 3" Stroke, 26881	UNKNOWN	APPRAISED VALUE	\$1,000
50.19	1	Press, OBI, Back Geared, 1973, 60-Ton, Niagara, A60, 21" x 32" Bed Size, 4" Stroke, 14" Shut Height, 3" Adjustment, 100 spm, Air Clutch, 47553	UNKNOWN	APPRAISED VALUE	\$3,500
50.20	1	Brake, Press, 1955, 90-Ton, Chicago Dreis & Krump, 410-D, 12' Bed Length, 10 Gauge Capacity, 8" Throat, 126" Distance Between Housings, P-8301	UNKNOWN	APPRAISED VALUE	\$4,000
50.21	1	Saw, Cut-Off, 16", Oliver, 94-DHX, 5 hp Motor; with Hammond Dust Collector, 205811	UNKNOWN	APPRAISED VALUE	\$2,000
50.22	1	Drill Press, Floor Type, 15", Orbit, with Round Table	UNKNOWN	APPRAISED VALUE	\$300
50.23	1	Milling Machine, Vertical, Ex-Cell-O, 100 to 3,800 rpm Variable Speed, 9" x 42" Table, 6023308	UNKNOWN	APPRAISED VALUE	\$1,500
50.24	1	Press, Gap Frame, Eccentric Geared, 1987, 60-Ton, Niagara, E-60, 21" x 32" Bed Area, 3.5" Stroke, 14" Shut Height, 3.5" Adjustment, 60 spm, Air Clutch, Air Counterbalance, P52800	UNKNOWN	APPRAISED VALUE	\$6,500
50.25	1	Brake, Press, 1969, 135-Ton, Cincinnati, 5, 12' Bed Length, 3" Stroke, 8" Throat, 37518	UNKNOWN	APPRAISED VALUE	\$6,000
50.26	1	Brake, Press, 1965, 225-Ton, Cincinnati, 9, 10' Bed Length, 5" Stroke, 8" Throat, Air Counterbalance, 34552	UNKNOWN	APPRAISED VALUE	\$9,500
50.27	1	Saw, Cut-Off, 16", Oliver, 94-DHX, 200898	UNKNOWN	APPRAISED VALUE	\$2,000
50.28	1	Brake, Press, 1953, 100-Ton, Mercury, 10010, 12' x 8 Gauge Capacity Bed Length, 8" Throat, 4" Stroke, 5" Adjustment, 13" Shut Height, 5339-255	UNKNOWN	APPRAISED VALUE	\$3,500
50.29	1	Brake, Press, 1950, 90-Ton, Cincinnati, 50-6, 8' Bed Length, 3" Stroke, 8" Throat, 25378	UNKNOWN	APPRAISED VALUE	\$3,000
50.30	1	Brake, Press, 1977, 100-Ton, Niagara, IB65-8-10, 10' Bed Length, 8" Throat, 3" Stroke, 106" Distance Between Housings, 49954	UNKNOWN	APPRAISED VALUE	\$9,500
50.31	1	Brake, Press, 1963, 100-Ton, Chicago Dreis & Krump, 410-D, 12' Bed Length, 8" Throat, 126" Distance Between Housings, 6" Stroke, P8978	UNKNOWN	APPRAISED VALUE	\$4,000
50.32	1	Dust Collector, Dust Tube, Torit	UNKNOWN	APPRAISED VALUE	\$1,500
50.33	1	Brake, Press, 1964, 90-Ton, Chicago Dreis & Krump, 1012-L, 12' Bed Length, 8" Throat, 126" Distance Between Housings, L-15554	UNKNOWN	APPRAISED VALUE	\$4,500



## EXHIBIT 50

Aluminum Shapes, L.L.C.  
Case Number 21-16520

**SCHEDULE A&B, PART 8, QUESTION #50**  
**OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT**

50.34	2	Saw, Miter, Double Head, 16", Pistorius, 7-1/2 hp Motor, 12' Maximum Cutting Length	UNKNOWN	APPRAISED VALUE	\$5,000
50.35	1	Saw, Vertical Metal Cutting Band, 1957, 26", DoAll, 26-4, 32" x 41" Table Size, 40-10,800 fpm Blade Speed; with Model DBW-15 Blade Welder, 99-57105	UNKNOWN	APPRAISED VALUE	\$1,500
50.36	1	Saw, Vertical Metal Cutting Band, 1942, 16", DoAll, ML, 24" x 24" Table Size; with Blade Welder, 425068	UNKNOWN	APPRAISED VALUE	\$800
50.37	1	Drill Press, Floor-Type, Box Column Sliding Head, 24", Leland-Gifford, No. 2, 9927	UNKNOWN	APPRAISED VALUE	\$550
50.38	1	Press, OBI, Back Geared, 1939, 72-Ton, Niagara, A4, 20" x 31" Bed Area, 3-1/2" Stroke, 17-1/4" Shut Height; with Air Clutch, 16130	UNKNOWN	APPRAISED VALUE	\$1,000
50.39	1	Drill Press, Schrader Bellows	UNKNOWN	APPRAISED VALUE	\$2,000
50.40	1	Press, Hydraulic, H-Frame, 100-Ton, Enerpac	UNKNOWN	APPRAISED VALUE	\$1,200
50.41	1	Extrusion Line, 6,500-Ton, Danieli, To Include: (1) Elhaus Billet/Log Loader; with Indexing Device (1) Elhaus Gas Fired Billet Heating Oven, S/N 1060/2060, (1995); Overall 83'L, 18.08" Maximum Billet Diameter, 1,022°F Maximum Billet Temperature, Throughput, 16.08"D Billet, 17,400 Lbs./Hour, 18.08"D Billet, 19,400 Lbs./Hour (1) Elhaus Hydraulic Log Shear; 632 Ton Shear Force, 18" Shear Stroke, Hydraulic Clamping; with Transfer Conveyor (1) Danieli 6,600-Ton 4-Post Horizontal Hydraulic Extrusion Press, (1996); 40 ipm Maximum Extrusion Speed, 61.023"L Container, 35.433" Die Stack Thickness, 16.535" Container Bore, 18.08"D Billet; with Hydraulic Unit, with (3) Approximately 250 hp Motors; Overhead Billet Transfer Gantry System; Butt Shear; Exit End Hydraulic Knurler; and In-Floor Trim Removal Conveyor (1) OMAV Model Type 082 7.5m Water Quench Tunnel, S/N 67-95 (1) OMAV Rail Mounted Double Extrusion Puller; 50 to 1,500 Lb. Puller Force, 200 fpm Maximum Working Speed (1) OMAV Rail Mounted Traveling Hot Saw; Approximately 45"D Blade, 33' Saw Travel, 33" Cutting Width; with Dust Collector (1) Custom Fabricated 33" x 210' Roller Conveyor; with (5) 75 hp Blowers (1) Custom Fabricated 16' x 200' Walking Beam Cooling Bed (1) OMAV Model Type 131 250-Ton Automatic Stretcher, S/N 74-95; 66.93" Stroke, 200'9" Maximum Stretching Length, +/- 45° Head Stock Rotation (1) OMAV Model 150 Automatic Cut-Off Cold Saw, S/N 76-95; 16" x 50" Opening Size; with Power Clamp; Programmable Stop; Scrap Tilt Table; Cross Transfer Exit Conveyor; and Dust Collector (1) Castool Model C300-3-FF Die Preheat Oven, S/N 2105, (2002) (1) Belco 90-kW Die Preheat Oven (6) Thermika 133-kW Die PreHeat Ovens (#1-6) (3) Thermika 155-kW	UNKNOWN	APPRAISED VALUE	\$3,000,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

		Die PreHeat Ovens (#7-9) (1) Custom Fabricated Hydraulic Die Extractor			
50.42	1	Brake, Press, 1972, 225-Ton, Cincinnati, 9, 12' Bed Length, 4" Stroke, 8" Throat, 39015	UNKNOWN	APPRAISED VALUE	\$9,500
50.43	1	Milling Machine, Vertical, Variable Seed, Besmer, 961816AM	UNKNOWN	APPRAISED VALUE	\$2,500
50.44	1	Saw, Cut-Off, Cold, B&O, 6000B, 24" Blade, 8" Maximum Cut Capacity; with Allen-Bradley Programmable Control; Pneumatic Clamping; 18" x 20' Roller Conveyor; and 10" x 10' Power Belt Conveyor, 8142	UNKNOWN	APPRAISED VALUE	\$7,500
50.45	1	Saw, Miter, CNC Double, 2016, Elumatec, DG142/E11, 8.2 kW Motors, (2) Cutting Stations with 45° and 90° Cut Capability, 246" Maximum Cut Length, Pneumatic Clamping; with Programmable Control Station, 1420099513	UNKNOWN	APPRAISED VALUE	\$11,000
50.46	1	Finisher, Vibratory, 1986, 15-Cubic Foot, Wheelabrator, HB15UA, B158606	UNKNOWN	APPRAISED VALUE	\$3,500

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.47	1	Machining Center, CNC Horizontal, 2014, Haas, EC-400, 12,000 rpm, CAT 40 Spindle, 15.8" x 15.8" Pallet Table, 20" X-, 20" Y-, and 20" Z-Axis Travel, 4-Axis Capable, 2-Pallet Work Piece System; with 24-Position Automatic Tool Changer; Haas Automation CNC Controller; and Renishaw Toolsetter System, 2054313	UNKNOWN	APPRAISED VALUE	\$40,000
50.48	1	Milling Machine, CNC Vertical, 2005, Haas, TM-2, 4,000 rpm, CAT 40 Spindle, 11" x 58" T-Slotted Table, 40" X-, 16" Y-, and 16" Z-Axis Travel; with Haas Controls; and 10-Position Automatic Tool Changer, 40288	UNKNOWN	APPRAISED VALUE	\$10,000
50.49	1	Machining Center, CNC Vertical, 2014, Haas, VF-12/40, 7,500 rpm, CAT 40 Spindle, 150" x 28" T-Slotted Table, 150" X-, 32" Y-, and 30" Z-Axis Travel; with Haas Controls; and 24-Position Automatic Tool Changer, 1110685	UNKNOWN	APPRAISED VALUE	\$95,000
50.50	1	Saw, Miter, Double Angle, 16", Pistorius, (2) 10 hp Motors, 150" Maximum Cut-Off Length	UNKNOWN	APPRAISED VALUE	\$2,500
50.51	1	Drill, Radial, 10" Column x 32" Arm, South Bend, GF50-800, 40 to 1,750 rpm, Power Elevation, 510301	UNKNOWN	APPRAISED VALUE	\$2,000
50.52	1	Crimper, Hydraulic, Parker, PHastkrimp	UNKNOWN	APPRAISED VALUE	\$2,000
50.53	1	Milling Machine, Vertical, 2013, Victor, JF-4VS, 3 hp Motor, 60 to 4,200 rpm Variable-Speed, 9" x 49" Table, Power Cross Feed, Hydraulic Drawbar; with 2-Axis Digital Readout, 201307009	UNKNOWN	APPRAISED VALUE	\$3,000
50.54	1	Brake Press, 1975, 225-Ton, Cincinnati, 9, 14' Bed Length, 3" Stroke, 8" Throat, 150" Distance Between Housings, 40752	UNKNOWN	APPRAISED VALUE	\$9,500
50.55	1	Punch Press, 5-Ton, Alva Allen	UNKNOWN	APPRAISED VALUE	\$500
50.56	1	Baler, Briquetter, KLI	UNKNOWN	APPRAISED VALUE	\$35,000
50.57	1	Baler, Briquetter, OMAV	UNKNOWN	APPRAISED VALUE	\$45,000
50.58	1	Lathe, CNC, 2001, Haas, SL-30T, 10" Chuck, Tool Setter, Tailstock; with Haas Model Servo 300 Bar Stock Feeder, 64130	UNKNOWN	APPRAISED VALUE	\$12,500
50.59	1	Machining Center, CNC Vertical, 2016, Haas, VF-12/40, 7,500 rpm, CAT 40 Spindle, 150" x 28" T-Slotted Table, 150" X-, 32" Y-, and 30" Z-Axis Travel; with Haas Controls; and 24-Position Automatic Tool Changer, 1128470	UNKNOWN	APPRAISED VALUE	\$105,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.60	1	Extrusion Line, 2,002-Ton, Sutton, No. 1, To Include: (1) Granco-Clark Steel Frame Billet Loading Rack; with Hydraulic Pusher (1) Granco-Clark Model 69-45-4 SST Hot Jet Billet/Log Heating Furnace, S/N 12666-00, (2000); Natural Gas Fired, Capacity 7,000 Lbs./Hour, 7"D Aluminum, Maximum Temperature 1,000°F, 30"L; with Allen-Bradley PLC Control (1) Granco-Clark Hydraulic Log Shear; with Billet Pusher; and Transport System (1) Sutton 2,002-Ton 4-Post Horizontal Hydraulic Extrusion Press, Asset #141, (1964); Maximum Extrusion Speed 65 ipm, Container Length 33", Die Stack Thickness 14", Container Bore 7.375", Maximum Stroke 72", Billet Diameter 7.08"; with Hydraulic Unit, with (3) 200 hp Motors; Hydraulic Die Changer, with Overhead Cut-Off Unit; Control Console, with Allen-Bradley PLC Controls; Benshaw Drives and Motor Control; and Track Mounted Extrusion Puller (1) Custom Fabricated Power Roller Conveyor; 24" x 190'; with (9) Cooling Fans (1) Custom Fabricated 25' x 190' Walking Beam Conveyor; with (26) Cooling Fans (1) Sutton 15-Ton Horizontal Hydraulic Stretcher; 72" Stroke, 20 hp Motor (1) Oliver Model 824 18" Upacting Cut-Off Saw, S/N 207719; Power Clamping, 22 hp Motor; with Dust Collector (2) Thermika 33-kW Die PreHeat Ovens, (2014)	UNKNOWN	APPRAISED VALUE	\$300,000
50.61	1	Extrusion Line, 5,000-Ton, Clearing, To Include: (1) Custom Fabricated Billet Loading Station (1) Belco Model 1214.20.3.P15 Gas Fired Billet Heating Oven, S/N 7188.79, (1979); 42"L, 4,400,000 Btus/Hour; with (3) Barber Colman Temperature Controllers (1) Clearing Model H-5000-144 5,000-Ton 4-Post Horizontal Hydraulic Extrusion Press; Maximum Extrusion Speed 25 ipm, Container Length 42", Die Stack Thickness 25-5/32", Container Bore 14.4375", Maximum Stroke 43", Billet Diameter 14.05"; with Hydraulic Unit, with (3) 250 hp Motors; Hydraulic Butt Shear; Control Console; Benshaw Solid State Motor Drives; and Granco-Clark Hydraulic Extrusion Puller, S/N 9736 (1) Custom Fabricated 24" x 200' Cooling Conveyor; with (5) 75 hp Blower Units (1) Custom Fabricated 25' x 200' Walking Beam Cooling Bed (1) Youngstown Foundry Machine Approximately 70-Ton Horizontal Stretcher; 84" Stroke (1) Custom Fabricated 30" x 200' Saw Feed Roller Conveyor (1) Oliver Model 2023-SP 24" Upacting Cut-Off Saw, S/N 206821; with Power Clamping; Exit Conveyor; and Dust Collector (4) Thermika 61-kW Die PreHeat Ovens (2) Thermika 46-kW Die PreHeat Ovens	UNKNOWN	APPRAISED VALUE	\$250,000
50.62	1	Bender, Roll, 2015, Kaast, PHBH-50, 220823	UNKNOWN	APPRAISED VALUE	\$4,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.63	1	Extrusion Line, 2,750-Ton, Sutton, No. 2, To Include: (1) Belco Incline Billet Feeder (1) Belco 3-Zone Natural Gas Billet Heater, S/N 51192-14, (2014); 4,500,000 Btu, Recirculating Heat Chamber; with Billet Transfer System (1) Sutton 2,750-Ton 4-Post Horizontal Hydraulic Extrusion Press, Asset #161, (1969); (2015 Complete Press Rebuild), Maximum Extrusion Speed 40.8 ipm, Container Length 34.5", Die Stack Thickness 17", Container Bore 9.375", Maximum Stroke 34.5", Billet Diameter 9"; with Hydraulic Unit, with (3) 200 hp Motors; Hydraulic Overhead Butt Shear; Benshaw Solid State Motor Controls; Kelly Control Console; and Allen-Bradley PLC Control (1) 12'L Water Cooling Through; with Overhead Spray (1) 150' x 16' Kevlar Conveyor Belt Runout Table and Transfer (1) Zhongwang 50-Ton Straightener, (2015) (1) 150' Nomex Belt Transfer Conveyor (1) Zhongwang 26" Automatic Cold Cut-Off Saw, (2015) (1) Belco 3-Zone Natural Gas Aging Oven; 60' x 96" x 96"; with Belco Oven Control; (New In Crate) (1) Updated Control Panel; with (2) Allen-Bradley Model PanelView Touch Screen Monitors (1) Manufacturer Unknown 50-Ton Stretcher, 25 hp; Stroke 72", Hydraulic Motor (3) Thermika 33-kW Die Preheat Ovens (3) Thermika 44-kW Die Preheat Ovens	UNKNOWN	APPRAISED VALUE	\$500,000
50.64	1	Extrusion Line, 2,200-Ton, Sutton, No. 3, To Include: (1) Custom Fabricated Billet Loading Station; with Hydraulic Dumper (1) Granco Model 69-30-4 SST Natural Gas Fired Rotary Jet Log Heat Furnace, S/N 3335-74; 30'L, Maximum 1,000°F Temperature, 7,320,000 Btus/Hour; with Kelly Control Systems; and Billet Transfer System (1) Sutton 2,200-Ton 4-Post Horizontal Hydraulic Extrusion Press, (1975); Maximum Extrusion Speed 58 ipm, Container Length 33", Die Stack Thickness 15", Container Bore 7.375", Maximum Stroke 72", Billet Diameter 7.08"; with Hydraulic Unit, with (3) 200 hp Motors; Hydraulic Butt Shear; Kelly Control Console; Allen-Bradley PLC Control; and Benshaw Solid State Motor Drives (1) Manufacturer Unknown 24" x 150' Chain Conveyor; with (6) Fans (1) Custom Fabricated 20' x 150' Walking Beam Cooling Bed; with (15) Fans (1) Sutton Approximately 25-Ton Hydraulic Stretcher, 25 hp; 72" Stroke, Motor (1) Oliver Model 2094 20" Automatic Cut-Off Saw, S/N 207364; Power Clamping; with Feed and Exit Conveyor; and Dust Collector (1) Granco-Clark Electric Die Preheat Oven, S/N 11021-92, (1992); 48" x 36" x 24", Maximum 1,000° Temperature, 36 kW (1) Manufacturer Unknown Electric Die Preheat Oven; 48" x 36" x 24", Maximum 1,000° Temperature, 36 kW (6) Thermika 33-kW Die PreHeat Ovens, (2014)	UNKNOWN	APPRAISED VALUE	\$400,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.65	1	Washer, Parts, Dip Type Die, 2014, DieKlean 360-2-1, Die Cleaning Systems, 1013	UNKNOWN	APPRAISED VALUE	\$15,000
50.66	1	Furnace, Nitriding, 1995, Can-Eng, 95216	UNKNOWN	APPRAISED VALUE	\$45,000
50.67	1	Grinder, Rotary Surface, 1941, 20", Blanchard, No. 11, 12"D Grinding Wheel, Chuck Speed 15-64 rpm, 3197	UNKNOWN	APPRAISED VALUE	\$4,000
50.68	1	Milling Machine, Vertical, Victor, 380V, 4350	UNKNOWN	APPRAISED VALUE	\$2,500
50.69	1	Polisher, Die, 2000, Extrude Hone, Spectrum 12/8, 991094	UNKNOWN	APPRAISED VALUE	\$3,500
50.70	1	Hone, Vertical, 1999, 12" to 8", Extrude Hone, Spectrum 12/8, Palm Actuator, Up to 1,300 psi; with 20 hp Hydraulic Power Unit; and Roller Ball Table, P99-1094	UNKNOWN	APPRAISED VALUE	\$9,500
50.71	1	Blast Cabinet, Guyson, GWB702T, 78"W x Approximately 72"D, Dual 10 hp Motors; with Cleaning Cabinet Model GWB700L, S/N WB28504; Model C2401W Dust Collector, S/N D28504; Shot Elevator; and Cyclone Separator, WB28504	UNKNOWN	APPRAISED VALUE	\$12,500
50.72	1	Water Treatment System, Anodizing, To Include: (1) Sperry Model Size 48 Type CRN-NW Filter Press, S/N X50262; 100 psi Maximum Pressure; with AHDP Power Unit (1) Aqualogic Clarifier; with Sludge Withdrawal Trolley, 10' x 40' x 8'H (1) Aqualogic System Control Panel (3) 10,000-Gallon Poly Tanks, (TK-1 TK-2, TK-3) Etch Caustic, Acid Equalization (1) Pretreatment Tank, TK-4 (1) Neutralization Tank, TK-5 (1) Flocculation Tank, TK-6 (1) 300-Gallon Flocculant Mixing Tank, 2-Sided, 600 Gallon Total (1) 800-Gallon Calcium Chloride Tank (1) Calcium Chloride Prep Tank (-) Associated Pumps; Pipes; Valves; etc. (1) Sodium Hydroxide Steel Tank; 5,000 Gallon (1) Sulfuric Acid Steel Tank; 5,000 Gallon (1) Spanco 1-Ton Boom; with Budgit 2-Ton Electric Chain Hoist (1) Monorail; with Budgit 1-Ton Electric Chain Hoist	UNKNOWN	APPRAISED VALUE	\$25,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.73	1	Anodizing Line, 54-Station, Mabco, To Include: (2) Dynapower Model SD42-02400153-FKLX-6M9X 15,000-Amp Rectifiers, S/N 930321; and S/N 930320, (1993) (1) Dynapower Model FD41-02500802-GLXX-M9XX 8,000-Amp Rectifier, S/N 930373, (1993) (2) Carrier 30-Ton Model 30HR100D600 Chillers, S/N X-635720; and S/N C-748848; Each with (4) Compressor Units (2) Carrier Model 30HR110-E610 Chillers, S/N 2993J06426; and S/N 4093J006686 (1) Eco-Tec Model AP30-36 Acid Purification Unit, S/N 2253, (1993) (2) Continental Model 51356-01-02 Penfield Water Systems, S/N 931C052; and S/N Unknown; with Deionized Water Treatment Unit (1) Belding Model C-CFV-10-9166 9,166-Gallon Deionized Water Tank, S/N 18203, (1994) (1) 8'H x 12'W x 6'6"D Pump Tank; with (2) 40 hp Pumps (3) Alfa Laval Heat Exchangers; Each with 15 hp Pumps (4) Walgreen 2-Ton Bridge Cranes; Each with Cable Hoist Lift/Transfer, with Model MB50 Trolley System Control (1) Hoffman 50 hp Blower (1) Hoffman 125 hp Blower (2) Tri-Mer Model F/S-12 Scrubbers, S/N 3082; and S/N Unknown; Each with 540CCW-BH Blower, 40 hp; 38,000 cfm (2) Cleaver Brooks Model CB200-150 Gas Oil Fired Packaged Boilers, S/N L-92660; and S/N L-92659, (1993); 45 gph Oil, 6,277,000 Btus/Hour Gas (23) Assorted Tanks (-) Staging Racks	UNKNOWN	APPRAISED VALUE	\$150,000
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## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.74	1	Extrusion Line, 2,719-Ton, Sutton, No. 4, To Include: (1) Custom Fabricated Billet Loading Station (1) Granco-Clark Model 69-30-3 Hot Jet Billet Heating Furnace, S/N 10355-89, (1989); 6,900 Lbs./Hour @ 9"D Billet, 30'L, Maximum 1,100° Temperature, Pusher Type; with Kelly Control Console; and Billet Transfer System (1) SMS Sutton Incorporated 2,719-Ton 4-Post Horizontal Hydraulic Extrusion Press, (1989); Maximum Extrusion Speed 78 ipm, Container Length 41", Die Stack Thickness 17", Container Bore 9.375", Maximum Stroke 86", Billet Diameter 9"; with Hydraulic Unit, with (3) 250 hp Motors; Hydraulic Butt Shear; Kelly Control Console; Allen-Bradley PLC Control; Benshaw Solid State Motor Drives; In-Ground Trim Removal Conveyor; and Rail Mounted Extrusion Puller (1) Manufacturer Unknown 20' Water Through (1) Custom Fabricated 24" x 180' Roller Conveyor; with (5) 75 hp Blowers (1) Custom Fabricated 30' x 180' Walking Beam Cooling Bed (1) Granco-Clark 50-Ton Power Head Stretcher, S/N 10354-89, (1989); 72" Stroke, 25 hp Motor (1) Granco Clark 24" Automatic Cold Saw; with Feed and Exit Conveyor; Stock Stop; and Dust Collector (5) Castool Model C100 Electric Die Heating Ovens (1) Matthews Model Jet-A-Mark R44 Ink Jet Marking System, Asset #2068; with Roller Conveyor (1) Belco 3-Zone Natural Gas Aging Oven; 60' x 96" x 96"; with Belco Oven Control, S/N 15849-88 (1) Kelly Operator Control Panel; with Allen-Bradley Model PanelView 1000e Display	UNKNOWN	APPRAISED VALUE	\$450,000
50.75	1	Extrusion Line, 3,300-Ton, BLH, To Include: (1) BLH 3,300-Ton Hydraulic Extrusion Press, (1967); 7" Ram and Container; (2014 Press Rebuilt; Platen Replaced) (1) OMAV Billet Loader Station, S/N 017-14, (2014) (1) OMAV 5-Zone Natural Gas Billet Furnace, (2014); Temperature Rise to 960° (1) Overhead Hydraulic Charging Station (1) Granco Clark High Pressure Spray Box (1) 2-Head Hand Off Puller; 36" Hot Saw (1) 150' x 16' Kevlar Conveyor Belt Transfer (1) 100-Ton Hydraulic Straightener (1) 150' x 8' Nomex Collector Belt (1) 36" Automatic Cold Cut-Off Saw; 60' Maximum Cut Length (1) 4-Zone Natural Gas Fired Pass Through Aging Oven; 2,500,000 Btu, 60' x 70" x 96" (2) Thermaka 78.5-kW Die PreHeat Ovens, (2014) (1) Thermaka 39-kW Die PreHeat Oven, (2014) (1) Belco Oven Control, S/N 51185-14, (2014); with Allen-Bradley Model PanelView Plus 1250 Touch Screen Control Panel (1) Operator Control Panel	UNKNOWN	APPRAISED VALUE	\$300,000
50.76	1	Assembly Machine, Scaffolding, with (12) Horizontal Opposed High Speed Drilling Spindles, with Independent Drives; 8-Roll Seating Section; and 90' Assorted Conveyor	UNKNOWN	APPRAISED VALUE	\$4,000



## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.77	1	Crane, Bridge, Underslung, 5-Ton x Approximately 50' Span, Reading Crane, Single Beam; with Model Spacemaster Bottom Riding Cable Hoist; and Wireless Operator Control, 16380	UNKNOWN	APPRAISED VALUE	\$5,000
50.78	1	Crane, Monorail, 5-Ton x Approximately 50' Rail, with PH Hoist, S/N T-67360, Pendant Controlled, Free Standing	UNKNOWN	APPRAISED VALUE	\$3,000
50.79	1	Crane, Bridge, Double Girder, 20-Ton x Approximately 50' Span, Konecranes, with (2) P H 10-Ton Hoists, S/N 603260-S2, and S/N 603260-S1, Pendant Controlled, 1551-00296	UNKNOWN	APPRAISED VALUE	\$15,000
50.80	1	Crane, Bridge, Single Girder, 1995, 10-Ton x 40' Span, Philadelphia Tramrail, Underslung; with PH 10-Ton Hoist, S/N T-10772, Pendant Controlled, 95A-2319-01	UNKNOWN	APPRAISED VALUE	\$5,000
50.81	1	Crane, Bridge, Single Girder, 3-Ton x 15' Span, P&H, Underslung; with PH 3-Ton Hoist, S/N TP-10881, Pendant Controlled, T-26377	UNKNOWN	APPRAISED VALUE	\$2,000
50.82	1	Crane, Bridge, Single Girder, 3-Ton x 15' Span, P&H, Underslung; with PH 3-Ton Hoist, S/N T-26304, Pendant Controlled, T-26304	UNKNOWN	APPRAISED VALUE	\$2,500
50.83	1	Crane, Bridge, Single Girder, 3-Ton x 30' Span, P&H, Underslung; with PH 3-Ton Hoist, S/N T-39427, Pendant Controlled, T-39427	UNKNOWN	APPRAISED VALUE	\$3,000
50.84	1	Crane, Bridge, Single Girder, 5-Ton x 50' Span, Abell-Howe, Underslung; with PH 5-Ton Hoist, S/N T-66401, Pendant Controlled	UNKNOWN	APPRAISED VALUE	\$4,500
50.85	1	Crane, Bridge, Single Girder, 1999, 5-Ton x 50' Span, Philadelphia Tramrail, Underslung; with PH 5-Ton Hoist, S/N T-24643, Pendant Controlled, 99A-2027	UNKNOWN	APPRAISED VALUE	\$4,500
50.86	1	Crane, Bridge, Single Girder, 1999, 5-Ton x 50' Span, Abell-Howe, Underslung; with PH 5-Ton Hoist, S/N T-24642, Pendant Controlled	UNKNOWN	APPRAISED VALUE	\$4,500
50.87	1	Crane, Bridge, Double Girder, 1994, 5-Ton x 60' Span, Philadelphia Tramrail, Underslung; with PH 5-Ton Hoist, S/N TP-10404, Pendant Controlled, 94A-2231-21	UNKNOWN	APPRAISED VALUE	\$5,000
50.88	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, Acco-Wright, Underslung; with PH 5-Ton Hoist, S/N T-27663, Pendant Controlled	UNKNOWN	APPRAISED VALUE	\$7,000
50.89	1	Crane, Bridge, Double Girder, 1995, 5-Ton x 60' Span, Philadelphia Tramrail, Underslung; with PH 5-Ton Hoist, S/N T-27666, Pendant Controlled, 95A-2279	UNKNOWN	APPRAISED VALUE	\$5,000
50.90	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, Acco-Wright, Underslung; with PH 5-Ton Hoist, S/N T-27667, Pendant Controlled	UNKNOWN	APPRAISED VALUE	\$5,000
50.91	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, P&H, Top Running; with PH 5-Ton Hoist, S/N TP-11798-2, Pendant Controlled, CB33981-G	UNKNOWN	APPRAISED VALUE	\$5,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.92	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, P&H, Top Running; with PH 5-Ton Hoist, S/N TP-11798-3, Pendant Controlled, CB33980-G	UNKNOWN	APPRAISED VALUE	\$5,000
50.93	1	Crane, Bridge, Double Girder, 10-Ton x 60' Span, P&H, Dual Hoist, Top Running; with PH 5-Ton Hoist, S/N TP-11798-1, Pendant Controlled, CB33979-G	UNKNOWN	APPRAISED VALUE	\$6,000
50.94	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, P&H, Top Running; with PH 5-Ton Hoist, S/N CH-23063, Pendant Controlled, CH-23063	UNKNOWN	APPRAISED VALUE	\$5,000
50.95	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, P&H, Top Running; with PH 5-Ton Hoist, S/N CH-23065, Pendant Controlled, CH-23065	UNKNOWN	APPRAISED VALUE	\$5,000
50.96	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, P&H, Top Running; with PH 5-Ton Hoist, S/N CH-23064, Pendant Controlled, CH-23064	UNKNOWN	APPRAISED VALUE	\$5,000
50.97	1	Crane, Bridge, Double Girder, 1999, 5-Ton x 60' Span, Philadelphia Tramrail, Top Running; with Morris/PH 5-Ton Hoist, S/N T-11873, Pendant Controlled, 99A-2055-21	UNKNOWN	APPRAISED VALUE	\$5,000
50.98	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, Demag, Top Running; with Philadelphia Tramrail 5-Ton Hoist, S/N TP-11229, Pendant Controlled, 96A-2467	UNKNOWN	APPRAISED VALUE	\$5,000
50.99	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, Demag, Top Running; with Philadelphia Tramrail 5-Ton Hoist, S/N T-68407, Pendant Controlled, 95A-2289	UNKNOWN	APPRAISED VALUE	\$5,000
50.100	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, Demag, Top Running; with Demag 5-Ton Hoist, S/N 74202, Pendant Controlled, 74202	UNKNOWN	APPRAISED VALUE	\$5,000
50.101	1	Crane, Bridge, Double Girder, 1981, 3-Ton x 60' Span, Philadelphia Tramrail, Top Running; with PH 3-Ton Hoist, S/N T-61809, Pendant Controlled, 81A-2729-21	UNKNOWN	APPRAISED VALUE	\$5,000
50.102	1	Crane, Bridge, Double Girder, 1981, 3-Ton x 60' Span, Philadelphia Tramrail, Top Running; with PH 3-Ton Hoist, S/N T-61810, Pendant Controlled, 81A-2729-22	UNKNOWN	APPRAISED VALUE	\$4,000
50.103	1	Crane, Bridge, Single Girder, 3-Ton x 60' Span, Atlantic Crane, Top Running; with PH 3-Ton Hoist, S/N T-68293, Pendant Controlled, 93486-3	UNKNOWN	APPRAISED VALUE	\$4,000
50.104	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, Atlantic Crane, Top Running; with PH 5-Ton Hoist, S/N T-68294, Pendant Controlled, 93486-1	UNKNOWN	APPRAISED VALUE	\$5,000
50.105	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, Atlantic Crane, Top Running; with PH 5-Ton Hoist, S/N T-68295, Pendant Controlled, 93C648-2	UNKNOWN	APPRAISED VALUE	\$5,000
50.106	1	Crane, Bridge, Double Girder, 1988, 5-Ton x 60' Span, Philadelphia Tramrail, Top Running; with PH 5-Ton Hoist, S/N T-66324, Pendant Controlled, 88A-2534-21	UNKNOWN	APPRAISED VALUE	\$5,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.107	1	Crane, Bridge, Double Girder, 1988, 5-Ton x 60' Span, Philadelphia Tramrail, Top Running; with PH 5-Ton Hoist, S/N T-66325, Pendant Controlled, 88A-2534-22	UNKNOWN	APPRAISED VALUE	\$5,000
50.108	1	Crane, Bridge, Double Girder, 1988, 5-Ton x 60' Span, Philadelphia Tramrail, Top Running; with PH 5-Ton Hoist, S/N T-66326, Pendant Controlled, 88A-2534-23	UNKNOWN	APPRAISED VALUE	\$5,000
50.109	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, P&H, Top Running; with PH 5-Ton Hoist, S/N CB-26656, Pendant Controlled, CB-26658	UNKNOWN	APPRAISED VALUE	\$5,000
50.110	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, P&H, Top Running; with PH 5-Ton Hoist, S/N CB-26657, Pendant Controlled, CB-26657	UNKNOWN	APPRAISED VALUE	\$5,000
50.111	1	Crane, Bridge, Double Girder, 5-Ton x 60' Span, P&H, Top Running; with PH 5-Ton Hoist, S/N CB-26658, Pendant Controlled, CB-26656	UNKNOWN	APPRAISED VALUE	\$5,000
50.112	1	Crane, Bridge, Double Girder, 1995, 7-1/2-Ton x 60' Span, Philadelphia Tramrail, Top Running; with PH 7-1/2 Ton Hoist, S/N TP-10756-1, Pendant Controlled, 95A-2307-22	UNKNOWN	APPRAISED VALUE	\$9,000
50.113	1	Crane, Bridge, Double Box, 1995, 25-Ton x 60' Span, Philadelphia Tramrail, Dual Hoist, Top Running; with PH 7-1/2 Ton Main Hoist, S/N 63 301058, Pendant Controlled, 95A-2307-21	UNKNOWN	APPRAISED VALUE	\$20,000
50.114	1	Crane, Bridge, Double Girder, 1995, 7-1/2-Ton x 20' Span, Philadelphia Tramrail, Top Running; with PH 5-Ton Hoist, S/N TP-10857, Pendant Controlled, 95A-2360-01	UNKNOWN	APPRAISED VALUE	\$5,000
50.115	1	Crane, Bridge, Double Girder, 1995, 7-1/2-Ton x 60' Span, Philadelphia Tramrail, Top Running; with PH 7-1/2 Ton Hoist, S/N TP-10756-2, Pendant Controlled, 95A-2307-23	UNKNOWN	APPRAISED VALUE	\$9,000
50.116	1	Crane, Bridge, Double Girder, 1995, 7-1/2-Ton x 60' Span, Philadelphia Tramrail, Top Running; with PH 7-1/2 Ton Hoist, S/N TP-10757-1, Pendant Controlled, 95A-2307-25	UNKNOWN	APPRAISED VALUE	\$9,000
50.117	1	Crane, Bridge, Double Girder, 1995, 7-1/2-Ton x 60' Span, Philadelphia Tramrail, Top Running; with PH 7-1/2 Ton Hoist, S/N TP-10757-2, Pendant Controlled, 95A-2307-24	UNKNOWN	APPRAISED VALUE	\$9,000
50.118	1	Crane, Bridge, Double Girder, 15-Ton x 60' Span, Shepard Niles, Top Running; with (2) Shepard Niles 10-Ton Hoists, S/N 69447 AH, and S/N 69447 MH, Pendant Controlled, 69447	UNKNOWN	APPRAISED VALUE	\$12,500
50.119	1	Crane, Monorail, 1989, 7-1/2-Ton x 60' Span, Philadelphia Tramrail, Top Running; with (2) PH 7-1/2 Ton Hoists, S/N 338014, and S/N 338015, Pendant Controlled, 89A2716-21	UNKNOWN	APPRAISED VALUE	\$6,000
50.120	1	Dust Collector, Bag House, 2001, 85,000-cfm, Industrial Ventilation, 15 x 42	UNKNOWN	APPRAISED VALUE	\$150,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.121	1	Furnace, Melt, Tipping, 70,000-Lb., Chongqing Thermaltech M&E, (#1) (Less Than 5 Years)	UNKNOWN	APPRAISED VALUE	\$20,000
50.122	1	Furnace, Melt, Tipping, 70,000-Lb., Chongqing Thermaltech M&E, (#2) (Less Than 5 Years)	UNKNOWN	APPRAISED VALUE	\$20,000
50.123	1	Furnace, Melt, Tipping, 70,000-Lb., Chongqing Thermaltech M&E, (#3) (Less Than 5 Years)	UNKNOWN	APPRAISED VALUE	\$20,000
50.124	1	Furnace, Melt, Tipping, 70,000-Lb., Chongqing Thermaltech M&E, (#4) (Less Than 5 Years)	UNKNOWN	APPRAISED VALUE	\$100,000
50.125	1	Transfer Car, Feed, Zhongwang	UNKNOWN	APPRAISED VALUE	\$10,000
50.126	1	Degassing Unit, SNIF, 2014, Pyrotek	UNKNOWN	APPRAISED VALUE	\$30,000
50.127	1	Lift Attachment, Vertical Ingot Lifter, 2015, 20,000-Lb., Bradley, S326-03-20	UNKNOWN	APPRAISED VALUE	\$5,000
50.128	1	Cooling Water System, Process, 2014, BAC, S3E 1222-07Q/H, Double System; with (2) 4-Unit Banks of Cooling Towers; and (3) Heavy Duty Circulation Pumps	UNKNOWN	APPRAISED VALUE	\$25,000
50.129	1	Furnace, Homogenizing, 70,000-Lb., Chongqing Thermaltech M&E, (#1)	UNKNOWN	APPRAISED VALUE	\$20,000
50.130	1	Furnace, Homogenizing, 70,000-Lb., Chongqing Thermaltech M&E, (#2) (Less Than 5 Years)	UNKNOWN	APPRAISED VALUE	\$20,000
50.131	1	Furnace, Homogenizing, 70,000-Lb., Chongqing Thermaltech M&E, (#3)	UNKNOWN	APPRAISED VALUE	\$20,000
50.132	1	Furnace, Homogenizing, 70,000-Lb., Chongqing Thermaltech M&E, (#4)	UNKNOWN	APPRAISED VALUE	\$20,000
50.133	1	Cooler Unit, 2014, 70,000-Lb., Chongqing Thermaltech M&E, (#1)	UNKNOWN	APPRAISED VALUE	\$15,000
50.134	1	Cooler Unit, 2014, 70,000-Lb., Chongqing Thermaltech M&E, (#2)	UNKNOWN	APPRAISED VALUE	\$15,000
50.135	1	Saw, Vertical Metal Cutting Band, 1969, 16", DoAll, 1612-H, 24" x 30" Table Size, 50-5,000 Blade Speeds; with DoAll Model DBW-1B Blade Welder, 288-69106	UNKNOWN	APPRAISED VALUE	\$800
50.136	1	Rail Type Oven Handling Shuttle, Zhongwang	UNKNOWN	APPRAISED VALUE	\$25,000
50.137	1	Air Dryer, Refrigerated, 2018, Atlas Copco, FX32, R40A Refrigerant, ITJ150220	UNKNOWN	APPRAISED VALUE	\$3,000
50.138	1	Air Compressor, Rotary Screw, 2018, Atlas Copco, G160-125, 5,223 Metered Hours Reported, WUX414172	UNKNOWN	APPRAISED VALUE	\$16,000
50.139	1	Air Compressor, Rotary Screw, 2014, Atlas Copco, GA160, 40,571 Metered Hours Reported, APF191634	UNKNOWN	APPRAISED VALUE	\$11,000
50.140	1	Air Compressor, Rotary Screw, 2014, Atlas Copco, GA160VSD, 36,235 Metered Hours Reported, APF193908	UNKNOWN	APPRAISED VALUE	\$11,000
50.141	1	Air Dryer, Refrigerated, Zeks, 100HSHA100 HeatSink, 547801	UNKNOWN	APPRAISED VALUE	\$1,500
50.142	1	Air Compressor, Rotary Screw, 2013, Atlas Copco, GA18P-A-125FW, YDX565564	UNKNOWN	APPRAISED VALUE	\$4,500

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.143	1	Air Compressor, Rotary Screw, 2013, Atlas Copco, GA18P-A-125FW, YUX585575	UNKNOWN	APPRAISED VALUE	\$4,500
50.144	1	Air Dryer, Refrigerated, 2019, MacAir, HX150A, 05-17-2119ST	UNKNOWN	APPRAISED VALUE	\$2,500
50.145	1	Generator, Diesel, Fast Response, Kohler, Power System 35RZ72, with Ford Model CSG-6491-6005-F Diesel Engine, S/N 19331 S-17-RC, 37240	UNKNOWN	APPRAISED VALUE	\$5,000
50.146	1	Air Compressor, Rotary Screw, Packaged, 100-psi, LeRoi, WM60SSIIAH, (Dedicated To Paint Line), 4467X28	UNKNOWN	APPRAISED VALUE	\$3,000
50.147	1	Generator, Diesel, Fast Response, Kohler, Power System 50, with Ford Model LSG-8751-6005-A Diesel Engine, S/N 24275 T-26-RK	UNKNOWN	APPRAISED VALUE	\$5,000
50.148	1	Microscope, Olympus, BX60M, 5x, 10x, 20x and 50x Lenses; with Halogen Lake Source; Sony Power Head Model DXC-970MD 3CCD Color Video Camera, S/N 101141; Sony Model UD-T1500CN Mavigraph Digital Color Printer; and Pentium Personal Computer	UNKNOWN	APPRAISED VALUE	\$2,500
50.149	1	Optical Comparator, Bench Top, 14", Starrett, Sigma HE400, with Model Quadra-Chek 2000 2-Axis Digital Readout, 60022716	UNKNOWN	APPRAISED VALUE	\$3,000
50.150	1	Tensile Tester, Satec, Vertex 30HVL UTM, with Control Panel; and Pentium Base Personal Computer, 1018	UNKNOWN	APPRAISED VALUE	\$3,500
50.151	1	Tensile Tester, Satec, 60HVL UTM, with Model A2000 Recorder; Model Mark III Smart Digital Indicator; and Pentium Base PC Controls, 1472	UNKNOWN	APPRAISED VALUE	\$4,000
50.152	1	Cutter, Precision Specimens, Tensilkut, 12328, with Porter-Cable Model 75192 1-1/2 hp Production Router, 429793	UNKNOWN	APPRAISED VALUE	\$300
50.153	1	Saw, Vertical Metal Cutting Band, 1951, 20", DoAll, Zephyr, 32" x 42" Table; with DoAll Model DBW-5 Welder, S/N 513917, 32-51227	UNKNOWN	APPRAISED VALUE	\$800
50.154	1	Loader, Wheel, 2015, 13,600-kg, Volvo, L60H, 1,707 Metered Hours Reported, EROPS, Articulated Frame, Volvo D6J 164 hp Diesel Engine; with Craig G Grapple Bucket, VCE0L60HE0S621061	UNKNOWN	APPRAISED VALUE	\$85,000
50.155	1	Lift Truck, Diesel, 2014, 8,950-Lb., Yale, GDP110VXNKHV099, 2-Stage Mast; with Fork Rotator Attachment, J813V02657M	UNKNOWN	APPRAISED VALUE	\$9,000
50.156	1	Lift Truck, Diesel, 2008, 15,500-Lb., Hyster, 155 Fortis, 10,864 Hours Previously Indicated, 2-Stage Mast, Shortened Forks; (No Tag), J006V01824F	UNKNOWN	APPRAISED VALUE	\$20,000
50.157	1	Aerial Lift, Mobile Boom Type, 500-Lb., JLG, 600AJ, 4,466 Metered Hours Reported, 67 hp Diesel Engine, 500 Lb. Maximum Load Capacity, 60' Maximum Lift; with Platform, 300128496	UNKNOWN	APPRAISED VALUE	\$17,500
50.158	1	Loader, Wheel, Caterpillar, 914G2, CAT0914GTNP00459	UNKNOWN	APPRAISED VALUE	\$25,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.159	1	Scissor Lift, Electric, 2005, 26', JLG, 2646ES, 167 Hours Reported, 200137817	UNKNOWN	APPRAISED VALUE	\$3,500
50.160	1	Lift Truck, Diesel, 2014, 15,400-Lb, Yale, GDP155VXNJBV108, 12,000 Hours Reported, E878V01845M	UNKNOWN	APPRAISED VALUE	\$12,000
50.161	1	Lift Truck, Diesel, 2006, 5,800-Lb., Yale, GDP060VEYSF087, 9,282 Hours Indicated, B875B04565D	UNKNOWN	APPRAISED VALUE	\$6,000
50.162	1	Side Loader, 2013, 15,000-Lb., Baumann, GX70/14/40 ST, 3,384 Metered Hours Reported, Enclosed Cab, 13' Maximum Lift Height, Perkins 90 hp Diesel Engine, Average Tires, 8404	UNKNOWN	APPRAISED VALUE	\$18,000
50.163	1	Lift Truck, LP Gas, 5,000-Lb., Mitsubishi, FGC25, 189" Maximum Lift, 3-Stage Mast, Cushion Tire, Overhead Guard, Rotary Forks; with Side Shift, F-539155	UNKNOWN	APPRAISED VALUE	\$3,500
50.164	1	Lift Truck, LP Gas, 2013, 5,700-Lb., Yale, GLP060VXNVRE087, 3-Stage Mast, B875V13502L	UNKNOWN	APPRAISED VALUE	\$6,000
50.165	1	Loader, Skid Steer, John Deere, 328D, 2,747 Hours Reported, 1T0328DAAA0192860	UNKNOWN	APPRAISED VALUE	\$20,000
50.166	1	Floor Sweeper, LP Gas, Ride On, 2011, Tennant, M20, Self-Dumping Hopper, 40" Cleaning Path, M20-3722	UNKNOWN	APPRAISED VALUE	\$10,000
50.167	1	Floor Sweeper, Ride On, Advance, Exterra	UNKNOWN	APPRAISED VALUE	\$4,500
50.168	1	Floor Scrubber, Walk-Behind, 2014, Factory Cat, HammerHead 600SS, 1,214 Metered Hours Reported, 24 Volt Rechargeable Battery Powered, 26" Cleaning Path, 15 Gallon Solution Tank, 14090271	UNKNOWN	APPRAISED VALUE	\$3,500
50.169	1	Lift Truck, Diesel, 2001, 33,000-Lb., Yale, GDP360EBNPDV143, 18,272 Hours Indicated, 148" Lift Height, 60" Forks, Dual Front Wheels, Pneumatic Tire, B877E01501Y	UNKNOWN	APPRAISED VALUE	\$40,000
50.170	1	Lift Truck, LP Gas, 2013, 5,700-Lb., Yale, GLP060VXNVRE087, with Fork Rotator Attachment, B875V13500L	UNKNOWN	APPRAISED VALUE	\$6,000
50.171	1	Lift Truck, Diesel, 2013, 5,900-Lb., Yale, GDP060VXNXRE087, 3-Stage Mast; with Fork Rotator Attachment, B875V13507L	UNKNOWN	APPRAISED VALUE	\$5,000
50.172	1	Lift Truck, Diesel, 2014, 8,950-Lb., Yale, GDP110VXNKHV099, 2-Stage Mast; with Fork Rotator Attachment, J813V02659M	UNKNOWN	APPRAISED VALUE	\$9,000
50.173	1	Scissor Lift, Electric, 2005, 26', JLG, 2630ES, 977 Hours Reported, 200130058	UNKNOWN	APPRAISED VALUE	\$3,500
50.174	1	Lift Truck, LP Gas, 5,500-Lb., Caterpillar, 2P6000, 3-Stage Mast, AT13F31365	UNKNOWN	APPRAISED VALUE	\$10,000
50.175	1	Lift Truck, LP Gas, 5,500-Lb., Caterpillar, 2P6000, 4,969 Hours Indicated, 3-Stage Mast, AT13F30677	UNKNOWN	APPRAISED VALUE	\$10,000
50.176	1	Lift Truck, LP Gas, 2013, 5,700-Lb., Yale, GLP060VXNVRE087, 3-Stage Mast, B875V13501L	UNKNOWN	APPRAISED VALUE	\$4,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.

Case Number 21-16520

### SCHEDULE A&B, PART 8, QUESTION #50

#### OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT

50.177	1	Lift Truck, LP Gas, 5,200-Lb., Nissan, MUG1F2A30LV, 9,997 Hours Indicated, 15.5' Maximum Lift Height, 3-Stage Mast, 48" Forks, Pneumatic Tire; with Side Shifter Attachment, UG1F2-9L0009	UNKNOWN	APPRAISED VALUE	\$3,500
50.178	1	Band Saw, Horizontal, Automatic, 1965, 20" x 16", DoAll, AC-2016, with Log Loading Rack; Power Feed; Power Clamping; Exit Conveyor; Exturgeon Billet Loading System, with Rack Transfer Conveyor; and Dust Collector, 235-65102	UNKNOWN	APPRAISED VALUE	\$10,000
50.179	1	Band Saw, Horizontal, Automatic, 1979, 20" x 16", DoAll, AC-2016, with Log Loading Rack; Power Feed; Power Clamping; Exit Conveyor; Manufacturer Unknown Billet Loading System, with Rack Transfer Conveyor; and Dust Collector, 235-79107	UNKNOWN	APPRAISED VALUE	\$15,000
50.180	1	Saw, Cold, CNC Log/Billet, 7" to 16" Diameter, KLI, Roll In Ladder Rack; with Outfeed Robotic Billet Pallet Stacking; and Secondary Log Outfeed Collection Station	UNKNOWN	APPRAISED VALUE	\$75,000
50.181	1	Scale, Platform, Electronic Integrated, Mettler Toledo, IND560, with Heavy Duty Frame Type Platform	UNKNOWN	APPRAISED VALUE	\$2,500
50.182	1	PLC CNC Saw Stacker Robot	UNKNOWN	APPRAISED VALUE	\$2,500
50.183	1	Welder Generator, Portable Gas, 2014, Lincoln Electric, Ranger 305 LPG, Trailer Mounted (Not In Service), U1140504368	UNKNOWN	APPRAISED VALUE	\$3,000
50.184	1	Welder, Arc, CV DC, 1975, 300-Amp, Miller, CP-300, HF839470	UNKNOWN	APPRAISED VALUE	\$500
50.185	1	Welder, Gas, Lincoln Electric, Ranger 305 LPG	UNKNOWN	APPRAISED VALUE	\$1,500
50.186	1	Welder, DC Multi-Process, 450-Amp, Lincoln Electric, FLEXTEC 450	UNKNOWN	APPRAISED VALUE	\$2,500
50.187	1	Welder, DC Multi-Process, 2014, 450-Amp, Lincoln Electric, FLEXTEC 450, U1140302550	UNKNOWN	APPRAISED VALUE	\$2,500
50.188	1	Welder, Mig, 2019, 250-Amp, Miller, Millermatic 252, Enclosed Wire Feeder, MK260235N	UNKNOWN	APPRAISED VALUE	\$2,000
50.189	1	Welder, Arc, 2014, 450-Amp, Miller, Dimension 452, ME030116C	UNKNOWN	APPRAISED VALUE	\$1,500
50.190	1	Welder, Tig, 2018, 300-Amp, Miller, Portable; Cart Mounted, Chiller Unit, Foot Pedal Controls, MJ400533L	UNKNOWN	APPRAISED VALUE	\$1,200
50.191	1	Welder, Mig, Lincoln Electric, with: Lincoln LN-25 Pro Welder Wire Feeder; Cart Mounted	UNKNOWN	APPRAISED VALUE	\$1,000

## EXHIBIT 50

Aluminum Shapes, L.L.C.  
Case Number 21-16520

**SCHEDULE A&B, PART 8, QUESTION #50**  
**OTHER MACHINERY, FIXTURES & EQUIPMENT, EXCLUDING FARM EQUIPMENT**

50.192	1	Lot of Shop and Factory Equipment Throughout Facility, To Include: Crane Lifting Attachments; Welders; Welders (Not In Service); Plasma Cutter; Shop Presses; Shop Grinders; Workbenches; Foreman's Desks; Machine Accessories; Press Brake Dies; Chains; Slings; Bench Vises; Electric and Pneumatic Tools; Supply Cabinets, Shop Offices; Billet Totes; Wire Baskets; Milwaukee Magnetic Base Drill Press; Reid Tri-Stand; Heavy Duty Steel Welding Tables; Jobox Gang Box; (2) Post Mounted Jib Cranes; Portable Torch Outfits; Line Burner; Lockers; Ladders; Conduit Bender; etc.	UNKNOWN	APPRAISED VALUE	\$70,000
50.193	1	Truck, Yard, 2009, Kalmar, 4X2, 16,240 Hours Reported, 51,999 Miles Reported, 4x2, 323405	UNKNOWN	APPRAISED VALUE	\$15,000
50.194	1	Truck, Flatbed, Single Axle, 2015, Freightliner, M2 106, 117122, 3ALACXDT0FDGN8983	UNKNOWN	APPRAISED VALUE	\$30,000



## Fill in this information to identify the case:

Debtor Aluminum Shapes, L.L.C.United States Bankruptcy Court for the: New JerseyCase number  
(if known) 21-16520☐ Check if this is an  
amended filing

## Official Form 206D

## Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

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

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

## Part 1: List All Creditors with Secured Claims

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

Column A

Column B

Amount of claim

Value of collateral that  
supports this claimDo not deduct the value of  
collateral.

2.1	<b>Creditor's name</b> A.C. SHULTES, INC  <b>Creditor's mailing address</b> ATTN: MICHAEL G. SCHULTES 664 S. EVERGREEN AVENUE WOODBURY HEIGHTS, NJ 08097  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$30,176.56	UNKNOWN
2.2	<b>Creditor's name</b> AJAX ICE INCORPORATED  <b>Creditor's mailing address</b> 350 W ELM STREET CONSHOHOCKEN, PA 19428  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> ICE MACHINE  <b>Describe the lien</b> EQUIPMENT LEASE  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$1,120.00	UNKNOWN

**Part 1: Additional Page**

		Column A Amount of claim <i>Do not deduct the value of collateral.</i>	Column B Value of collateral that supports this claim	
2.3	<b>Creditor's name</b> CANON FINANCIAL SERVICES, INC  <b>Creditor's mailing address</b> 14904 COLLECTIONS CENTER DRIVE CHICAGO, IL 60693-0149  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> COPIER  <b>Describe the lien</b> EQUIPMENT LEASE  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$303.47	UNKNOWN
2.4	<b>Creditor's name</b> COMBINED METAL INDUSTRIES INC.  <b>Creditor's mailing address</b> 505 GARYRAY DRIVE TORONTO, ON M9L 1P9 CANADA  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$320,780.87	UNKNOWN
2.5	<b>Creditor's name</b> DELAGE LANDEN FINANCIAL  <b>Creditor's mailing address</b> SERVICES INC. PHILADELPHIA, PA 19101-1602  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> COPIER  <b>Describe the lien</b> EQUIPMENT LEASE  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$533.37	UNKNOWN

## Part 1:

## Additional Page

			Column A Amount of claim <i>Do not deduct the value of collateral.</i>	Column B Value of collateral that supports this claim
2.6	<b>Creditor's name</b> DIRECT ENERGY BUSINESS MARKETING LLC  <b>Creditor's mailing address</b> 1001 LIBERTY AVENUE SUITE 1200 PITTSBURGH, PA 15222  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$834,252.47	UNKNOWN
2.7	<b>Creditor's name</b> EASTERN LIFT TRUCK CO.  <b>Creditor's mailing address</b> P.O. BOX 307 MAPLE SHADE, NJ 08052  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$73,122.61	UNKNOWN
2.8	<b>Creditor's name</b> EQUIPMENT DEPOT PENNSYLVANIA, INC.  <b>Creditor's mailing address</b> P.O. BOX 8500-7647 PHILADELPHIA, PA 19178-7647  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$17,830.86	UNKNOWN

**Part 1: Additional Page**

			Column A Amount of claim <i>Do not deduct the value of collateral.</i>	Column B Value of collateral that supports this claim
2.9	<b>Creditor's name</b> EULER HERMES NORTH AMERICA INS  <b>Creditor's mailing address</b> 800 RED BROOK BOULEVARD OWINGS MILLS, MD 21117  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$184,195.37	UNKNOWN
2.10	<b>Creditor's name</b> GENERAL CHEMICAL & SUPPLY  <b>Creditor's mailing address</b> 858 N LENOLA RD #1A MOORSETOWN, NJ 08057  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$2,948.83	UNKNOWN
2.11	<b>Creditor's name</b> HOLMAN FORD LINCOLN  <b>Creditor's mailing address</b> 571 WEST RT. 38 MAPLE SHADE, NJ 08052  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> FORD F350 - VIN: 1FT8W3B60HEE23387  <b>Describe the lien</b> LOAN  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$6,580.39	UNKNOWN

**Part 1: Additional Page**

			Column A Amount of claim <i>Do not deduct the value of collateral.</i>	Column B Value of collateral that supports this claim
2.12	<b>Creditor's name</b> HYG FINANCIAL SERVICES INC  <b>Creditor's mailing address</b> P.O. BOX 14545 DES MOINES, IA 50306-3545  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> FORKLIFTS  <b>Describe the lien</b> EQUIPMENT LEASE  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$10,771.34	UNKNOWN
2.13	<b>Creditor's name</b> IFM EFECTOR INC.  <b>Creditor's mailing address</b> 1100 N ATWATER DR MALVERN, PA 19355  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$4,302.15	UNKNOWN
2.14	<b>Creditor's name</b> LOCAL 837 HEALTH & WELFARE  <b>Creditor's mailing address</b> 12275 TOWNSEND ROAD PHILADELPHIA, PA 19154  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$2,470,122.86	UNKNOWN

**Part 1: Additional Page**

			Column A Amount of claim <i>Do not deduct the value of collateral.</i>	Column B Value of collateral that supports this claim
2.15	<b>Creditor's name</b> MARDINLY INDUSTRIAL POWER, LLC  <b>Creditor's mailing address</b> ATTN: ED BRADY 701 PARKWAY DR. BROOMALL, PA 19008  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$4,722.08	UNKNOWN
2.16	<b>Creditor's name</b> MARLIN BUSINESS BANK  <b>Creditor's mailing address</b> PO BOX 13604 PHILADELPHIA, PA 19101-3604  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> COPIER  <b>Describe the lien</b> EQUIPMENT LEASE  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$1,063.68	UNKNOWN
2.17	<b>Creditor's name</b> PYROTEK INC.  <b>Creditor's mailing address</b> 100 CLEARBROOK ROAD ELMSFORD, NY 10523-1116  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$76,593.88	UNKNOWN

**Part 1: Additional Page**

			Column A Amount of claim <i>Do not deduct the value of collateral.</i>	Column B Value of collateral that supports this claim
2.18	<b>Creditor's name</b> QUENCH INC.  <b>Creditor's mailing address</b> 3077 EAST 98TH STREET INDIANAPOLIS, IN 46280  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> WATER MACHINE  <b>Describe the lien</b> EQUIPMENT LEASE  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$815.70	UNKNOWN
2.19	<b>Creditor's name</b> TALEN ENERGY MARKETING, LLC  <b>Creditor's mailing address</b> PO BOX 825510 PHILADELPHIA, PA 19182-5510  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$1,711,955.03	UNKNOWN
2.20	<b>Creditor's name</b> TIGER FINANCE, LLC  <b>Creditor's mailing address</b> 99 PARK AVENUE SUITE 1930 NEW YORK, NY 10016  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> ALL ASSETS OF THE DEBTOR  <b>Describe the lien</b> CREDIT AGREEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$9,270,525.89	UNKNOWN

Part 1:

Additional Page

			Column A	Column B
			Amount of claim	Value of collateral that supports this claim
			Do not deduct the value of collateral.	
2.21	<b>Creditor's name</b> UGI ENERGY SERVICES, LLC  <b>Creditor's mailing address</b> P.O. BOX 827032 PHILADELPHIA, PA 19182  <b>Creditor's email address</b>  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>  <b>Do multiple creditors have an interest in the same property?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Describe debtor's property that is subject to a lien</b> REAL PROPERTY  <b>Describe the lien</b> JUDGEMENT  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$354,233.80	UNKNOWN
3.	<b>Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.</b>		\$15,376,951.21	



Part 2:

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

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

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

Name and Address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
COMBINED METAL INDUSTRIES INC. C/O HEITNER & BREITSTEIN ATTN: CARY R. STERNBACK 28 N MAIN ST 1429 MARLBORO, NJ 07746	Line 2.4	
DIRECT ENERGY BUSINESS MARKETING LLC C/O FISHKINLUCKS ATTN: STEVEN MILES LUCKS ONE RIVERFRONT PLAZA, SUITE 410 NEWARK, NJ 07102	Line 2.6	
DIRECT ENERGY BUSINESS MARKETING LLC C/O MCDOWELL HETHERINGTON LLP ATTN: KATE H. EASTERLING 1001 FANNIN STREET, SUITE 2700 HOUSTON, TX 77002	Line 2.6	
EASTERN LIFT TRUCK CO. C/O SALDUTTI LAW GROUP ATTN: ROBERT L. SALDUTTI 800 KINGS HWY N CHERRY HILL, NJ 08034	Line 2.7	
EQUIPMENT DEPOT PENNSYLVANIA, INC. C/O GREGORY SHIELDS LAW ATTN: GREGORY S. SHIELDS 107 CHESLEY DR STE 5 MEDIA, PA 19063	Line 2.8	
EULER HERMES NORTH AMERICA INS C/O HEITNER & BREITSTEIN ATTN: CARY R. STERNBACK 28 N MAIN ST 1429 MARLBORO, NJ 07746	Line 2.9	
GENERAL CHEMICAL & SUPPLY ATTN: DAVID MCDONOUGH 858 N. LENOLA RD, UNIT 1A MOORESTOWN, NJ 08057	Line 2.10	
IFM EFECTOR, INC. C/O HEITNER & BREITSTEIN ATTN: CARY R. STERNBACK 28 N MAIN ST 1429 MARLBORO, NJ 07746	Line 2.13	
PYROTEK INC. C/O LEWIS BRISBOIS BISGAARD & SMITH, LLP ATTN: JONATHAN M. PREZIOSI ONE RIVERFRONT PLAZA, SUITE 800 NEWARK, NJ 07102	Line 2.17	
TALEN ENERGY MARKETING, LLC C/O FITZPATRICK LENTZ & BUBBA, P.C. ATTN: JOSEPH S. D'AMICO, JR. 645 WEST HAMILTON STREET, SUITE 800 ALLENTOWN, NJ 18101	Line 2.19	

Part 2:

Additional Page

Name and Address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for ths entity
TIGER FINANCE, LLC C/O REIMER & BRAUNSTEIN LLP SEVEN TIMES SQUARE SUITE 2506 NEW YORK, NY 10036	Line 2.20	
UGI ENERGY SERVICES, LLC C/O DYER PETERSON ATTN: GREGORY EDWIN PETERSON 322 U.S. HIGHWAY 46, SUITE 220E PARSIPPANY, NJ 07054	Line 2.21	

## Fill in this information to identify the case:

Debtor Aluminum Shapes, L.L.C.United States Bankruptcy Court for the: New JerseyCase number 21-16520  
(if known)☐ Check if this is an  
amended filing

## Official Form 206E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

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

**Part 1:** List All Creditors with PRIORITY Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.  
☒ Yes. Go to line 2.

**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	<b>Priority creditor's name and mailing address</b> AARON GIBBS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$841.00	\$841.00
2.2	<b>Priority creditor's name and mailing address</b> AARON TURNER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,424.87	\$2,424.87
2.3	<b>Priority creditor's name and mailing address</b> ALI SOPAJ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>  <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,738.32	\$3,738.32

**Part 1: Additional Page**

		Total claim	Priority amount
2.4	<b>Priority creditor's name and mailing address</b> ANGEL L RODRIGUEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,435.60          \$3,435.60
2.5	<b>Priority creditor's name and mailing address</b> CAMERON COLSTON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$6,394.53          \$6,394.53
2.6	<b>Priority creditor's name and mailing address</b> CHARLES J BARTHOLOMAI ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,845.89          \$5,845.89
2.7	<b>Priority creditor's name and mailing address</b> CHERYL DRACH ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$7,600.01          \$7,600.01
2.8	<b>Priority creditor's name and mailing address</b> CHRISTOPHER GIFFORD ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,846.65          \$4,846.65

**Part 1: Additional Page**

		Total claim	Priority amount
2.9	<b>Priority creditor's name and mailing address</b> CHRISTOPHER S WAJDA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$7,076.71          \$7,076.71
2.10	<b>Priority creditor's name and mailing address</b> CIANEL PALMER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$8,365.88          \$8,365.88
2.11	<b>Priority creditor's name and mailing address</b> CRAIG SNYDER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$230.77          \$230.77
2.12	<b>Priority creditor's name and mailing address</b> DANEEJA HARRIS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,287.72          \$1,287.72
2.13	<b>Priority creditor's name and mailing address</b> DANIEL A LOPEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$738.36          \$738.36

**Part 1: Additional Page**

		Total claim	Priority amount
2.14	<b>Priority creditor's name and mailing address</b> DANIEL DEMARTINO ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$7,500.00          \$7,500.00
2.15	<b>Priority creditor's name and mailing address</b> DANIEL DUWA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,024.67          \$5,024.67
2.16	<b>Priority creditor's name and mailing address</b> DANIEL M RAMSEY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$8,883.98          \$8,883.98
2.17	<b>Priority creditor's name and mailing address</b> DARIUS TEREK LOCKHART ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,444.40          \$1,444.40
2.18	<b>Priority creditor's name and mailing address</b> DAVID H MERKH ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$916.00          \$916.00

**Part 1: Additional Page**

		Total claim	Priority amount
2.19	<b>Priority creditor's name and mailing address</b> DAVID J BENNER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,739.16          \$2,739.16
2.20	<b>Priority creditor's name and mailing address</b> DAVID J FREEMAN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$7,692.07          \$7,692.07
2.21	<b>Priority creditor's name and mailing address</b> DAVID J HAENN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$8,582.17          \$8,582.17
2.22	<b>Priority creditor's name and mailing address</b> DOUGLAS BATHAUER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$19,230.49          \$13,650.00
2.23	<b>Priority creditor's name and mailing address</b> DYRON JEROME ABRAHAM ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,702.17          \$1,702.17

**Part 1: Additional Page**

		Total claim	Priority amount
2.24	<b>Priority creditor's name and mailing address</b> EDGAR STEMPLE JR ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,634.65          \$3,634.65
2.25	<b>Priority creditor's name and mailing address</b> EDUARDO A OBREGON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$7,470.91          \$7,470.91
2.26	<b>Priority creditor's name and mailing address</b> EDUARDO G NARVAEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,685.36          \$1,685.36
2.27	<b>Priority creditor's name and mailing address</b> EDWARD F FRICKER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,232.44          \$5,232.44
2.28	<b>Priority creditor's name and mailing address</b> EDWIN MEDINA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,068.40          \$3,068.40



**Part 1: Additional Page**

		Total claim	Priority amount
2.29	<b>Priority creditor's name and mailing address</b> EDWIN TORRES ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,108.40          \$2,108.40
2.30	<b>Priority creditor's name and mailing address</b> ERIC JEROME REED ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,043.19          \$3,043.19
2.31	<b>Priority creditor's name and mailing address</b> ERICK M CASTANEDA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,517.20          \$3,517.20
2.32	<b>Priority creditor's name and mailing address</b> EVERITTE A PERRY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$615.38          \$615.38
2.33	<b>Priority creditor's name and mailing address</b> FENG ZHU ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,615.62          \$4,615.62



**Part 1: Additional Page**

		Total claim	Priority amount
2.39	<b>Priority creditor's name and mailing address</b> HERIBERTO LOPEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,665.00          \$3,665.00
2.40	<b>Priority creditor's name and mailing address</b> HOWARD HARRIS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,352.64          \$4,352.64
2.41	<b>Priority creditor's name and mailing address</b> IRENE A FOSTER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$7,268.00          \$7,268.00
2.42	<b>Priority creditor's name and mailing address</b> IRMA JANNET CINTRON-BULLOCK ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,338.96          \$2,338.96
2.43	<b>Priority creditor's name and mailing address</b> ISRAEL F CINTRON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,057.20          \$3,057.20

**Part 1: Additional Page**

		Total claim	Priority amount
2.44	<b>Priority creditor's name and mailing address</b> JACQUELINE LABAW ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,176.00          \$4,176.00
2.45	<b>Priority creditor's name and mailing address</b> JACQUELINE N SCARFO ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,114.91          \$3,114.91
2.46	<b>Priority creditor's name and mailing address</b> JAMES C WHITTAKER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$7,635.28          \$7,635.28
2.47	<b>Priority creditor's name and mailing address</b> JAMES M SUBER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,261.90          \$2,261.90
2.48	<b>Priority creditor's name and mailing address</b> JAMES R CACKOWSKI ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$500.00          \$500.00

**Part 1: Additional Page**

		Total claim	Priority amount
2.49	<b>Priority creditor's name and mailing address</b> JAMES WHEELER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,334.66          \$3,334.66
2.50	<b>Priority creditor's name and mailing address</b> JANET DEVINCENTIS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$6,408.00          \$6,408.00
2.51	<b>Priority creditor's name and mailing address</b> JAWAHARLAL SODERA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$13,538.05          \$13,538.05
2.52	<b>Priority creditor's name and mailing address</b> JOANNE RASPA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,273.32          \$1,273.32
2.53	<b>Priority creditor's name and mailing address</b> JOHN MANNING ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$12,307.33          \$12,307.33

**Part 1: Additional Page**

		Total claim	Priority amount
2.54	<b>Priority creditor's name and mailing address</b> JOSE R LOPEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,882.80          \$2,882.80
2.55	<b>Priority creditor's name and mailing address</b> JOSEPH M STOCKETTE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$16,154.31          \$13,650.00
2.56	<b>Priority creditor's name and mailing address</b> JOSEPH RASPA JR ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,504.08          \$2,504.08
2.57	<b>Priority creditor's name and mailing address</b> JOSEPH TURICK ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,788.00          \$2,788.00
2.58	<b>Priority creditor's name and mailing address</b> JOSEPH W SCHAFER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$550.76          \$550.76

**Part 1: Additional Page**

		Total claim	Priority amount
2.59	<b>Priority creditor's name and mailing address</b> KELVIN DUY PHAM ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$6,697.50          \$6,697.50
2.60	<b>Priority creditor's name and mailing address</b> KENNETH W CREELY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,904.68          \$3,904.68
2.61	<b>Priority creditor's name and mailing address</b> KEVIN GATTON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$612.83          \$612.83
2.62	<b>Priority creditor's name and mailing address</b> KULWINDER SINGH ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,182.54          \$5,182.54
2.63	<b>Priority creditor's name and mailing address</b> KY VAN NGUYEN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,580.37          \$4,580.37

**Part 1: Additional Page**

		Total claim	Priority amount
2.64	<b>Priority creditor's name and mailing address</b> LAMONT D LLOYD ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,353.94          \$5,353.94
2.65	<b>Priority creditor's name and mailing address</b> LASHANDA Q EDWARDS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,906.65          \$1,906.65
2.66	<b>Priority creditor's name and mailing address</b> LAWRENCE J BOBROWSKI ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$6,747.33          \$6,747.33
2.67	<b>Priority creditor's name and mailing address</b> LOC PHUOC NGUYEN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,376.08          \$2,376.08
2.68	<b>Priority creditor's name and mailing address</b> LORI L SCARFO ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$7,308.04          \$7,308.04



**Part 1: Additional Page**

		Total claim	Priority amount
2.69	<b>Priority creditor's name and mailing address</b> MARIANO RAMOS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,511.28          \$3,511.28
2.70	<b>Priority creditor's name and mailing address</b> MARIE A FEENEY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$10,384.30          \$10,384.30
2.71	<b>Priority creditor's name and mailing address</b> MARK MANDERS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,481.03          \$1,481.03
2.72	<b>Priority creditor's name and mailing address</b> MARLON L ROSE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,195.30          \$1,195.30
2.73	<b>Priority creditor's name and mailing address</b> MATTHEW E MCCOURT ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,374.88          \$2,374.88

**Part 1: Additional Page**

		Total claim	Priority amount
2.74	<b>Priority creditor's name and mailing address</b> MICHAEL E GROH ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$8,653.97         \$8,653.97
2.75	<b>Priority creditor's name and mailing address</b> MICHAEL HAGY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$769.23         \$769.23
2.76	<b>Priority creditor's name and mailing address</b> MICHAEL J HEINTZELMAN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$6,615.85         \$6,615.85
2.77	<b>Priority creditor's name and mailing address</b> MICHAEL UDZINSKI ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,042.40         \$1,042.40
2.78	<b>Priority creditor's name and mailing address</b> MILA VASA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$8,572.43         \$8,572.43

**Part 1: Additional Page**

		Total claim	Priority amount
2.79	<b>Priority creditor's name and mailing address</b> MINH CONG NGUYEN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,560.84          \$4,560.84
2.80	<b>Priority creditor's name and mailing address</b> NICOLA TOSTO ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,018.97          \$4,018.97
2.81	<b>Priority creditor's name and mailing address</b> ORLANDO ECHEVARRIA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$6,027.68          \$6,027.68
2.82	<b>Priority creditor's name and mailing address</b> OVIDIO VAZQUEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,116.72          \$4,116.72
2.83	<b>Priority creditor's name and mailing address</b> PATRICIA F STEFANICK ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,192.85          \$5,192.85

**Part 1: Additional Page**

		Total claim	Priority amount
2.84	<b>Priority creditor's name and mailing address</b> PAUL J BEEKLER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$6,802.63          \$6,802.63
2.85	<b>Priority creditor's name and mailing address</b> PENNSAUKEN TOWNSHIP ATTN: DANA SURGNER MUNICIPAL BUILDING 5605 N. CRESCENT BLVD PENNSAUKEN, NJ 08110  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (8)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TAXES  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN          UNKNOWN
2.86	<b>Priority creditor's name and mailing address</b> PORCHEA M MATTHEWS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,765.53          \$4,765.53
2.87	<b>Priority creditor's name and mailing address</b> RALPH LEONARDO ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,160.00          \$2,160.00
2.88	<b>Priority creditor's name and mailing address</b> RAYMOND METCALF JR ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,135.96          \$2,135.96

**Part 1: Additional Page**

		Total claim	Priority amount
2.89	<b>Priority creditor's name and mailing address</b> RAYMOND PAYNE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,153.79          \$2,153.79
2.90	<b>Priority creditor's name and mailing address</b> REYNALDO IVAN SANCHEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$644.04          \$644.04
2.91	<b>Priority creditor's name and mailing address</b> RICHARD STEPHEN SIMON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,894.39          \$3,894.39
2.92	<b>Priority creditor's name and mailing address</b> RICHARD VITARELLE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$8,480.97          \$8,480.97
2.93	<b>Priority creditor's name and mailing address</b> ROBERT DOUGHERTY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,778.59          \$2,778.59

**Part 1: Additional Page**

		Total claim	Priority amount
2.94	<b>Priority creditor's name and mailing address</b> ROBERTO SOTO ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,068.42          \$4,068.42
2.95	<b>Priority creditor's name and mailing address</b> RONALD C OXENDINE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,472.90          \$4,472.90
2.96	<b>Priority creditor's name and mailing address</b> ROSEANN ROSENTHAL ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$461.54          \$461.54
2.97	<b>Priority creditor's name and mailing address</b> SALY SYSENGRATH ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,208.48          \$5,208.48
2.98	<b>Priority creditor's name and mailing address</b> SHARIF ABED ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,153.76          \$2,153.76

**Part 1: Additional Page**

		Total claim	Priority amount
2.99	<b>Priority creditor's name and mailing address</b> SHAWN BURNS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,088.84          \$4,088.84
2.100	<b>Priority creditor's name and mailing address</b> SOLOMON A ROSENTHAL ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$34,615.85          \$13,650.00
2.101	<b>Priority creditor's name and mailing address</b> STEPHEN THOMPSON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,885.66          \$3,885.66
2.102	<b>Priority creditor's name and mailing address</b> STEVEN P CONSTANTINO ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,231.04          \$3,231.04
2.103	<b>Priority creditor's name and mailing address</b> SUSAN AGIN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,884.69          \$5,884.69

**Part 1: Additional Page**

		Total claim	Priority amount
2.104	<b>Priority creditor's name and mailing address</b> TAMECA TAYLOR ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$4,484.52          \$4,484.52
2.105	<b>Priority creditor's name and mailing address</b> TED PAYLOR ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,691.65          \$1,691.65
2.106	<b>Priority creditor's name and mailing address</b> TROY WEBB ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$590.98          \$590.98
2.107	<b>Priority creditor's name and mailing address</b> VINCENT DENISI ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$3,472.88          \$3,472.88
2.108	<b>Priority creditor's name and mailing address</b> VU PHAM ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$2,261.44          \$2,261.44



**Part 1: Additional Page**

		Total claim	Priority amount
2.109	<b>Priority creditor's name and mailing address</b> WALTER T ROBINSON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,750.00          \$5,750.00
2.110	<b>Priority creditor's name and mailing address</b> ZACHARIAS A HORIATES ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b> <b>Specify Code subsection of PRIORITY unsecured claim:</b> 11 U.S.C. § 507(a) (4)	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE WAGES & PTO  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$6,000.00          \$6,000.00

**Part 2:** List All Creditors with NONPRIORITY Unsecured Claims

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

		Amount of claim	
3.1	<b>Nonpriority creditor's name and mailing address</b> 5 STAR CAB SERVICE 3920 WESTFILED AVE CAMDEN, NJ 08105  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30.00
3.2	<b>Nonpriority creditor's name and mailing address</b> AA ELECTRIC 230 WEST PARKWAY POMPTON PLAINS, NJ 07444  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,062.25

## Part 2:

## Additional Page

			Amount of claim
3.3	<b>Nonpriority creditor's name and mailing address</b> AC, INC 1085 JORDAN ROAD HUNTSVILLE, AL 35811  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,692.80
3.4	<b>Nonpriority creditor's name and mailing address</b> ACCESS TRAINING SERVICES 7921 RIVER ROAD PENNSAUKEN, NJ 081110  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,505.00
3.5	<b>Nonpriority creditor's name and mailing address</b> ADVANCED FLUID SYSTEMS, INC. P.O. BOX 360 ROYERSFORD, PA 19468-0360  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,414.88
3.6	<b>Nonpriority creditor's name and mailing address</b> AIRGAS SAFETY 128 WHARTON ROAD BRISTOL, PA 19007  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$83,819.80
3.7	<b>Nonpriority creditor's name and mailing address</b> AIRGAS USA, LLC C/O FLEISCHER, FLEISCHER & SUGLIA ATTN: JACLYN S. DOPKE 601 ROUTE 73, SUITE 305 MARLTON, NJ 08053  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN

## Part 2:

## Additional Page

			Amount of claim
3.8	<b>Nonpriority creditor's name and mailing address</b> AIRLINE HYDRAULICS CORP. P.O. BOX 536746 PITTSBURGH, PA 15253-5909  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$46,916.70
3.9	<b>Nonpriority creditor's name and mailing address</b> AIROYAL COMPANY P.O. BOX 129 MAPLEWOOD, NJ 07040-0129  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$242.84
3.10	<b>Nonpriority creditor's name and mailing address</b> ALADINO J RIVERA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,473.60
3.11	<b>Nonpriority creditor's name and mailing address</b> ALEASTUR OF AMERICA 119 NORTH MORTON AVE EVANSVILLE, IN 47733  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,989.09
3.12	<b>Nonpriority creditor's name and mailing address</b> ALLIED ELECTRONICS 7410 PEBBLE DR. FT.WORTH, TX 76118  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,563.09

## Part 2:

## Additional Page

			Amount of claim
3.13	<b>Nonpriority creditor's name and mailing address</b> ALLIED MINERAL PRODUCTS, INC 2700 SCIOTO PARKWAY COLUMBUS, OH 43221-4660  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81,876.07
3.14	<b>Nonpriority creditor's name and mailing address</b> ALUMINUM LINE PROD 24460 SPERRY CIRCLE WESTLAKE, OH 44145  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$71,600.48
3.15	<b>Nonpriority creditor's name and mailing address</b> ALYAN PUMP COMPANY 930 HENDERSON BLVD FOLCROFT, PA 19032-1807  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$583.50
3.16	<b>Nonpriority creditor's name and mailing address</b> AMAZON.COM 440 TERRY AVENUE NORTH SEATTLE, WA 98109  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,579.24
3.17	<b>Nonpriority creditor's name and mailing address</b> AMCOL CORPORATION 21435 DEQUINDRE HAZEL PARK, MI 48030  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,815.19

## Part 2:

## Additional Page

			Amount of claim
3.18	<b>Nonpriority creditor's name and mailing address</b> AMERICAN EXPRESS P.O. BOX 1270 NEWARK, NJ 07101-1270  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$113,708.84
3.19	<b>Nonpriority creditor's name and mailing address</b> AMERICAN EXPRESS TRAVEL RELATED SERVICES COMPANY, INC. C/O ZWICKER & ASSOCIATES, P.C. 80 MINUTEMAN RD. ANDOVER, MA 01810  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
3.20	<b>Nonpriority creditor's name and mailing address</b> AMERICAN PACKAGING DISTRIBUTORS CORP. WEST CHESTER, PA 19381  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,439.94
3.21	<b>Nonpriority creditor's name and mailing address</b> AMERIGAS PROPANE L.P. 80 NORTH MAIN ST WINDSOR, NJ 08561  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,633.37
3.22	<b>Nonpriority creditor's name and mailing address</b> ANDRE KNOX ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,473.60

## Part 2:

## Additional Page

			Amount of claim
3.23	<b>Nonpriority creditor's name and mailing address</b> APPLIED INDUSTRIAL TECH 124 E. 9TH. AVE. RUNNEMEDE, NJ 08078  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,501.40
3.24	<b>Nonpriority creditor's name and mailing address</b> ARCHER & GREINER, P.C. ONE CENTENNIAL SQUARE HADDONFIELD, NJ 08033  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$128.55
3.25	<b>Nonpriority creditor's name and mailing address</b> ARCONIC 100 TECHNICAL DRIVE NEW KENSINGTON, PA 15069  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,000.00
3.26	<b>Nonpriority creditor's name and mailing address</b> ATLAS COPCO COMPRESSORS LLC 260 CORPORATE DRIVE READING, PA 19605  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,051.82
3.27	<b>Nonpriority creditor's name and mailing address</b> ATTAR METALS INC. 6290 NETHERHARD ROAD MISSISSAUGA, ON L5T 1B7 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$131,169.50

## Part 2:

## Additional Page

			Amount of claim
3.28	<b>Nonpriority creditor's name and mailing address</b> BANK OF AMERICA P.O. BOX 15731 WILMINGTON, DE 19886-5731  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,429.84
3.29	<b>Nonpriority creditor's name and mailing address</b> BARRETT SUNKETT ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,547.28
3.30	<b>Nonpriority creditor's name and mailing address</b> BDS TECHNOLOGIES INC. 3443 BETHLEHEM PIKE SOUDERTON, PA 18964  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,633.48
3.31	<b>Nonpriority creditor's name and mailing address</b> BELCO INDUSTRIES, INC. 9138 WEST BELDING ROAD BELDING, MI 48809  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,383.77
3.32	<b>Nonpriority creditor's name and mailing address</b> BIO-CLEAN 1709 BIDEN LANE WILLIAMSTOWN, NJ 08094  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$687.73

**Part 2:**

## Additional Page

			Amount of claim
3.33	<b>Nonpriority creditor's name and mailing address</b> BKG COMPANY INC. 2990 CLYMER AVE. TELFORD, PA 18969  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,160.00
3.34	<b>Nonpriority creditor's name and mailing address</b> BODY CRAFTERS INC 9251 ROOSEVELT BLVD PHILADELPHIA, PA 19114  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,380.00
3.35	<b>Nonpriority creditor's name and mailing address</b> BOSTON MUTUAL LIFE INS CO PO BOX 55153 BOSTON, MA 02205-5153  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,374.04
3.36	<b>Nonpriority creditor's name and mailing address</b> BOUNTRY MAOXOMPHU ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,259.40
3.37	<b>Nonpriority creditor's name and mailing address</b> BOYD BROS. TRANSPORTATION INC. 2554 PAYSPHERE CIRCLE CHICAGO, IL 60674  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,430.20



## Part 2:

## Additional Page

			Amount of claim
3.38	<b>Nonpriority creditor's name and mailing address</b> BRIGGS HYDRAULIC 2572 INDUSTRY LANE NORRISTOWN, PA 19403  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$496.00
3.39	<b>Nonpriority creditor's name and mailing address</b> BROKERAGE CONCEPTS INC. P.O. BOX 61553 KING OF PRUSSIA, PA 19406  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$365.00
3.40	<b>Nonpriority creditor's name and mailing address</b> BUN CHHOEURTH SAO ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,031.36
3.41	<b>Nonpriority creditor's name and mailing address</b> BURLINGTON ELECTRICAL TESTING 300 CEDAR AVE CROYDON, PA 19021  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,842.20
3.42	<b>Nonpriority creditor's name and mailing address</b> CALVERT COMPANY, INC PO BOX 180358 RICHLAND, MS 39218  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$62,186.79

## Part 2:

## Additional Page

			Amount of claim
3.43	<b>Nonpriority creditor's name and mailing address</b> CALVIN JOHNSON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,620.96
3.44	<b>Nonpriority creditor's name and mailing address</b> CAMDEN CO. MUNICIPAL UTILITIES P.O. BOX 1105 BELLMAWR, NJ 08099-5105  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$53,782.75
3.45	<b>Nonpriority creditor's name and mailing address</b> CAREERBUILDER LLC 13047 COLLECTION CENTER DR CHICAGO, IL 60693-0130  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,879.18
3.46	<b>Nonpriority creditor's name and mailing address</b> CARLESA NDE SERVICES 147 GRAY LANE HANSON, MA 02341  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,607.10
3.47	<b>Nonpriority creditor's name and mailing address</b> CARLOS ORENGO ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,426.20

## Part 2:

## Additional Page

			Amount of claim
3.48	<b>Nonpriority creditor's name and mailing address</b> CARRIER CORPORATION 1095 CRANBURY S RIVER RD JAMESBURG, NJ 08831  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,650.44
3.49	<b>Nonpriority creditor's name and mailing address</b> CAVAION BAUMANN USA, LLC 20 JOSEPH MILLS DRIVE FREDERICKSBURG, VA 22408  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,740.24
3.50	<b>Nonpriority creditor's name and mailing address</b> CHANG WU ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,717.44
3.51	<b>Nonpriority creditor's name and mailing address</b> CHARLES DAVIS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,109.12
3.52	<b>Nonpriority creditor's name and mailing address</b> CHRISTOPHER BERTHIAUME ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,813.20

## Part 2:

## Additional Page

			Amount of claim
3.53	<b>Nonpriority creditor's name and mailing address</b> CHUBB NORTH AMERICA 202B HALLS MILL ROAD WHITEHOUSE STATION, NJ 08889  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,000.00
3.54	<b>Nonpriority creditor's name and mailing address</b> COMPASS METAL TRADING 309 FELLOWSHIP RD STE 200 MT LAUREL, NJ 08054  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$78,949.25
3.55	<b>Nonpriority creditor's name and mailing address</b> CONSTRUCTION SPECIALTIES, INC. PO BOX 380 MUNCY, PA 17756  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$11,439.19
3.56	<b>Nonpriority creditor's name and mailing address</b> CONTICHIM NORTH AMERICA INC. 3411 SILVERSIDE ROAD WILMINGTON, DE 19810  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,875.40
3.57	<b>Nonpriority creditor's name and mailing address</b> COONEY LLC 3125 PENN AVE HATFIELD, PA 19440  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,280.00

## Part 2:

## Additional Page

			Amount of claim
3.58	<b>Nonpriority creditor's name and mailing address</b> COUNTRYWIDE ENTERPRISES INC P.O. BOX 3030 CHERRY HILL, NJ 08034  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$211.76
3.59	<b>Nonpriority creditor's name and mailing address</b> COURTNEY D BENNETT ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$882.40
3.60	<b>Nonpriority creditor's name and mailing address</b> COVENTYA, INC 4639 VAN EPPS RD BROOKLYN HEIGHTS, OH 44131  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$109,627.24
3.61	<b>Nonpriority creditor's name and mailing address</b> CUSTOMERS BANK PROGRESS PLAZA - SULLIVAN BUILDING 1501 N. BROAD STREET SUITE 201 PHILADELPHIA, PA 19122  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PPP LOAN  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,918,774.00
3.62	<b>Nonpriority creditor's name and mailing address</b> CWP INDUSTRIEL INC. 407 MCGILL STREET, SUITE 315 MONTREAL, QC H2Y 2G3 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,269.12

## Part 2:

## Additional Page

			Amount of claim
3.63	<b>Nonpriority creditor's name and mailing address</b> DAVID DECARA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$221.04
3.64	<b>Nonpriority creditor's name and mailing address</b> DEREK MASSEY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,768.32
3.65	<b>Nonpriority creditor's name and mailing address</b> DGI SUPPLY 95 LOUISE DRIVE IVYLAND, PA 18974  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,819.02
3.66	<b>Nonpriority creditor's name and mailing address</b> DIE CLEANING EQUIPMENT AND SUPPLY INC. PHOENIX, AZ 85034  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,028.15
3.67	<b>Nonpriority creditor's name and mailing address</b> DOCUTREND IMAGING SOLUTIONS 575 8TH AVE, FL10 NEW YORK, NY 10018  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$343.64

## Part 2:

## Additional Page

			Amount of claim
3.68	<b>Nonpriority creditor's name and mailing address</b> DOKA USA LTD 214 GATES ROAD LITTLE FERRY, NJ 07643  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$56,000.00
3.69	<b>Nonpriority creditor's name and mailing address</b> DONALD HENRY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,178.44
3.70	<b>Nonpriority creditor's name and mailing address</b> DORSEY TRAILER LLC 1315 HICKMAN AVE. ELBA, AL 36323  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$23,542.10
3.71	<b>Nonpriority creditor's name and mailing address</b> DOUGLAS G RIVERA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,726.16
3.72	<b>Nonpriority creditor's name and mailing address</b> DOUGLAS JONES ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,326.24

## Part 2:

## Additional Page

			Amount of claim
3.73	<b>Nonpriority creditor's name and mailing address</b> E & R INDUSTRIAL SALES 23 CREEK CIRCLE BOOTHWYN, PA 19061  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,791.56
3.74	<b>Nonpriority creditor's name and mailing address</b> E LED LIGHTS 1610 REPUBLIC ROAD HUNTINGDON VALLEY, PA 19006  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$264.00
3.75	<b>Nonpriority creditor's name and mailing address</b> E.T. SABA ASSOCIATES, INC. 916 S. OTT STREET ALLENTOWN, PA 18103  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$709.60
3.76	<b>Nonpriority creditor's name and mailing address</b> EDUARDO JIMENEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,969.44
3.77	<b>Nonpriority creditor's name and mailing address</b> EDWARD KURTH & SONS, INC. 220 BLACKWOOD-BARNSBORO ROAD SEWELL, NJ 08080  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,891.99



## Part 2:

## Additional Page

			Amount of claim
3.78	<b>Nonpriority creditor's name and mailing address</b> EHRlich, J.C. 110 AMERICAN BLVD TURNERSVILLE, NJ 08012  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$396.64
3.79	<b>Nonpriority creditor's name and mailing address</b> ENERGY POWER INVESTMENT CO,LLC 1605 N. CEDAR CREST BLVD ALLENTOWN, PA 18104  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$436,770.68
3.80	<b>Nonpriority creditor's name and mailing address</b> ENVIRONMENTAL RECOVERY CORP. 1076 OLD MANHEIM PIKE LANCASTER, PA 17601  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,878.05
3.81	<b>Nonpriority creditor's name and mailing address</b> ESSEX SERVICE CORPORATION 82 DOE RUN DRIVE HOLLAND, PA 18966  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$575.00
3.82	<b>Nonpriority creditor's name and mailing address</b> EUGENE HALL ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,247.76

## Part 2:

## Additional Page

			Amount of claim
3.83	<b>Nonpriority creditor's name and mailing address</b> EVANS HEAT TREATING COMPANY 360 RED LION ROAD HUNTINGDON VALLEY, PA 19006  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$440.55
3.84	<b>Nonpriority creditor's name and mailing address</b> EVENT STAR 810 NW 90TH ST. MEDLEY, FL 33166  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,421.17
3.85	<b>Nonpriority creditor's name and mailing address</b> EXCEL HYDRAULICS LLC. P.O. BOX 260 MT. ROYAL, NJ 08061  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,762.78
3.86	<b>Nonpriority creditor's name and mailing address</b> EXCO USA 56617 NORTH BAY DRIVE CHESTERFIELD, MI 48051  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,834.31
3.87	<b>Nonpriority creditor's name and mailing address</b> FED EX FREIGHT P.O. BOX 223125 PITTSBURGH, PA 15250  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$758.47

## Part 2:

## Additional Page

			Amount of claim
3.88	<b>Nonpriority creditor's name and mailing address</b> FEDERAL RENT-A-FENCE P.O. BOX 266 WEST BERLIN, NJ 08091  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$131.15
3.89	<b>Nonpriority creditor's name and mailing address</b> FEDEX P.O. BOX 371461 PITTSBURGH, PA 15250-7461  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$620.47
3.90	<b>Nonpriority creditor's name and mailing address</b> FISHER SCIENTIFIC ACCT# 070822-001 BOSTON, MA 02241-3648  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,912.46
3.91	<b>Nonpriority creditor's name and mailing address</b> FLEET PARTS AND SERVICE, INC. 563 CORTLANDT STREET BELLEVILLE, NJ 07109  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$13,355.86
3.92	<b>Nonpriority creditor's name and mailing address</b> FOX ROTHSCHILD LLP 997 LENOX DRIVE, BLDG 3 LAWRENCEVILLE, NJ 08648-2311  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,328.86

## Part 2:

## Additional Page

			Amount of claim
3.93	<b>Nonpriority creditor's name and mailing address</b> FRANCISCO RODRIGUEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,989.60
3.94	<b>Nonpriority creditor's name and mailing address</b> FRANCISCO S DEFRANK ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,831.36
3.95	<b>Nonpriority creditor's name and mailing address</b> FREIGHTCAR AMERICA, INC PO BOX 617967 CHICAGO, IL 60661-7967  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,326.00
3.96	<b>Nonpriority creditor's name and mailing address</b> GABRIEL MENDEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,425.96
3.97	<b>Nonpriority creditor's name and mailing address</b> GARDEN STATE DUST CONTROL 7007 ROUTE 38 PENNSAUKEN, NJ 08109  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$830.17

## Part 2:

## Additional Page

			Amount of claim
3.98	<b>Nonpriority creditor's name and mailing address</b> GAUM INC. 1080 ROUTE 130 ROBBINSVILLE, NJ 08691  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,850.00
3.99	<b>Nonpriority creditor's name and mailing address</b> GERHART SYSTEMS AND CONTROLS 300 BUSHKILL STREET TATAMY, PA 18085  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,858.43
3.100	<b>Nonpriority creditor's name and mailing address</b> GLOBAL INDUSTRIAL 11 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$162.07
3.101	<b>Nonpriority creditor's name and mailing address</b> GLOUCESTER CITY BOX WORKS LLC P.O. BOX 2 GLOUCESTER CITY, NJ 08030  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,672.00
3.102	<b>Nonpriority creditor's name and mailing address</b> GNA ALUTECH INC. 9495 TRANS-CANADA SAINT-LAURENT, QC H4S 1V3 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,419.20

## Part 2:

## Additional Page

			Amount of claim
3.103	<b>Nonpriority creditor's name and mailing address</b> GRAINGER DEPT. 808060032 PALATINE, IL 60038-0001  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8.15
3.104	<b>Nonpriority creditor's name and mailing address</b> GRANCO-CLARK, INC. 7298 NORTH STOREY ROAD BELDING, MI 48809  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,622.12
3.105	<b>Nonpriority creditor's name and mailing address</b> GRAPHTEK LLC 600 ACADEMY DR NORTHBROOK, IL 60062  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,336.00
3.106	<b>Nonpriority creditor's name and mailing address</b> GRAYBAR ELECTRIC COMPANY INC. 1550 S WARFIELD ST PHILADELPHIA, PA 19146-3221  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$122.51
3.107	<b>Nonpriority creditor's name and mailing address</b> GREANEY CONSULTING LLC 800 VILLAGE WALK GUILFORD, CT 06437  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$94,925.00

## Part 2:

## Additional Page

			Amount of claim
3.108	<b>Nonpriority creditor's name and mailing address</b> GREENBERG TRAUIG, LLP 77 WEST WACKER DRIVE CHICAGO, IL 60601  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,950.00
3.109	<b>Nonpriority creditor's name and mailing address</b> GUYSON CORPORATION OF USA W.J. GRANDE INDUSTRIAL PARK SARATOGA SPRINGS, NY 12866-9090  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,119.00
3.110	<b>Nonpriority creditor's name and mailing address</b> HAFEEZ REHMAN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,284.08
3.111	<b>Nonpriority creditor's name and mailing address</b> HALE TRAILER P.O.BOX 1400 VOORHEES, NJ 08043  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,084.98
3.112	<b>Nonpriority creditor's name and mailing address</b> HALIFAX FAN LTD MISTRAL WORKS, UNIT 11 WEST YORKSHIRE HD6 2SD UNITED KINGDOM  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,151.90

## Part 2:

## Additional Page

			Amount of claim
3.113	<b>Nonpriority creditor's name and mailing address</b> HARRIS, BAIO & MCCULLOUGH 520 S. FRONT STREET PHILADELPHIA, PA 19147  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$421,685.45
3.114	<b>Nonpriority creditor's name and mailing address</b> HJM PRECISION, INC. 9 NEW TURNPIKE ROAD TROY, NY 12182  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,200.00
3.115	<b>Nonpriority creditor's name and mailing address</b> HORIZON BLUE CROSS & BLUE SHIELD OF NJ 250 CENTURY PKWY MT. LAUREL TOWNSHIP, NJ 08054  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE BENEFITS  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$62,154.12
3.116	<b>Nonpriority creditor's name and mailing address</b> HOUGHTON INTERNATIONAL, INC 1055 WINDWARD PKWY ALPHARETTA, GA 30005  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,847.96
3.117	<b>Nonpriority creditor's name and mailing address</b> HOUSE OF METALS 45 COMMERCIAL ROAD TORONTO, ON M4G1Z3 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95,420.84



**Part 2:**

## Additional Page

			Amount of claim
3.118	<b>Nonpriority creditor's name and mailing address</b> HOWARD CRAMER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,207.36
3.119	<b>Nonpriority creditor's name and mailing address</b> HOWARD GARDINER ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,473.60
3.120	<b>Nonpriority creditor's name and mailing address</b> HUGH RIVERS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,177.28
3.121	<b>Nonpriority creditor's name and mailing address</b> HUNG THANH KHA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,345.00
3.122	<b>Nonpriority creditor's name and mailing address</b> IAN LASTIQUE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$445.68

## Part 2:

## Additional Page

			Amount of claim
3.123	<b>Nonpriority creditor's name and mailing address</b> INDIGO GLOBAL 1500 MARKET STREET SUITE 3500E PHILADELPHIA, PA 19102  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$790,000.00
3.124	<b>Nonpriority creditor's name and mailing address</b> INDILAW LLP TWO LIBERTY PLACE 50 S. 16TH STREET SUITE 2710 PHILADELPHIA, PA 19102  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200,000.00
3.125	<b>Nonpriority creditor's name and mailing address</b> INDUSTRIAL PLASTIC FAN 339 NORTH MAIN ST MIDDLETON, MA 01949  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,095.00
3.126	<b>Nonpriority creditor's name and mailing address</b> INSTRON SYSTEMS 75 REMITTANCE DRIVE, CHICAGO, IL 60675-6826  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,469.30
3.127	<b>Nonpriority creditor's name and mailing address</b> INTERCOMP COMPANY 3839 COUNTY ROAD 116 MEDINA, MN 55340  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$17,839.40

## Part 2:

## Additional Page

			Amount of claim
3.128	<b>Nonpriority creditor's name and mailing address</b> INTERNAL REVENUE SERVICE 1500 PENNSYLVANIA AVE NW WASHINGTON, DC 20229  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TAXES  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$112,820.01
3.129	<b>Nonpriority creditor's name and mailing address</b> INTUITIVE TECHNOLOGY 620 W. GERMANTOWN SUITE 270 PLYMOUTH MEETING, PA 19462  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,763.20
3.130	<b>Nonpriority creditor's name and mailing address</b> J.R. RUBERT ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,822.20
3.131	<b>Nonpriority creditor's name and mailing address</b> JAMMIE HAGINS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$693.20
3.132	<b>Nonpriority creditor's name and mailing address</b> JARROD BIRNEY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,663.68

## Part 2:

Additional Page

			Amount of claim
3.133	<b>Nonpriority creditor's name and mailing address</b> JEFFREY MACFARLAND ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,063.04
3.134	<b>Nonpriority creditor's name and mailing address</b> JHAHAAD CARSON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,768.32
3.135	<b>Nonpriority creditor's name and mailing address</b> JOHN R NEILING ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,015.20
3.136	<b>Nonpriority creditor's name and mailing address</b> JOHNSON CONTROLS SECURITY P.O. BOX 371967 PITTSBURGH, PA 15250-7967  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$993.34
3.137	<b>Nonpriority creditor's name and mailing address</b> JOSE J MANANA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,317.08

**Part 2:**

Additional Page

			Amount of claim
3.138	<b>Nonpriority creditor's name and mailing address</b> JOSEPH BALL ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,782.08
3.139	<b>Nonpriority creditor's name and mailing address</b> JOSEPH FREEDMAN CO. 115 STEVENS STREET SPRINGFIELD, MA 01104  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,750.42
3.140	<b>Nonpriority creditor's name and mailing address</b> JOSEPH HUYN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,156.84
3.141	<b>Nonpriority creditor's name and mailing address</b> JOSEPH R FLEETWOOD ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,620.96
3.142	<b>Nonpriority creditor's name and mailing address</b> JOSHUA CARDONA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,031.52

## Part 2:

## Additional Page

			Amount of claim
3.143	<b>Nonpriority creditor's name and mailing address</b> JULIAN A JIMENEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,083.92
3.144	<b>Nonpriority creditor's name and mailing address</b> K & M TRANSPORT LLC 526 RAILROAD BLVD BUENA, NJ 08310  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
3.145	<b>Nonpriority creditor's name and mailing address</b> KABERT INDUSTRIES INC. 321 W. ST. CHARLES ROAD VILLA PARK, IL 60181  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$450.00
3.146	<b>Nonpriority creditor's name and mailing address</b> KEYON WATKINS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,092.56
3.147	<b>Nonpriority creditor's name and mailing address</b> KGM GAMING LLC 4250 WISSAHICKON AVE. PHILADELPHIA, PA 19129  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,173.92

## Part 2:

## Additional Page

			Amount of claim
3.148	<b>Nonpriority creditor's name and mailing address</b> KJGRACE LLC 8 HEISLER AVE NORTH EAST, MD 21901-3333  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$33,694.25
3.149	<b>Nonpriority creditor's name and mailing address</b> KRIS KEARNEY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,915.68
3.150	<b>Nonpriority creditor's name and mailing address</b> LABRADOR RECYCLING 115 STEVENS STREET SPRINGFIELD, MA 01104  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$157,736.13
3.151	<b>Nonpriority creditor's name and mailing address</b> LAWRENCE SHORT ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$324.60
3.152	<b>Nonpriority creditor's name and mailing address</b> LEVEL 3 COMMUNICATIONS, LLC PO BOX 910182 DENVER, CO 80291-0182  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,274.77

## Part 2:

## Additional Page

			Amount of claim
3.153	<b>Nonpriority creditor's name and mailing address</b> LITTLER MENDELSON, PC P.O. BOX 207137 DALLAS, TX 75320-7137  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,642.21
3.154	<b>Nonpriority creditor's name and mailing address</b> LMB INDUSTRIAL SERVICES 50 WESTWOOD ROAD POTTSVILLE, PA 17901  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,494.30
3.155	<b>Nonpriority creditor's name and mailing address</b> LUIS DEFRANK ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,247.76
3.156	<b>Nonpriority creditor's name and mailing address</b> MAN CHI LOI ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,138.12
3.157	<b>Nonpriority creditor's name and mailing address</b> MANCINE OPTICAL 2910 ROUTE 130 NORTH DELRAN, NJ 08075  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$138.00



## Part 2:

## Additional Page

			Amount of claim
3.158	<b>Nonpriority creditor's name and mailing address</b> MARK A PIERCE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,504.32
3.159	<b>Nonpriority creditor's name and mailing address</b> MARK SUMMERS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,807.04
3.160	<b>Nonpriority creditor's name and mailing address</b> MARSHALL INDUSTRIAL TECHNOLOGIES TRENTON, NJ 08611-1893  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,435.32
3.161	<b>Nonpriority creditor's name and mailing address</b> MATERIAL HANDLING SUPPLY INC. CREEK AND OLD SALEM ROADS BROOKLAWN, NJ 08030  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,903.49
3.162	<b>Nonpriority creditor's name and mailing address</b> MERCHANTVILLE-PENNSAUKEN WATER 6751 WESTFIELD AVE PENNSAUKEN, NJ 08110  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$328,420.13

## Part 2:

## Additional Page

			Amount of claim
3.163	<b>Nonpriority creditor's name and mailing address</b> MEREDITH CHASE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,903.04
3.164	<b>Nonpriority creditor's name and mailing address</b> MERRILL TECHNOLOGIES 21659 W. GRATIOT RD. MERRILL, MI 48697  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$29,594.02
3.165	<b>Nonpriority creditor's name and mailing address</b> METLIFE-GROUP BENEFITS P.O. BOX 804466 KANSAS CITY, MO 64180-4466  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE BENEFITS  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,932.67
3.166	<b>Nonpriority creditor's name and mailing address</b> MICHAEL W SHARKEY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,806.08
3.167	<b>Nonpriority creditor's name and mailing address</b> MICHELLE CINTRON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$554.56

## Part 2:

## Additional Page

			Amount of claim
3.168	<b>Nonpriority creditor's name and mailing address</b> MICROSOFT PO BOX 842103 DALLAS, TX 75284-2103  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$870.62
3.169	<b>Nonpriority creditor's name and mailing address</b> MOBILE DREDGING & PUMPING CO. 3100 BETHEL ROAD CHESTER, PA 19013-1405  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,375.00
3.170	<b>Nonpriority creditor's name and mailing address</b> MODERNFOLDSTYLES, 15 EMPIRE BLVD. SOUTH HACKENSACK, NJ 07606  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$58,906.00
3.171	<b>Nonpriority creditor's name and mailing address</b> MOLDED COMPONENTS INC 3706 WILD CHERRY LANE WILMINGTON, DE 19808  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,000.00
3.172	<b>Nonpriority creditor's name and mailing address</b> MOLTEN METAL EQUIPMENT INC PO BOX 933048 CLEVELAND, OH 44193  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,615.72

## Part 2:

## Additional Page

			Amount of claim
3.173	<b>Nonpriority creditor's name and mailing address</b> MONDOR LUMBER INC. 101 AMHERST BEACONSFIELD, QC H9W 5Y7 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,645.70
3.174	<b>Nonpriority creditor's name and mailing address</b> MONG T VO ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,126.08
3.175	<b>Nonpriority creditor's name and mailing address</b> MSC INDUSTRIAL DIRECT C/O HEITNER & BREITSTEIN ATTN: CARY R. STERNBACK 28 N MAIN STREET MARLBORO, NJ 07746  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
3.176	<b>Nonpriority creditor's name and mailing address</b> MSDSONLINE, INC. 27185 NETWORK PLACE CHICAGO, IL 60673  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,499.00
3.177	<b>Nonpriority creditor's name and mailing address</b> MURLIN CHEMICAL, INC. 10 BALLIGOMINGO ROAD W CONSHOHOCKEN, PA 19428  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$540.00

## Part 2:

## Additional Page

			Amount of claim
3.178	<b>Nonpriority creditor's name and mailing address</b> NANO PRO MT 7427 MATTHEWS MINT HILL RD CHARLOTTE, NC 28227  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$316.80
3.179	<b>Nonpriority creditor's name and mailing address</b> NATHAN H KELMAN, INC 41 EUCLID STREET COHOES, NY 12047  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$759,336.08
3.180	<b>Nonpriority creditor's name and mailing address</b> NATHAN H. KELMAN C/O HAHALIS & KOUNOUPIS, P.C. ATTN: DAVID L. DERATZIAN 20 E BROAD ST. BETHLEHEM, PA 18018  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
3.181	<b>Nonpriority creditor's name and mailing address</b> NEW CLEAN RITE LLC 2620 E. ALLEGHENY AVE PHILADELPHIA, PA 19134  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,252.45
3.182	<b>Nonpriority creditor's name and mailing address</b> NEW LIFE TRANSPORT PARTS CENTER PO BOX 9426 GRAND RAPIDS, MI 49509  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$8,980.45

## Part 2:

Additional Page

			Amount of claim
3.183	<b>Nonpriority creditor's name and mailing address</b> NGAN VAN LE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,753.80
3.184	<b>Nonpriority creditor's name and mailing address</b> NJR RETAIL SERVICES PO BOX 9001075 LOUISVILLE, KY 40290-1075  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$763,420.26
3.185	<b>Nonpriority creditor's name and mailing address</b> NORTH AMERICAN BENEFITS CO. 20 VALLEY STREAM PARKWAY MALVERN, PA 19355  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$728.80
3.186	<b>Nonpriority creditor's name and mailing address</b> OFFIT KURMAN P.A. TEN PENN CENTER 1801 MARKET STREET SUITE 2300 PHILADELPHIA, PA 19103  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$68,713.00
3.187	<b>Nonpriority creditor's name and mailing address</b> OMAR HICKS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,778.00

## Part 2:

## Additional Page

			Amount of claim
3.188	<b>Nonpriority creditor's name and mailing address</b> OMAV S.P.A. VIA STACCA, 2 ITALY  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,196.00
3.189	<b>Nonpriority creditor's name and mailing address</b> OMEGA ENGINEERING, INC. ONE OMEGA DRIVE STAMFORD,, CT 06907-0047  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,951.95
3.190	<b>Nonpriority creditor's name and mailing address</b> OSHA MARLTON EXECUTIVE PARK BUILDING 2 SUITE 120 701 RT. 73 SOUTH MARLTON, NJ 08053  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
3.191	<b>Nonpriority creditor's name and mailing address</b> OTP INDUSTRIAL SOLUTIONS 71 VERONICA AVE, UNIT 1 SOMERSET, NJ 08873  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,502.63
3.192	<b>Nonpriority creditor's name and mailing address</b> P & S TRANSPORTATION INC P.O. BOX 2487 BIRMINGHAM, AL 35201  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,513.18

## Part 2:

## Additional Page

			Amount of claim
3.193	<b>Nonpriority creditor's name and mailing address</b> P.S.E. & G. C/O MEYNER AND LANDIS LLP ATTN: SCOTT T. MCCLEARY ONE GATEWAY CENTER, SUITE 2500 NEWARK, NJ 07102  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
3.194	<b>Nonpriority creditor's name and mailing address</b> P.S.E. & G. P.O. BOX 14444 NEW BRUNSWICK, NJ 08906  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> UTILITIES  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,833,939.31
3.195	<b>Nonpriority creditor's name and mailing address</b> PAGE TRANSPORTATION, INC. PO BOX 920 WEEDSPORT, NY 13166  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,450.00
3.196	<b>Nonpriority creditor's name and mailing address</b> PALL AEROPOWER CORP. 5775 RIO VISTA DRIVE CLEARWATER, FL 33760-3137  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,094.78
3.197	<b>Nonpriority creditor's name and mailing address</b> PALL CORPORATION 770 PENNSYLVANIA DR. EXTON, PA 19431  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,035.96



## Part 2:

## Additional Page

			Amount of claim
3.198	<b>Nonpriority creditor's name and mailing address</b> PAUL ARMSTRONG III ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,620.96
3.199	<b>Nonpriority creditor's name and mailing address</b> PEAK TOOLWORKS 1180 WERNSING RD JASPER, IN 47546  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,227.65
3.200	<b>Nonpriority creditor's name and mailing address</b> PENNSAUKEN SEWAGE AUTHORITY 1250 JOHN TIPTON BLVD. PENNSAUKEN, NJ 08110  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> UTILITIES  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,967.25
3.201	<b>Nonpriority creditor's name and mailing address</b> PENNSAUKEN TOWNSHIP MUNICIPAL BUILDING PENNSAUKEN, NJ 08110  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> UTILITIES  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$361,148.36
3.202	<b>Nonpriority creditor's name and mailing address</b> PENSKE TRUCK LEASING CO. L.P. P.O. BOX 827380 PHILADELPHIA, PA 19182-7380  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,533.38

## Part 2:

## Additional Page

			Amount of claim
3.203	<b>Nonpriority creditor's name and mailing address</b> PERMA INDUSTRIES, INC. 2129 CENTER PARK DRIVE CHARLOTTE, NC 28217  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,502.00
3.204	<b>Nonpriority creditor's name and mailing address</b> PERMATECH INC. 911 EAST ELM ST. GRAHAM, NC 27253  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$751.10
3.205	<b>Nonpriority creditor's name and mailing address</b> PETROCHOICE HOLDINGS, INC. 837 CHERRY STREET AVOCA, PA 18641  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,043.93
3.206	<b>Nonpriority creditor's name and mailing address</b> POWER MODULES INC. 4C RAYMOND DRIVE HAVERTOWN, PA 19083  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$415.00
3.207	<b>Nonpriority creditor's name and mailing address</b> PROCESSFLO INC. 115 HILTON STREET WEST EASTON, PA 18042  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,452.05

## Part 2:

## Additional Page

			Amount of claim
3.208	<b>Nonpriority creditor's name and mailing address</b> QUAL TECH LABS, INC. 301 NATIONAL ROAD EXTON, PA 19341  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,900.27
3.209	<b>Nonpriority creditor's name and mailing address</b> QUILVIO GONZALEZ ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,386.40
3.210	<b>Nonpriority creditor's name and mailing address</b> RADWELL INTERNATIONAL 111 MOUNT HOLLY BYPASS LUMBERTON, NJ 08048  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,268.63
3.211	<b>Nonpriority creditor's name and mailing address</b> RAJU LLP 1500 MARKET STREET PHILADELPHIA, PA 19102  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,200.00
3.212	<b>Nonpriority creditor's name and mailing address</b> RAMON C PEDRAZA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,934.96

**Part 2:**

## Additional Page

			Amount of claim
3.213	<b>Nonpriority creditor's name and mailing address</b> RAYMOND HENRY ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$468.24
3.214	<b>Nonpriority creditor's name and mailing address</b> READING CRANE & ENGINEERING LINCOLN CORPORATE CENTER READING, PA 19606  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,220.00
3.215	<b>Nonpriority creditor's name and mailing address</b> RELIANCE STANDARD LIFE P.O. BOX 3124 SOUTHEASTERN, PA 19398  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$728.30
3.216	<b>Nonpriority creditor's name and mailing address</b> RESIDENTIAL FENCES 1775 ROUTE 25 RIDGE, NY 11961  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$5,910.00
3.217	<b>Nonpriority creditor's name and mailing address</b> RG GROUP PO BOX 62744 BALTIMORE, MD 21264  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,559.83

**Part 2:**

## Additional Page

			Amount of claim
3.218	<b>Nonpriority creditor's name and mailing address</b> RICHARD H FORD ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,462.72
3.219	<b>Nonpriority creditor's name and mailing address</b> RICHARD REUSCH ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,966.56
3.220	<b>Nonpriority creditor's name and mailing address</b> ROBERT J. FITZMYER CO., INC. 315 EAST 7TH AVENUE CONSHOHOCKEN, PA 19428  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,338.05
3.221	<b>Nonpriority creditor's name and mailing address</b> ROBERT MOSS ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,265.92
3.222	<b>Nonpriority creditor's name and mailing address</b> ROBERT MULLAN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,871.64

## Part 2:

## Additional Page

			Amount of claim
3.223	<b>Nonpriority creditor's name and mailing address</b> ROBERT ROBINSON ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,126.08
3.224	<b>Nonpriority creditor's name and mailing address</b> RON GILLESPIE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,380.08
3.225	<b>Nonpriority creditor's name and mailing address</b> RUSS WHELAN, INC PO BOX 119 BENSLEM, PA 19020  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,983.12
3.226	<b>Nonpriority creditor's name and mailing address</b> SAFETY-KLEEN CORP. 123 RED LION ROAD SOUTHAMPTON, NJ 08088  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$481.41
3.227	<b>Nonpriority creditor's name and mailing address</b> SANG VAN VU ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,456.16

## Part 2:

## Additional Page

			Amount of claim
3.228	<b>Nonpriority creditor's name and mailing address</b> SECAT INC. ATTN: SHRIDAS NINGILERI LEXINGTON, KY 40511  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,500.00
3.229	<b>Nonpriority creditor's name and mailing address</b> SECRETARY OF LABOR C/O OSHRC 1120 20TH STREET NW, 9TH FLOOR WASHINGTON, DC 20036-3457  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
3.230	<b>Nonpriority creditor's name and mailing address</b> SECURITY DOOR SPECIALIST, INC. 1424 WELLS DRIVE BENSLEM, PA 19020  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,415.61
3.231	<b>Nonpriority creditor's name and mailing address</b> SENTRY INSURANCE 1800 NORTH POINT DRIVE STEVENS POINT, WI 54481  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> INSURANCE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$432,295.31
3.232	<b>Nonpriority creditor's name and mailing address</b> SHI INTERNATIONAL CORP 1501 S. MOPAC EXPRESSWAY AUSTIN, TX 78746  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,265.16

**Part 2:**

## Additional Page

			Amount of claim
3.233	<b>Nonpriority creditor's name and mailing address</b> SHIP TO SHORE DRUG AND ALCOHOL TESTING GLENOLDEN, PA 19036  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,325.00
3.234	<b>Nonpriority creditor's name and mailing address</b> SMITHAMUNDSEN LLC ATTN: A/R DEPT CHICAGO, IL 60601  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61,783.28
3.235	<b>Nonpriority creditor's name and mailing address</b> SOLOMON ROSENTHAL 9000 RIVER ROAD DELAIT, NJ 08110  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,728.14
3.236	<b>Nonpriority creditor's name and mailing address</b> SOUTHEAST ID 5830 NW 163RD STREET MIAMI LAKES, FL 33014  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,175.00
3.237	<b>Nonpriority creditor's name and mailing address</b> SOUTHEASTERN EXTRUSION TOOL P.O. BOX 2218 FLORENCE, AL 35630  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$233,391.70



## Part 2:

## Additional Page

			Amount of claim
3.238	<b>Nonpriority creditor's name and mailing address</b> SPORTSFIELD SPECIALTIES PO BOX 231 DELHI, NY 13753  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$23,223.59
3.239	<b>Nonpriority creditor's name and mailing address</b> STAPLES ADVANTAGE PO BOX 70242 PHILADELPHIA, PA 19176-0242  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,434.67
3.240	<b>Nonpriority creditor's name and mailing address</b> STICKEL PACKAGING SUPPLY 1991 RUTGERS UNIVERSITY BLVD LAKEWOOD, NJ 08701  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,047.67
3.241	<b>Nonpriority creditor's name and mailing address</b> SUZETTE RATLIFF ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,545.04
3.242	<b>Nonpriority creditor's name and mailing address</b> SYMTAX INDUSTRIES 601 W. BROADWAY, SUITE 400 VANCOUVER, BC V5Z 4C2 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,315.51

## Part 2:

## Additional Page

			Amount of claim
3.243	<b>Nonpriority creditor's name and mailing address</b> SYNERGY BATH, LLC 6006 ROUTE 130 S PENNSAUKEN, NJ 08109  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$1,475.00
3.244	<b>Nonpriority creditor's name and mailing address</b> TAN VAN LE ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,209.12
3.245	<b>Nonpriority creditor's name and mailing address</b> TANNER INDUSTRIES, INC. 735 DAVISVILLE ROAD SOUTHAMPTON, PA 18966  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,911.60
3.246	<b>Nonpriority creditor's name and mailing address</b> TAQUANN FLEMING ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,542.70
3.247	<b>Nonpriority creditor's name and mailing address</b> TAYLOR CORPORATION 600 ALBANY STREET DAYTON, OH 45417  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$469.99

## Part 2:

## Additional Page

			Amount of claim
3.248	<b>Nonpriority creditor's name and mailing address</b> TEAMSTERS LOCAL 837 401(K) PLAN C/O MARKOWITZ & RICHMAN ATTN: THOMAS HERMAN KOHN 123 S. BROAD STREET, SUITE 2020 PHILADELPHIA, PA 19109  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
3.249	<b>Nonpriority creditor's name and mailing address</b> THE ALUMINUM ASSOCIATION, IN 1400 CRYSTAL DRIVE ARLINGTON, VA 22202  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,431.00
3.250	<b>Nonpriority creditor's name and mailing address</b> THE HARTFORD GROUP BENEFITS PHILADELPHIA, PA 19178-3690  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,708.68
3.251	<b>Nonpriority creditor's name and mailing address</b> THERMIKA SYSTEMS INC. UNIT# 2 169 GOLDEN DRIVE COQUITLAM, BC V3K 6T1 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,785.00
3.252	<b>Nonpriority creditor's name and mailing address</b> THOMAS SCIENTIFIC P.O. BOX 99 SWEDESBORO, NJ 08085  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$179.46

## Part 2:

## Additional Page

			Amount of claim
3.253	<b>Nonpriority creditor's name and mailing address</b> TIMOTHY TRAN ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,959.00
3.254	<b>Nonpriority creditor's name and mailing address</b> TRANE 4201 MILLER ROAD WILMINGTON, DE 19802  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,015.00
3.255	<b>Nonpriority creditor's name and mailing address</b> TREASURER - STATE OF N. J. 125 WEST STATE STREET TRENTON, NJ 08625  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$42,115.20
3.256	<b>Nonpriority creditor's name and mailing address</b> TRESICAL 47 LOVETON CIRCLE SUITE 1 SPARKS, MD 21152  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$77.00
3.257	<b>Nonpriority creditor's name and mailing address</b> TRI-STATE ALUMINUM 81 CHIMNEY ROCK RD. #3 BRIDGEWATER, NJ 08807  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$15,459.29

## Part 2:

## Additional Page

			Amount of claim
3.258	<b>Nonpriority creditor's name and mailing address</b> TUSTIN WATER SOLUTIONS 2555 INDUSTRY LANE NORRISTOWN, PA 19403  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,627.80
3.259	<b>Nonpriority creditor's name and mailing address</b> ULTIMATE SOFTWARE P.O. BOX 930953 ATLANTA, GA 31193-0953  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,809.50
3.260	<b>Nonpriority creditor's name and mailing address</b> UNIFIRST PO BOX 650481 DALLAS, TX 75265-0481  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,048.23
3.261	<b>Nonpriority creditor's name and mailing address</b> UNITED PARCEL SERVICE PO BOX 650116 DALLAS, TX 75265-0116  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,006.63
3.262	<b>Nonpriority creditor's name and mailing address</b> UNIVAR SOLUTIONS USA 5 STEEL ROAD EAST MORRISVILLE, PA 19067  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,845.54

## Part 2:

## Additional Page

			Amount of claim
3.263	<b>Nonpriority creditor's name and mailing address</b> VECTOR SECURITY 854 S. WHITE HORSE PIKE HAMMONTON, NJ 08037  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,027.86
3.264	<b>Nonpriority creditor's name and mailing address</b> VERIZON WIRELESS P.O. BOX 4003 ACWORTH, GA 30101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,906.85
3.265	<b>Nonpriority creditor's name and mailing address</b> VICTOR MEDINA ADDRESS ON FILE  <b>Date or dates debt was incurred</b>   <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,284.08
3.266	<b>Nonpriority creditor's name and mailing address</b> VISION SERVICE PLAN PO BOX 742788 LOS ANGELES, CA 90074-2788  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$578.88
3.267	<b>Nonpriority creditor's name and mailing address</b> W.B. MASON PO BOX 981101 BOSTON, MA 02298-1101  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,936.10

## Part 2:

## Additional Page

			Amount of claim
3.268	<b>Nonpriority creditor's name and mailing address</b> WABASH NATIONAL PO BOX 6129 LAFAYETTE, IN 47903  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$300,781.34
3.269	<b>Nonpriority creditor's name and mailing address</b> WAGSTAFF 3910 NORTH FLORA ROAD SPOKANE, WA 99216  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,398.40
3.270	<b>Nonpriority creditor's name and mailing address</b> WARDJET, INC 180 SOUTH AVE. BOX 517 TALLMADGE, OH 44278  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> CUSTOMER OVERPAYMENT/PREPAYMENT  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	\$13,334.06
3.271	<b>Nonpriority creditor's name and mailing address</b> WASTE STREAM MANAGEMENT INC. 3635 WESTNEY ROAD N GREENWOOD, ON L0H 1H0 CANADA  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$291.15
3.272	<b>Nonpriority creditor's name and mailing address</b> WEAVER OIL PO BOX 185 THOROFARE, NJ 08086  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,120.28

## Part 2:

## Additional Page

			Amount of claim
3.273	<b>Nonpriority creditor's name and mailing address</b> WELLS FARGO BANK, N.A. P.O. BOX 29482 PHOENIX, AZ 85038  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> PPP LOAN  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,951,241.00
3.274	<b>Nonpriority creditor's name and mailing address</b> WES PANEI ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,430.36
3.275	<b>Nonpriority creditor's name and mailing address</b> WHARTON HARDWARE & SUPPLY CORP. ATTN: CAROLE STROBEL 7724 N CRESCENT BLVD. PENNSAUKEN TOWNSHIP, NJ 08110  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> LITIGATION  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	UNKNOWN
3.276	<b>Nonpriority creditor's name and mailing address</b> WILLIAM SHAW ADDRESS ON FILE  <b>Date or dates debt was incurred</b>  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> EMPLOYEE PTO  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,079.60
3.277	<b>Nonpriority creditor's name and mailing address</b> WILLIER ELEC. MOTOR CO., INC. P.O. BOX 98 GIBBSBORO, NJ 08026  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,337.77



## Part 2:

## Additional Page

			Amount of claim
3.278	<b>Nonpriority creditor's name and mailing address</b> WILTECH, INC 405-A SOUTHGATE COURT MICKLETON, NJ 08056  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,718.66
3.279	<b>Nonpriority creditor's name and mailing address</b> WM OF CAMDEN INC. 1001 FAIRVIEW ST. CAMDEN, NJ 08104  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,048.36
3.280	<b>Nonpriority creditor's name and mailing address</b> XTEL COMMUNICATIONS 10 LAKE CENTER EXECUTIVE PARK, SUITE 106 401 ROUTE 73 NORTH MARLTON, NJ 08053  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$841.78
3.281	<b>Nonpriority creditor's name and mailing address</b> XYLEM WATER SOLUTIONS USA 26717 NETWORK PLACE CHICAGO, IL 60673-1267  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,881.72
3.282	<b>Nonpriority creditor's name and mailing address</b> YARD TRUCK SPECIALIST, INC. 1510 FORD RD. BENSALEM, PA 19020  <b>Date or dates debt was incurred</b> VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,861.24

Part 2:

Additional Page

			Amount of claim
3.283	<b>Nonpriority creditor's name and mailing address</b>  YOUNGSTOWN TOOL & DIE CO. LLC 2572 SALT SPRINGS ROAD YOUNGSTOWN, OH 44509  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$61,276.59
3.284	<b>Nonpriority creditor's name and mailing address</b>  Y-PERS P.O. BOX 9559 PHILADELPHIA, PA 19124  <b>Date or dates debt was incurred</b>  VARIOUS  <b>Last 4 digits of account number:</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i>  <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> TRADE PAYABLE  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$877.53

Part 4:

Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

			Total of claim amounts
5a.	Total claims from Part 1	5a.	\$510,243.35
5b.	Total claims from Part 2	5b. +	\$16,858,991.69
5c.	<b>Total of Parts 1 and 2</b> Lines 5a + 5b = 5c.	5c.	\$17,369,235.04

Fill in this information to identify the case:

Debtor Aluminum Shapes, L.L.C.United States Bankruptcy Court for the: New JerseyCase number  
(if known) 21-16520☐ Check if this is an amended filing

## Official Form 206G

## Schedule G: Executory Contracts and Unexpired Leases

12/15

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

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

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

## 2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest	ARGON AND NITROGEN	AIRGAS, LLC 1 PROGRESS DRIVE HORSHAM, PA 19044
	State the term remaining	3/2022	
	List the contract number of any government contract	N/A	
2.2	State what the contract or lease is for and the nature of the debtor's interest	ICE MACHINE	AJAX ICE INCORPORATED 350 W. ELM ST. CONSHOHOCKEN, PA 19428
	State the term remaining	6/2023	
	List the contract number of any government contract	N/A	
2.3	State what the contract or lease is for and the nature of the debtor's interest	PROPANE	AMERIGAS PROPANE, L.P. 460 NORTH GULPH ROAD KING OF PRUSSIA, PA 19406
	State the term remaining	11/2021	
	List the contract number of any government contract	N/A	
2.4	State what the contract or lease is for and the nature of the debtor's interest	INTERNET	COMCAST ENTERPRISE SERVICES 4400 PORT UNION ROAD WEST CHESTER, OH 45011
	State the term remaining	UNDETERMINED	
	List the contract number of any government contract	N/A	

List all contracts and unexpired leases			State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>COPIERS</p> <p>1/2024</p> <p>N/A</p>	<p>DOCUTREND IMAGING SOLUTIONS 575 8TH AVENUE NEW YORK, NY 10018</p>
2.6	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>ELECTRICITY/SOLAR</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>ENERGY POWER INVESTMENT COMPANY, LLC ("EPIC") 251 LITTLE FALLS DRIVE WILMINGTON, DE 19808</p>
2.7	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>FORD F350 TRUCK</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>HOLMAN FORD LINCOLN 571 NJ-38 MAPLE SHADE, NJ 08052</p>
2.8	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>FORKLIFTS</p> <p>5/1/2023</p> <p>N/A</p>	<p>HYG FINANCIAL SERVICES INC. 800 WALNUT ST DES MOINES, IA 50309-3605</p>
2.9	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>COMPUTER</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>INSTRON 825 UNIVERSITY AVENUE NORWOOD, MA 02062-2643</p>
2.10	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SAFETY SYSTEM</p> <p>2/17/2022</p> <p>N/A</p>	<p>JOHNSON CONTROLS SECURITY SOLUTIONS LLC 7852 BROWNING RD PENNSAUKEN, NJ 08109-4642</p>

List all contracts and unexpired leases			State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.11	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>COPIERS</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>MARLIN LEASING CORPORATION 300 FELLOWSHIP ROAD MT LAUREL, NJ 08054</p>
2.12	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SOFTWARE</p> <p>MONTH TO MONTH</p> <p>N/A</p>	<p>MICROSOFT ONE MICROSOFT WAY REDMOND, WA 98052-6399</p>
2.13	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>WATER</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>OVOQUA 258 DUNKS FERRY ROAD BENSALEM, PA 19020</p>
2.14	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PARTS &amp; MAINTENANCE</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>PYROMETER EQUIPMENT CO., INC. 15 LANCE ROAD LEBANON, NJ 08833</p>
2.15	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>WATER</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>QUENCH USA, INC. 780 5TH AVENUE KING OF PRUSSIA, PA 19406</p>
2.16	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>PEST MANAGEMENT</p> <p>MONTH-TO-MONTH</p> <p>N/A</p>	<p>RENTOKIL NORTH AMERICA. INC. DBA EHRlich 1125 BERKSHIRE BOULEVARD SUITE 150 WYOMISSING, PA 19610</p>

List all contracts and unexpired leases			State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.17	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>MAINTENANCE</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>SPECTRO ANALYTICAL INSTRUMENTS, INC. 91 MCKEE DR MAHWAH, NJ 07430</p>
2.18	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>QUALITY SYSTEMS REGISTRATION</p> <p>4/2024</p> <p>N/A</p>	<p>SRI QUALITY SYSTEM REGISTRAR 300 NORTHPOINTE CIRCLE SUITE 304 SEVEN FIELDS, PA 16046</p>
2.19	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>WATER MANAGEMENT</p> <p>MONTH-TO-MONTH</p> <p>N/A</p>	<p>TUSTIN WATER SOLUTIONS 2555 INDUSTRY LANE NORRISTOWN, PA 19403</p>
2.20	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>RENTAL GARMENTS</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>UNIFIRST HOLDINGS, INC. 68 JONSPIN ROAD WILMINGTON, MA 01887</p>
2.21	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>CHEMICALS</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>UNIVAR USA INC. 3075 HIGHLAND PARKWAY SUITE 200 DOWNERS GROVE, IL 60515</p>
2.22	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>SECURITY</p> <p>12/2021</p> <p>N/A</p>	<p>VECTOR SECURITY 854 SO WHITE HORSE PIKE HAMMONTON, NJ 08037</p>

List all contracts and unexpired leases			State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.23	<p><b>State what the contract or lease is for and the nature of the debtor's interest</b></p> <p><b>State the term remaining</b></p> <p><b>List the contract number of any government contract</b></p>	<p>ELECTRICITY/SOLAR</p> <p>UNDETERMINED</p> <p>N/A</p>	<p>VELOCITY (PS8600 LLC &amp; VVP8600) LLC) 8600 RIVER ROAD DELAIR, NJ 08110</p>
2.24	<p><b>State what the contract or lease is for and the nature of the debtor's interest</b></p> <p><b>State the term remaining</b></p> <p><b>List the contract number of any government contract</b></p>	<p>WEIGH STATION LEASE</p> <p>10/1/2030</p> <p>N/A</p>	<p>VELOCITY (PS8600 LLC &amp; VVP8600) LLC) 8600 RIVER ROAD DELAIR, NJ 08110</p>
2.25	<p><b>State what the contract or lease is for and the nature of the debtor's interest</b></p> <p><b>State the term remaining</b></p> <p><b>List the contract number of any government contract</b></p>	<p>WASTE</p> <p>12/2022</p> <p>N/A</p>	<p>WASTE MANAGEMENT OF NEW JERSEY, INC. 107 SLLVLA STREET EWING, NJ 08628</p>
2.26	<p><b>State what the contract or lease is for and the nature of the debtor's interest</b></p> <p><b>State the term remaining</b></p> <p><b>List the contract number of any government contract</b></p>	<p>TELECOMMUNICATIONS</p> <p>5/2022</p> <p>N/A</p>	<p>XTEL COMMUNICATIONS, INC. 10000 MIDLANTIC DR SUITE 410E MT LAUREL TOWNSHIP, NJ 08054</p>

## Fill in this information to identify the case:

Debtor Aluminum Shapes, L.L.C.United States Bankruptcy Court for the: New JerseyCase number 21-16520  
(if known)☐ Check if this is an amended filing

## Official Form 206H

## Schedule H: Codebtors

12/15

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

## 1. Does the debtor have any codebtors?

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

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

## Column 1: Codebtor

## Column 2: Creditor

	Column 1: Codebtor		Column 2: Creditor	
	Name	Mailing Address	Name	Check all schedules that apply
2.1	JACKY CHEUNG	9000 RIVER ROAD DELAIR, NJ 08110	TIGER FINANCE, LLC	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G



United States Bankruptcy Court  
District of New Jersey

In re Aluminum Shapes, L.L.C.

Debtor(s)

Case No. 21-16520-JNP  
Chapter 11

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Jacky Cheung 9000 River Road Pennsauken, NJ 08110	Member	100%	Membership

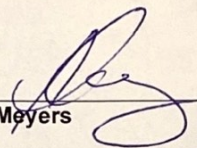
**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **Interim Chief Financial Officer** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date

9/10/2021

Signature

  
Jordan Meyers

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court  
District of New Jersey**

In re **Aluminum Shapes, L.L.C.**

Debtor(s)

Case No. **21-16520-JNP**  
Chapter **11**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Aluminum Shapes, L.L.C.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

9/12/2021

Date

/s/ Edmond M. George

**Edmond M. George, Esquire 038771988**

Signature of Attorney or Litigant

Counsel for **Aluminum Shapes, L.L.C.**

**Obermayer Rebmann Maxwell & Hippel LLP**

**215-665-3140 Fax:215-665-3165**

**edmond.george@obermayer.com**

## Fill in this information to identify the case:

Debtor Aluminum Shapes, L.L.C.United States Bankruptcy Court for the: New JerseyCase number  
(if known) 21-16520

## Official Form 202

## Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

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

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

## Declaration and signature

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

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

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

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

Executed on 9/10/2021  
MM / DD / YYYY

X /s/ Jordan Meyers  
Signature of individual signing on behalf of debtor

Jordan Meyers  
Printed name

Chief Financial Officer  
Position or relationship to debtor

<b>UNITED STATES BANKRUPTCY COURT DISTRICT OF NEW JERSEY</b>	
<b><i>Caption in Compliance with D.N.J. LBR 9004-1(b)</i></b> <b>OBERMAYER REBMANN MAXWELL &amp; HIPPEL LLP</b> Edmond M. George, Esquire Michael D. Vagnoni, Esquire (pro hac vice) Turner Falk, Esquire 1120 Route 73, Suite 420 Mount Laurel, NJ 08054-5108 Telephone: (856) 795-3300 Facsimile: (856) 482-0504 E-mail: edmond.george@obermayer.com michael.vagnoni@obermayer.com turner.falk@obermayer.com  Proposed Counsel to the Debtor and Debtor in Possession	
In re:	Chapter 11
ALUMINUM SHAPES, L.L.C.,	Case No. 21-16520-JNP
Debtor.	

**BANKRUPTCY RULE 2016(b) STATEMENT OF ATTORNEY COMPENSATION**

Pursuant to 11 U.S.C. § 329 and Rule 2016(b) of the Federal Rules of Bankruptcy Procedure, the undersigned proposed attorney for the above captioned debtor and debtor-in-possession in this case, Aluminum Shapes, L.L.C. (the “Debtor”), makes this statement setting forth the compensation paid to the undersigned for services rendered or to be rendered in contemplation of and in connection with the case by the undersigned, and the source of such compensation.

1. On or about August 15, 2021 (the “Petition Date”), the Debtor filed a voluntary Petition for Relief under Chapter 11 of the United States Bankruptcy Code, 11 U.S.C. §§ 101, *et seq.* (as amended, the “Bankruptcy Code”) and relief was ordered.

2. The Debtor remains in possession of its property and control of its business as a Debtor-in-Possession pursuant to Sections 1107(a) and 1108 of the Bankruptcy Code.

3. The firm of Obermayer Rebmann Maxwell & Hoppel LLP (“Obermayer”) has agreed to act as counsel on behalf of the Debtor.

4. Obermayer commenced its representation of the Debtor on June 23, 2021. Prior to that date, Obermayer had not represented the Debtor or any person in connection with the Debtor.

5. During the ninety (90) days prior to the Petition Date, the Debtor paid Obermayer an advance fee retainer in the amount of \$50,000.00 (the “Advance Fee Retainer”) and has paid Obermayer in the ordinary course of business on its invoices as follows:

- a) On or about July 28, 2021, Obermayer issued an invoice to the Debtor in the amount of \$9,230.00 for fees, services and costs which bill was paid in full on or about the same day from the Advance Fee Retainer, the balance of which was reduced from \$50,000 to \$40,770;
- b) On or about August 6, 2021, Obermayer issued an invoice to the Debtor in the amount of \$119,826.65 for fees, services and costs which bill was paid in full on or about August 9, 2021 from a wire transfer from the Debtor. The Advance Fee retainer was not used to pay any portion of this bill;
- c) On or about August 13, 2021, Obermayer issued an invoice to the Debtor in the amount of \$142,086.00 for fees, services and costs which bill was paid in full on the same day through (i) a wire transfer from the Debtor in the amount of \$125,000.00 and (ii) the remaining \$17,086.00 from the Advance Fee Retainer, the balance of which was reduced from \$40,770.00 to \$23,684.00, which amount remains on deposit with Obermayer to be applied to future billings after approval by the Bankruptcy Court as set forth below..

6. The Debtor has agreed to pay any additional legal fees to Obermayer at the hourly rate of \$295.00 to \$550.00 per hour for attorneys and \$125.00 per hour for paralegals depending upon the level of seniority of the individual performing the service, pursuant to proper application and final order of the Bankruptcy Court in accordance with In re Busy Beaver Building Center, Inc., 19 F.3d 833 (3d Cir. 1994).

7. The undersigned has not shared or agreed to share any portion of such compensation with any other person who is not a member or regular associate of the undersigned's law firm.

8. The undersigned has not received any other payment from the Debtor for services rendered or to be rendered in contemplation of or in connection with the case, and has no other agreement, except as set out herein.

Respectfully submitted,

Dated: September 12, 2021

/s/ Edmond M. George  
Edmond M. George, Esquire  
Michael D. Vagnoni, Esquire (pro hac vice)  
Turner N. Falk, Esquire  
OBERMAYER REBMANN MAXWELL & HIPPEL LLP  
1120 Route 73, Suite 420  
Mount Laurel, NJ 08054-5108  
Proposed Counsel to the Debtor