

**UNITED STATES BANKRUPTCY COURT
FOR THE EASTERN DISTRICT OF KENTUCKY
LEXINGTON DIVISION**

| | | |
|---|---|-----------------------------|
| In re: |) | |
| |) | Chapter 11 |
| |) | |
| GenCanna Global USA, Inc., <i>et al.</i> , ¹ |) | Case No. 20-50133-grs |
| |) | |
| Debtors. |) | (Jointly Administered) |
| |) | |
| |) | Honorable Gregory R. Schaaf |
| |) | |

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

GenCanna Global USA, Inc. and its affiliates, as debtors and debtors in possession in the above-captioned chapter 11 cases, (each a “Debtor” and, collectively, the “Debtors”) have filed their respective *Schedules of Assets and Liabilities* (the “Schedules”) and *Statements of Financial Affairs* (the “Statements”) in the United States Bankruptcy Court for the Eastern District of Kentucky (the “Bankruptcy Court”). The Debtors prepared the Schedules and Statements in accordance with section 521 of chapter 11 of title 11 of the United States Code (the “Bankruptcy Code”) and Rule 1007 of the Federal Rules of Bankruptcy Procedure.

In preparing the Schedules and Statements, the Debtors relied on financial data derived from their books and records that was available at the time of such preparation. Although the Debtors have made every commercially reasonable effort to ensure the accuracy and completeness of the Schedules and Statements, subsequent information or discovery may result in material changes to the Schedules and Statements.

The Debtors expressly do not undertake any obligation to update, modify, revise, or re-categorize the information provided herein, or to notify any third party should the information be updated, modified, revised, or re-categorized, except as required by applicable law.

Global Notes and Overview of Methodology

1. **Description of Cases.** On January 24, 2020 (the “Involuntary Petition Date”), certain creditors filed an involuntary chapter 11 petition for relief under the Bankruptcy Code against Debtor GenCanna Global USA, Inc. (“GenCanna”). GenCanna answered the involuntary petition and consented to the entry of an order for relief on February 6,

¹ The Debtors in these chapter 11 bankruptcy cases are (with the last four digits of their federal tax identification numbers in parentheses): GenCanna Global USA, Inc. (0251); GenCanna Global, Inc. (N/A); and Hemp Kentucky, LLC (0816).

2020. The Bankruptcy Court signed an order for relief that same day (the “Relief Date”), and a copy of that order was entered on the case docket on February 7, 2020 [Docket No. 94].

On February 5, 2020 (the “Voluntary Petition Date”), Debtors Hemp Kentucky LLC (“Hemp Kentucky”) and GenCanna Global, Inc. (“GenCanna Parent”) each filed a voluntary petition for relief under chapter 11 of the Bankruptcy Code. These voluntary cases and GenCanna’s involuntary case are being jointly administered for procedural purposes under Case No. 20-50133-grs [Docket No. 89].

The Debtors are operating their businesses and managing their property as debtors in possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code.

2. **Global Notes Control.** These Global Notes pertain to and comprise an integral part of each of the Schedules and Statements and should be referenced in connection with any review thereof.
3. **Reservations and Limitations.** Reasonable efforts have been made to prepare and file complete and accurate Schedules and Statements; however, as noted above, inadvertent errors or omissions may exist. The Debtors reserve all rights to amend and supplement the Schedules and Statements as may be necessary or appropriate, including, but not limited to, with respect to claim description and designation. Nothing contained in the Schedules and Statements constitutes a waiver of any of the Debtors’ rights or an admission of any kind with respect to these chapter 11 cases, including, but not limited to, any rights or claims of the Debtors against any third party or issues involving substantive consolidation, equitable subordination, or defenses or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code or any other relevant applicable bankruptcy or non-bankruptcy laws to recover assets or avoid transfers.
 - a. **No Admission.** Nothing contained in the Schedules and Statements is intended or should be construed as an admission or stipulation of the validity of any claim against the Debtors, any assertion made therein or herein, or a waiver of the Debtors’ rights to dispute any claim or assert any cause of action or defense against any party.

In some instances, the Debtors have disclosed information in the Schedules and Statements simply out of an abundance of caution for purposes of disclosure. For example, in compiling the listing of executory contracts and unexpired leases for inclusion on Schedule G, the Debtors sought to be over-inclusive, rather than under-inclusive. By listing a particular contract or lease on Schedule G, the Debtors make no admission that such contract or lease meets the requirements of being an executory contract or a true unexpired lease for purposes of these cases and reserve all rights in that regard.

- b. **Classifications.** Classification of claims as “secured,” “priority” or “unsecured,” or a contract as “executory” or “unexpired,” does not constitute an admission by the Debtors of the legal rights of the claimant or contract counterparty, or a waiver of the Debtors’ rights to recharacterize or reclassify such claim or contract.
 - c. **Claims Description.** The Debtors reserve all rights to dispute, or assert offsets or defenses to, any claim reflected on their respective Schedules and Statements on any grounds, including, without limitation, as to liability or classification, or to otherwise subsequently designate such claims as “disputed,” “contingent,” or “unliquidated” or object to the extent, validity, enforceability, priority, or avoidability of any claim.
 - d. **Intellectual Property Rights.** Exclusion of certain intellectual property, if any, should not be construed to be an admission that such intellectual property rights have been abandoned, terminated, expired by their terms, or have been assigned or otherwise transferred pursuant to a sale, acquisition, or other transaction.
 - e. **Insiders.** In the circumstance where the Schedules and Statements require information regarding “insiders,” the Debtors have included information with respect to the individuals who the Debtors believe are included in the definition of “insider” set forth in section 101(31) of the Bankruptcy Code during the relevant time periods. Such individuals may no longer serve in such capacities.
4. **Contingent Assets.** The Debtors reserve all of their rights with respect to any claims and causes of action, whether arising under the Bankruptcy Code or otherwise, that they may have or will have and nothing contained in these Global Notes or the Schedules and Statements shall be deemed a waiver of any such claims, avoidance actions or causes of action or in any way prejudice or impair the assertion of such claim.
- a. **Confidential Information.** There may be instances in the Schedules and Statements where it was necessary and appropriate to redact from the public record information such as names, addresses, or amounts because of agreements between the Debtors and certain third parties, concerns of confidentiality and protection of sensitive commercial information (*e.g.*, names of customers), or concerns for the privacy of an individual (*e.g.*, employees).
- Certain Debtor agreements are confidential in nature even as to their very existence between the respective contract counterparties. Due to the confidential nature of these agreements and in order to best protect the Debtors’ business interests, the Debtors have not listed these agreements on Schedule G.
- b. **Duplication.** Certain of the Debtors’ assets, liabilities, and prepetition payments

may properly be disclosed in response to multiple parts of the Statements and Schedules.

- c. **Net Book Value.** In certain instances, current market valuations for individual items of property and other assets are not readily available. Accordingly, unless otherwise indicated, the Schedules and Statements reflect net book values as of the Relief Date for GenCanna assets and as of the Voluntary Petition Date for Kentucky Hemp and GenCanna Parent. If no meaningful difference exists in the Debtors' best judgment between values as of the Voluntary Petition Date and values as of the Relief Date, then for efficiency purposes, the Relief Date is used for all Debtors in terms of asset values.
- d. **Paid Claims.** The Debtors have authority to pay certain outstanding prepetition claims pursuant to orders entered by the Bankruptcy Court, including certain tax obligations, employee wages and benefits, certain shipper claims, and certain critical vendor claims. As such, certain prepetition claims disclosed in the Schedules and Statements may have been paid, in whole or in part, during the bankruptcy cases pursuant to the authority granted in such orders ("Paid Claims"). The Debtors have made an effort to omit certain Paid Claims from the Schedules and Statements on account of having been paid in full and are no longer outstanding liabilities. However, not every Paid Claim was omitted, and certain prepetition claims may be paid at later dates pursuant to the authority granted in such orders. The Debtors reserve all rights to modify, amend, or otherwise supplement the Schedules and Statements accordingly, and to assert any objections to any and all Paid Claims as may be appropriate. To the extent that a Paid Claim is reflected in the Schedules and Statements, such creditor is not entitled to any additional recovery and the disclosures in the Schedules and Statements pertaining to such claims are for informational purposes only. Nothing contained herein should be deemed to alter the rights of any party in interest to contest a payment made pursuant to an order of the Bankruptcy Court where such order preserves the right to contest.
- e. **Setoffs.** The Debtors routinely incur setoffs and net payments in the ordinary course of business. Setoffs in the ordinary course can result from various items including derivative transactions in connection with market risk management activities and counterparty settlements. These normal setoffs are voluminous, making it unduly burdensome and costly for the Debtors to list all normal setoffs. Therefore, although such setoffs and other similar rights have been accounted for when scheduling certain amounts, these ordinary course setoffs are not independently accounted for, and as such, have been excluded from the Schedules and Statements. The Debtors reserve all rights to challenge any setoff and/or recoupment rights that may be asserted.

5. **Specific Statement and Schedule Disclosures.**

- a. **Preference Look-back Periods.** The 90-day general preference period, and the

one-year insider preference period, were calculated based on the relevant petition date, rather than from the Order for Relief Date.

Payments made between the Involuntary Petition Date and the Order for Relief Date (“Gap Period”) have not been disclosed in the lookback disclosures because such payments were made postpetition. However, information regarding such payments is available upon request.

- b. **Gap Claims.** Outstanding liabilities of GenCanna that were incurred between the Involuntary Petition Date and the Order for Relief Date are treated as prepetition claims. However, such claims may be entitled to certain priority under section 507 of the Bankruptcy Code and accordingly are listed in the Schedules as priority claims out of an abundance of caution. All rights are reserved in that regard.
- c. **Agriculture Assets.** The Debtors holds certain agricultural assets in the form of raw hemp inventory products (“Biomass”). For the purpose of the Statement and Schedules, the Debtors consider all raw materials recorded on the Debtors books and records as agricultural assets and disclosed in Schedule Part 6. For purposes of the disclosures made in the Schedules and Statements, once inventory has moved into the processing (“Work in Process”) stage, the Debtors deem such inventory products to be non-agricultural assets and disclosed in Schedule Part 5. In making such distinction, the Debtors make no admission as to any substantive rights regarding the Biomass or the Work in Process. The distinction is made only for purposes of disclosing information responsive to the various questions posed in the Schedules and Statements.
- d. **Statement Part 2, Question 4 – Payments or Transfers to Insiders.** Insiders also received salary payments in the ordinary course of business through the Debtors’ third-party payment processor. The Debtors are in the process of compiling the details of such payments in coordination with the third-party payment processor.”
- e. **Statement Part 13, Question 28 – Controlling Shareholders.** The Debtors’ secured lender, MGG Investment Group, LP, holds warrants which are exercisable to acquire no more than approximately 12.5% of stock on a fully diluted basis. However, MGG Investment Group, LP has not exercised such warrants and does not presently own any equity interests in any of the Debtors.
- f. **Statement Part 4 – Gifts and Charitable Contributions.** Virtually all of the amounts disclosed can be described as business marketing expenses, where the Debtors made a sponsorship at relevant events in order to market their business and increase sales or to achieve some other business purpose. They are disclosed here as gifts and charitable contributions out of an abundance of caution for

purposes of disclosure. The amounts disclosed are based on the Debtors books and records within 2 years prior to the date of the Involuntary Petition Filing, January 24, 2020. Certain gifts or charitable contributions have also been paid through employee expense reimbursements

- g. **Statement Part 5 – Certain Losses.** Amounts listed were for events that were reported or tracked for insurance related claim purposes.
- h. **Schedules Part 7, Question 40 – Office Fixtures.** Hemp Kentucky LLC Leasehold Improvements were recorded on the Debtors books based on historical accounting records, but may not exist due to the lack of any real property owned or leased by the Debtor. However, the Debtor listed Leasehold Improvement amounts based on accounting records out of an abundance of caution.

Fill in this information to identify the case:

Debtor GenCanna Global USA, Inc.

United States Bankruptcy Court for the: Eastern District of Kentucky

Case number 20-50133
(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*

\$3,189,138.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*

\$206,214,129.25

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*

\$209,403,267.25

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*

\$108,069,425.33

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*

\$854,804.47

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*

+

\$79,930,791.18

4. **Total liabilities**

Lines 2 + 3a + 3b

\$188,855,020.98

Fill in this information to identify the case:

Debtor GenCanna Global USA, Inc.

United States Bankruptcy Court for the: Eastern District of Kentucky

Case number 20-50133
(if known)

☐ 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

NONE

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. BANK OF THE BLUEGRASS | CHECKING | 6792 | \$4,610.23 |
| 3.2. BANK OF THE BLUEGRASS - INVESTMENT | INVESTMENT | 2377 | \$1,127.57 |
| 3.3. CFSB - CHECKING | CHECKING | 4526 | \$626.64 |
| 3.4. CFSB - SAVINGS | SAVINGS | 8663 | \$1,005,609.35 |
| 3.5. KENTUCKY BANK | CHECKING | 5766 AND 0145 | \$450,006.35 |
| 3.6. KENTUCKY BANK - 46&2 | CHECKING | 7956 | \$2,475.07 |
| 3.7. KENTUCKY BANK - INVESTMENT | INVESTMENT | 8507 | \$950.00 |

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.

\$1,465,405.21

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 | |
|--|--|
| 7.1. | CORPORATE HOUSING - BLUEGRASS SOTHEBYS INTERNATIONAL REALTY \$1,795.00 |
| 7.2. | CORPORATE HOUSING - CHRISTA MOREAU \$300.00 |
| 7.3. | CORPORATE HOUSING - LUXE PROPERTIES LLC \$2,550.00 |
| 7.4. | LEASE - EASLEY & FOUST PROPERTIES, LLC \$5,200.00 |
| 7.5. | LEASE - GULLETT FAMILY PROPERTIES \$725.00 |
| 7.6. | LEASE - HARRY W. FARMER JR. \$2,500.00 |
| 7.7. | LEASE - REGUS MANAGEMENT GROUP LLC \$3,678.00 |
| 7.8. | UTILITIES - ATMOS ENERGY \$1,318.00 |
| 7.9. | UTILITIES - COLUMBIA GAS OF KENTUCKY \$235,267.00 |
| 7.10. | UTILITIES - MAYFIELD EWS \$6,083.92 |
| 7.11. | UTILITIES - PADUCAH POWER \$6,150.00 |
| 7.12. | UTILITIES - PADUCAH WATER \$30.00 |
| 7.13. | UTILITIES - WEST KENTUCKY RURAL ELECTRIC \$6,550.00 |

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

| DESCRIPTION, INCLUDING NAME OF HOLDER OF PREPAYMENT | |
|---|---|
| 8.1. | CONTRACT DEPOSIT - SKYLINE EXHIBITS \$50,000.00 |
| 8.2. | EQUIPMENT DEPOSIT - AMHEMP \$700,000.00 |
| 8.3. | EQUIPMENT DEPOSIT - AVTECH CAPITAL LLC \$152,187.92 |
| 8.4. | EQUIPMENT DEPOSIT - CAREDDI TECHNOLOGY CO LTD \$774,000.00 |
| 8.5. | EQUIPMENT DEPOSIT - COWHERD EQUIPMENT \$20,000.00 |
| 8.6. | EQUIPMENT DEPOSIT - HANCO PACKAGING \$41,608.50 |
| 8.7. | EQUIPMENT DEPOSIT - JENCO \$180,000.00 |
| 8.8. | EQUIPMENT DEPOSIT - JENCO INDUSTRIAL SALES & SERVICES LLC \$2,092,666.66 |
| 8.9. | EQUIPMENT DEPOSIT - LAIDIG SYSTEMS \$3,750,000.00 |
| 8.10. | EQUIPMENT DEPOSIT - LECORP \$373,352.70 |
| 8.11. | EQUIPMENT DEPOSIT - LOUISVILLE DRYER \$1,790,023.30 |
| 8.12. | EQUIPMENT DEPOSIT - QC MATERIAL HANDLING EQUIPMENT \$104,277.00 |
| 8.13. | EQUIPMENT DEPOSIT - SOUTHERN ILLINOIS SCALE AND CONSTRUCTION \$107,317.60 |
| 8.14. | EQUIPMENT DEPOSIT - THAR \$4,932,812.50 |
| 8.15. | EQUIPMENT DEPOSIT - WALLACE \$301,274.95 |
| 8.16. | EXPENSE DEPOSIT - EXPENSE DEPOSIT TO JEFFERIES \$25,000.00 |
| 8.17. | OTHER PREPAID EXPENSES - BOOMI INC \$1,200.00 |
| 8.18. | OTHER PREPAID EXPENSES - DEAN DORTON ALLEN FORD \$18,285.90 |
| 8.19. | OTHER PREPAID EXPENSES - DLL FINANCIAL \$6,874.87 |
| 8.20. | OTHER PREPAID EXPENSES - ENRIQUE L MARMILLON \$2,000.00 |
| 8.21. | OTHER PREPAID EXPENSES - LIVE SAFE \$833.37 |
| 8.22. | OTHER PREPAID EXPENSES - SALESFORCE \$8,739.00 |
| 8.23. | OTHER PREPAID EXPENSES - TAMARIND MEDIA LIMITED \$1,322.14 |
| 8.24. | PREPAID CMOS - BETTER NUTRITIONALS \$205,082.40 |
| 8.25. | PREPAID CMOS - FACE AND BODY COSMETICS \$105,707.46 |
| 8.26. | PREPAID CMOS - JRF TECHNOLOGY \$8,475.00 |
| 8.27. | PREPAID CMOS - NATURAL VITAMINS LABORATORY CORP \$103,858.25 |
| 8.28. | PREPAID CMOS - PHARMCO LABORATORIES INC. \$43,892.50 |
| 8.29. | PREPAID CMOS - ROYAL LABS NATURAL COSMETICS, INC. \$64,298.84 |
| 8.30. | PREPAID CMOS - TATAPACK \$1,800.00 |
| 8.31. | PREPAID INSURANCE - FIRST INSURANCE FUNDING \$106,494.04 |
| 8.32. | PREPAID INSURANCE - KEMI \$38,578.37 |
| 8.33. | PREPAID INSURANCE - THE CINCINNATI INSURANCE COMPANIES \$32,801.00 |
| 8.34. | PREPAID RENT - 4274 COLBY LLC \$35,000.00 |
| 8.35. | PREPAID RENT - ARLINGTON PROPERTIES \$3,870.00 |
| 8.36. | PREPAID RENT - CALL CENTER SYSTEMS LLC \$2,500.00 |
| 8.37. | PREPAID RENT - DAVID HOCKER & ASSOCIATES, INC. \$3,200.00 |
| 8.38. | PREPAID RENT - DT HOOD PROPERTIES \$775.00 |
| 8.39. | PREPAID RENT - EASLEY AND FOUST PROPERTIES \$2,400.00 |
| 8.40. | PREPAID RENT - GULLETT FAMILY PROPERTIES \$725.00 |

Current value of debtor's interest

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

DESCRIPTION, INCLUDING NAME OF HOLDER OF PREPAYMENT

| | | |
|-------|---|--------------|
| 8.41. | PREPAID RENT - HARRY W FARMER | \$2,500.00 |
| 8.42. | PREPAID RENT - SCOTT INTERESTS LP | \$16,116.25 |
| 8.43. | PREPAID RENT - THE HENRY AT FRITZ FARMS | \$82.76 |
| 8.44. | PREPAID RENT - TIERNEY STORAGE LLC | \$50,156.25 |
| 8.45. | RETAINER - RETAINER TO EPIQ | \$25,000.00 |
| 8.46. | RETAINER - RETAINER TO JEFFERIES | \$100,000.00 |

9 Total of Part 2.
ADD LINES 7 THROUGH 8. COPY THE TOTAL TO LINE 81.

\$16,659,236.45

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

| | | | | | |
|-------------------|----------------|---|------------------------------------|---|----------------|
| TRADE RECEIVABLES | \$7,272,488.08 | - | \$3,255,239.38 | = | \$4,017,248.70 |
| | 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.

\$4,017,248.70

Part 4: INVESTMENTS

13. DOES THE DEBTOR OWN ANY INVESTMENTS?

☐ No. Go to Part 5.

☒ Yes. Fill in the information below.

| | Valuation method used for current value | Current value of debtor's interest |
|--|---|------------------------------------|
|--|---|------------------------------------|

14. MUTUAL FUNDS OR PUBLICLY TRADED STOCKS NOT INCLUDED IN PART 1

NAME OF FUND OR STOCK:

NONE

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. 4274 COLBY, LLC - JOINT VENTURE | 50% | UNKNOWN | UNKNOWN |
| 15.2. FLORIDA MCB, LLC - EQUITY OWNERSHIP | UNKNOWN% | UNKNOWN | UNKNOWN |
| 15.3. HEMP KENTUCKY LLC - EQUITY OWNERSHIP | 100% | UNKNOWN | UNKNOWN |
| 15.4. VALIDCARE, LLC - CONVERTIBLE SHARES B | UNKNOWN% | BOOK VALUE | UNKNOWN |

16. GOVERNMENT BONDS, CORPORATE BONDS, AND OTHER NEGOTIABLE AND NON-NEGOTIABLE INSTRUMENTS NOT INCLUDED IN PART 1

DESCRIBE:

NONE

17 Total of Part 4.
ADD LINES 14 THROUGH 16. COPY THE TOTAL TO LINE 83.

UNKNOWN

Part 5: INVENTORY, EXCLUDING AGRICULTURE ASSETS

18. DOES THE DEBTOR OWN ANY INVENTORY (EXCLUDING AGRICULTURE ASSETS)?

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

| General description | Date of the last physical inventory | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|-------------------------------------|---|---|------------------------------------|
| 19. RAW MATERIALS NONE | | | | |
| 20. WORK IN PROGRESS | | | | |
| 20.1. WORK IN PROGRESS | 1/31/2020 | \$31,175,728.69 | COST AS OF 12/31/2019 | \$32,955,393.00 |
| 21. FINISHED GOODS, INCLUDING GOODS HELD FOR RESALE | | | | |
| 21.1. FINISHED GOODS | 1/31/2020 | \$1,909,815.50 | COST AS OF 12/31/2019 | \$1,909,815.00 |
| 22. OTHER INVENTORY OR SUPPLIES | | | | |
| 22.1. OTHER INVENTORY OR SUPPLIES | 1/31/2020 | | COST AS OF 12/31/2019 | UNKNOWN |
| 23 Total of Part 5. ADD LINES 19 THROUGH 22. COPY THE TOTAL TO LINE 84. | | | | \$34,865,208.00 |

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

- ☐ No
☒ Yes

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

- ☐ No
☒ Yes Book value Unknown Valuation method Cost Current value Unknown

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

- ☒ No
☐ Yes

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

27. DOES THE DEBTOR OWN OR LEASE ANY FARMING AND FISHING-RELATED ASSETS (OTHER THAN TITLED MOTOR VEHICLES AND LAND)?

- ☐ No. Go to Part 7.
☒ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|---|---|------------------------------------|
| 28. CROPS—EITHER PLANTED OR HARVESTED | | | |
| 28.1. CROPS | \$66,796,393.62 | COST AS OF 12/31/2019 | \$69,539,689.00 |
| 29. FARM ANIMALS <i>EXAMPLES:</i> LIVESTOCK, POULTRY, FARM-RAISED FISH NONE | | | |
| 30. FARM MACHINERY AND EQUIPMENT (OTHER THAN TITLED MOTOR VEHICLES) (OTHER THAN TITLED MOTOR VEHICLES) | | | |
| 30.1. FARMING EQUIPMENT | \$8,056,721.97 | COST - NET DEPRECIATION | \$8,056,721.97 |
| 31. FARM AND FISHING SUPPLIES, CHEMICALS, AND FEED NONE | | | |
| 32. OTHER FARMING AND FISHING-RELATED PROPERTY NOT ALREADY LISTED IN PART 6 NONE | | | |
| 33 Total of Part 6. ADD LINES 28 THROUGH 32. COPY THE TOTAL TO LINE 85. | | | \$77,596,410.97 |

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

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

☐ No
☐ Yes

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

☐ No
☒ Yes

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

☐ No
☒ Yes

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

☒ No
☐ Yes

Part 7: OFFICE FURNITURE, FIXTURES, AND EQUIPMENT; AND COLLECTIBLES

38. DOES THE DEBTOR OWN OR LEASE ANY OFFICE FURNITURE, FIXTURES, EQUIPMENT, OR COLLECTIBLES?

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

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 39. OFFICE FURNITURE | | | |
| 39.1. CORT FURNITURE | \$159,336.39 | COST - NET DEPRECIATION | \$159,336.39 |
| 40. OFFICE FIXTURES | | | |
| 40.1. LEASEHOLD IMPROVEMENTS | \$2,653,692.00 | COST - NET DEPRECIATION | \$2,653,692.00 |
| 41. OFFICE EQUIPMENT, INCLUDING ALL COMPUTER EQUIPMENT AND COMMUNICATION SYSTEMS EQUIPMENT AND SOFTWARE | | | |
| 41.1. OFFICE EQUIPMENT | \$582,493.50 | COST - NET DEPRECIATION | \$582,493.50 |
| 42. COLLECTIBLES <i>EXAMPLES:</i> 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 | | | |
| NONE | | | |
| 43 Total of Part 7. ADD LINES 39 THROUGH 42. COPY THE TOTAL TO LINE 86. | | | \$3,395,521.89 |

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 | | | |

| 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. 1996 BLUE SUBURBAN SN - VIN 3GNGC26J9TG145109 | \$1,150.08 | COST - NET DEPRECIATION | \$1,150.08 |
| 47.2. 2017 DODGE RAM 1500 SLVR - VIN 1C6RR7NT9HS522609 | \$28,806.95 | COST - NET DEPRECIATION | \$28,806.95 |
| 47.3. 2018 CHEVROLET SILVERADO 3500HD - VIN 1GB4KZCY5JF222957 | \$46,439.02 | COST - NET DEPRECIATION | \$46,439.02 |
| 47.4. 2018 CHEVROLET SLIVERADO 2500HD - VIN 1GC1KWEY2JF238317 | \$47,765.82 | COST - NET DEPRECIATION | \$47,765.82 |
| 47.5. 2018 CHEVROLET SUBURBAN LT - VIN 1GNSKHKCXJR230836 | \$40,663.02 | COST - NET DEPRECIATION | \$40,663.02 |
| 47.6. 2018 GMC SIERRA 1500 DENALI -VIN 3GTU2PEJ4JG533956 | \$54,951.30 | COST - NET DEPRECIATION | \$54,951.30 |
| 47.7. 2019 CHEVROLET SILVERADO 1500 - VIN 1GCUYAEF3KZ259383 | \$35,909.17 | COST - NET DEPRECIATION | \$35,909.17 |
| 47.8. 2019 CHEVROLET SILVERADO 1500 - VIN 1GCUYAEF5KZ256825 | \$35,909.17 | COST - NET DEPRECIATION | \$35,909.17 |
| 47.9. 2019 CHEVROLET SILVERADO 2500HD - VIN 1GC1KREYXKF140364 | \$45,896.94 | COST - NET DEPRECIATION | \$45,896.94 |
| 47.10. 2019 CHEVROLET SILVERADO 3500HD - VIN 1GB4KVCY9KF143656 | \$47,766.31 | COST - NET DEPRECIATION | \$47,766.31 |
| 47.11. 2019 FORD F250 - VIN 1FT7W2BT6KEC74051 | \$54,815.98 | COST - NET DEPRECIATION | \$54,815.98 |
| 47.12. 2019 GMC SIERRA 250 - VIN 1GT12SEY4KF108937 | \$51,070.98 | COST - NET DEPRECIATION | \$51,070.98 |
| 47.13. 2019 GMC SIERRA DENALI 4WD - MACALUSO'S TRUCK - VIN 1GT12SEY4KF108937 | \$14,455.65 | COST - NET DEPRECIATION | \$14,455.65 |
| 47.14. 2019 RAV4 SN# VIN JTMG1RFVXKJ004945 | \$26,435.96 | COST - NET DEPRECIATION | \$26,435.96 |
| 47.15. ACADIA -VIN 1GKKNULS7KZ170471 | \$29,035.07 | COST - NET DEPRECIATION | \$29,035.07 |
| 47.16. CHEVROLET SILVERADO - VIN 1GCUYHED2KZ184148 | \$54,577.66 | COST - NET DEPRECIATION | \$54,577.66 |
| 47.17. GM ACADIA - VIN IGKKNULS3KZ118528 | \$28,460.12 | COST - NET DEPRECIATION | \$28,460.12 |
| 47.18. RAV 4 - VIN JTMF1RFV8KD006154 | \$24,026.92 | COST - NET DEPRECIATION | \$24,026.92 |
| 47.19. TACOMA 4WD - VIN 3TMCZ5AN6KM216607 | \$27,261.61 | COST - NET DEPRECIATION | \$27,261.61 |
| 48. WATERCRAFT, TRAILERS, MOTORS, AND RELATED ACCESSORIES <i>EXAMPLES: BOATS, TRAILERS, MOTORS, FLOATING HOMES, PERSONAL WATERCRAFT, AND FISHING VESSELS</i> | | | |
| NONE | | | |
| 49. AIRCRAFT AND ACCESSORIES | | | |
| NONE | | | |
| 50. OTHER MACHINERY, FIXTURES, AND EQUIPMENT (EXCLUDING FARM MACHINERY AND EQUIPMENT) | | | |
| 50.1. OTHER EQUIPMENT | \$8,788,579.50 | COST - NET DEPRECIATION | \$8,788,579.50 |
| 51 Total of Part 8. ADD LINES 47 THROUGH 50. COPY THE TOTAL TO LINE 87. | | | \$9,483,977.23 |
| 52. Is a depreciation schedule available for any of the property listed in Part 8? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | | | |
| 53. Has any of the property listed in Part 8 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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. | 1075-B TWO MILE ROAD, WINCHESTER, KY 40391 | LESSEE | \$0.00 | | \$0.00 |
| 55.2. | 120 SUMMIT (120-216), LEXINGTON, KY 40517 | LESSEE | \$0.00 | | \$0.00 |
| 55.3. | 120 SUMMIT (120-313), LEXINGTON, KY 40517 | LESSEE | \$0.00 | | \$0.00 |
| 55.4. | 120 SUMMIT (120-413), LEXINGTON, KY 40517 | LESSEE | \$0.00 | | \$0.00 |
| 55.5. | 1465 WEST LEXINGTON AVE., WINCHESTER, KY 40391 | LESSEE | \$0.00 | | \$0.00 |
| 55.6. | 52,000 SQFT WAREHOUSE 18 W LEXINGTON AVENUE, WINCHESTER, KY 40391 PARCEL: 054-3213-002-00 LAND SIZE: 0.11 THREE-STORY RETAIL/RESIDENTIAL | OWNER | \$408,792.00 | SET TO NET BOOK VALUE | \$408,792.00 |
| 55.7. | 1895 CLINTONVILLE ROAD, PARIS, KY 40361 PARCEL: 028-00-00-019.00 LAND SIZE: 25.158 GREENHOUSES AND OTHER BUILDINGS USED TO PROPOGATE PLANTS | OWNER | \$3,183,929.34 | LAND VALUE PER ACRE + COST APPROACH ON IMPROVEMENTS (AT 50% DEPRECIATION) | \$1,530,000.00 |
| 55.8. | 267 & 270 N CLEVELAND RD, LEXINGTON, KY 40509 86 AND 81 ACRES, RESPECTIVELY, OF FARM LAND USED FOR GROWING HEMP | LESSEE | \$0.00 | | \$0.00 |
| 55.9. | 271 TIERNEY WAY, WINCHESTER, KY 40391 WAREHOUSE USED FOR BIOMASS AND EQUIPMENT STORAGE | LESSEE | \$0.00 | | \$0.00 |
| 55.10. | 282 TIERNEY WAY, WINCHESTER, KY 40391 WAREHOUSE USED FOR EQUIPMENT STORAGE | LESSEE | \$0.00 | | \$0.00 |
| 55.11. | 2887 BECKNERVILLE ROAD, WINCHESTER, KY 40391 | LESSEE | \$0.00 | | \$0.00 |
| 55.12. | 3011 FALL LICK ROAD, LANCASTER, KY 40444 | LESSEE | \$0.00 | | \$0.00 |
| 55.13. | 313 BROADWAY ST, PADUCAH, KYL 42001 THREE (3) APARTMENTS - TWO 1-BEDROOMS AND ONE 2-BEDROOMS | LESSEE | \$0.00 | | \$0.00 |
| 55.14. | 321 VENABLE ROAD, STE 1, WINCHESTER, KY 40391 OFFICE BUILDING - SHARED SPACE OF BASEMENT AT CORPORATE HEADQUARTERS | LESSEE | \$0.00 | | \$0.00 |
| 55.15. | 321 VENABLE ROAD, STE 2, WINCHESTER, KY 40391 OFFICE BUILDING - GENCANNA CORPORATE HEADQUARTERS | LESSEE | \$0.00 | | \$0.00 |

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 |
|---|---|---|--|---------------------------------------|
| 55.16. 322 N. 3RD STREET, PADUCAH, KY PARCEL: 112-13-20-001 / LAND SIZE: 2.80 / WAREHOUSE 327 N. 3RD STREET, PADUCAH, KY PARCEL: 112-13-15-002 / LAND SIZE: 0.69 / LAND ONLY 303 N. 3RD STREET, PADUCAH, KY PARCEL: 112-13-15-004 / LAND SIZE: 0.22 / LAND ONLY | OWNER | \$1,250,346.00 | SET TO NET BOOK VALUE AS PRICE FOR SQFT IS LOWER THAN RECENT COMPARABLE TRANSACTIONS | \$1,250,346.00 |
| 55.17. 4274 AND 4330 COLBY RD, WINCHESTER, KY 40391 BIO-MASS PROCESSING FACILITY THAT ALSO HOLDS INVENTORY AND EQUIPMENT | LESSEE | \$0.00 | | \$0.00 |
| 55.18. 462 WEST THIRD STREET, LEXINGTON, KY 40508 | LESSEE | \$0.00 | | \$0.00 |
| 55.19. 625 TECH DRIVE, WINCHESTER, KY 40391 WAREHOUSE / OFFICES | LESSEE | \$0.00 | | \$0.00 |
| 55.20. 7 LINDALE AVENUE, WINCHESTER, KY 40391 | LESSEE (VERBAL AGREEMENT) | \$0.00 | | \$0.00 |
| 55.21. HAMBURG, KY | LESSEE | \$0.00 | | \$0.00 |
| 55.22. SUBLEASE FROM ARROW - 1,778 & LEASE - 57 TILLABLE ACRES FROM 5 FARMERS NEAR SEDALIA, GRAVES COUNTY, KY | SUB-LESSEE | \$0.00 | | \$0.00 |
| 55.23. SW INTERSECTION OF US HIGHWAY 45 AND KY HIGHWAY 1276, MAYFIELD, KY 100,000 SQFT UNFINISHED PROCESSING FACILITY | LESSEE | \$0.00 | | \$0.00 |
| 55.24. WINCHESTER PLAZA SHOPPING CENTER, STE G-2, VAN METER ROAD, WINCHESTER, KY 40391 OFFICE SPACE | LESSEE | \$0.00 | | \$0.00 |
| 55.25. WINCHESTER PLAZA SHOPPING CENTER, STE H, VAN METER ROAD, WINCHESTER, KY 40391 OFFICE SPACE | LESSEE | \$0.00 | | \$0.00 |
| 55.26. WINCHESTER PLAZA SHOPPING CENTER, STE J, VAN METER ROAD, WINCHESTER, KY 40391 OFFICE SPACE | LESSEE | \$0.00 | | \$0.00 |

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.

\$3,189,138.00

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

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

Part 10: INTANGIBLES AND INTELLECTUAL PROPERTY

59. DOES THE DEBTOR HAVE ANY INTERESTS IN INTANGIBLES OR INTELLECTUAL PROPERTY?

☐ No. Go to Part 11.

☒ Yes. Fill in the information below.

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 60. PATENTS, COPYRIGHTS, TRADEMARKS, AND TRADE SECRETS | | | |
| 60.1. ASANA ORGANICS | \$18,125.00 | COST | \$18,125.00 |
| 60.2. ASANA ORGANICS | \$1,062.69 | COST | \$1,062.69 |
| 60.3. ASANA ORGANICS | \$1,062.69 | COST | \$1,062.69 |
| 60.4. BEAU BILLINGS | \$7,275.00 | COST | \$7,275.00 |
| 60.5. BEAU BILLINGS | \$7,275.00 | COST | \$7,275.00 |
| 60.6. BEAU BILLINGS | \$7,125.00 | COST | \$7,125.00 |
| 60.7. BEAU BILLINGS | \$6,975.00 | COST | \$6,975.00 |
| 60.8. BEAU BILLINGS | \$5,687.50 | COST | \$5,687.50 |
| 60.9. CANNABINOID COMPOSITIONS FOR ORAL DELIVERY | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.10. FARM TO FAMILY BRAZIL 917749960 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.11. FARM TO FAMILY ARGENTINA 3821748 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.12. FARM TO FAMILY ARGENTINA 3821750 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.13. FARM TO FAMILY ARGENTINA 3821751 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.14. FARM TO FAMILY BRAZIL 917749855 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.15. FARM TO FAMILY BRAZIL 917749898 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.16. FARM TO FAMILY ARGENTINA 3821749 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.17. FARM TO FAMILY AUSTRALIA 2003754 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.18. FARM TO FAMILY BRAZIL 917749774 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.19. FARM TO FAMILY CANADA 1957841 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.20. FARM TO FAMILY CHILE 1328599 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.21. FARM TO FAMILY CHINA TBD | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.22. FARM TO FAMILY COLOMBIA 2019-0057294 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.23. FARM TO FAMILY COLOMBIA 2019-0057294 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.24. FARM TO FAMILY COSTA RICA 2019-007221 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.25. FARM TO FAMILY EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053953 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.26. FARM TO FAMILY EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053953 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.27. FARM TO FAMILY EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053953 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.28. FARM TO FAMILY EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053953 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.29. FARM TO FAMILY EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053953 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.30. FARM TO FAMILY JAPAN 2019-055939 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.31. FARM TO FAMILY MEXICO 2230836 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.32. FARM TO FAMILY MEXICO 2230833 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.33. FARM TO FAMILY MEXICO 2230834 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.34. FARM TO FAMILY MEXICO 2230835 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.35. FARM TO FAMILY NICARAGUA 2019-001900 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.36. FARM TO FAMILY PANAMA 275054-01 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.37. FARM TO FAMILY PERU 25467 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.38. FARM TO FAMILY PERU 25467 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.39. FARM TO FAMILY PERU 25467 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.40. FARM TO FAMILY PERU 25467 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.41. FARM TO FAMILY PERU 25467 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.42. FARM TO FAMILY UNITED STATES OF AMERICA 88/388784 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.43. FARM TO FAMILY UNITED STATES OF AMERICA 88/388784 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.44. FARM TO FAMILY UNITED STATES OF AMERICA 88/388784 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.45. FARM TO FAMILY UNITED STATES OF AMERICA 88/388784 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.46. FARM TO FAMILY UNITED STATES OF AMERICA 88/388784 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.47. FARM TO FAMILY UNITED STATES OF AMERICA 88/388784 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.48. FARM TO FAMILY URUGUAY 506320 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.49. FARM TO FAMILY VENEZUELA 2019-008811 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.50. FARM TO FAMILY VENEZUELA 2019-008813 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.51. FARM TO FAMILY VENEZUELA 2019-008814 | UNKNOWN | UNKNOWN | UNKNOWN |

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 60. PATENTS, COPYRIGHTS, TRADEMARKS, AND TRADE SECRETS | | | |
| 60.52. FARM TO FAMILY VENEZUELA 2019-008815 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.53. FLORIDA GROWER'S LICENSE | \$59,709.00 | COST | \$59,709.00 |
| 60.54. GENCANNA ANNOUNCES FIRSRT PATENTABLE NON-GMO HEMP GENETICS WITH 0.0% THC | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.55. GENCANNA ANNOUNCES FIRSRT PATENTABLE NON-GMO HEMP GENETICS WITH 0.0% THC | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.56. GENCANNA ANNOUNCES FIRSRT PATENTABLE NON-GMO HEMP GENETICS WITH 0.0% THC | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.57. GENCANNA ARGENTINA 3821752 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.58. GENCANNA ARGENTINA 3821753 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.59. GENCANNA ARGENTINA 3821754 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.60. GENCANNA ARGENTINA 3821755 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.61. GENCANNA AUSTRALIA 2003753 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.62. GENCANNA BRAZIL 917750055 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.63. GENCANNA BRAZIL 917750128 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.64. GENCANNA BRAZIL 917750209 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.65. GENCANNA BRAZIL 917750284 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.66. GENCANNA CANADA 1957839 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.67. GENCANNA CHILE 1328600 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.68. GENCANNA CHINA TBD | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.69. GENCANNA COLOMBIA 2019-0057300 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.70. GENCANNA COLOMBIA 2019-0057300 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.71. GENCANNA COLOMBIA 2019-0057300 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.72. GENCANNA COSTA RICA 2019-007217 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.73. GENCANNA EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053954 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.74. GENCANNA EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053954 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.75. GENCANNA EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053954 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.76. GENCANNA EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053954 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.77. GENCANNA EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053954 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.78. GENCANNA JAPAN 2019-055941 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.79. GENCANNA LOGO ARGENTINA 3821756 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.80. GENCANNA LOGO ARGENTINA 3821757 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.81. GENCANNA LOGO ARGENTINA 3821758 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.82. GENCANNA LOGO ARGENTINA 3821759 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.83. GENCANNA LOGO BRAZIL 917749502 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.84. GENCANNA LOGO BRAZIL 917749561 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.85. GENCANNA LOGO BRAZIL 917749634 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.86. GENCANNA LOGO BRAZIL 917749707 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.87. GENCANNA LOGO CHILE 1328606 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.88. GENCANNA LOGO COLOMBIA SD2019/0057372 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.89. GENCANNA LOGO COLOMBIA SD2019/0057372 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.90. GENCANNA LOGO COSTA RICA 2019-007222 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.91. GENCANNA LOGO MEXICO 2046903 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.92. GENCANNA LOGO MEXICO 2046903 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.93. GENCANNA LOGO MEXICO 2046903 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.94. GENCANNA LOGO MEXICO 2046903 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.95. GENCANNA LOGO MEXICO 2046903 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.96. GENCANNA LOGO MEXICO 2046903 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.97. GENCANNA LOGO MEXICO 2046904 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.98. GENCANNA LOGO MEXICO 2046904 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.99. GENCANNA LOGO MEXICO 2046904 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.100. GENCANNA LOGO MEXICO 2046904 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.101. GENCANNA LOGO MEXICO 2046904 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.102. GENCANNA LOGO MEXICO 2046904 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.103. GENCANNA LOGO MEXICO 2046905 | UNKNOWN | UNKNOWN | UNKNOWN |

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 60. PATENTS, COPYRIGHTS, TRADEMARKS, AND TRADE SECRETS | | | |
| 60.104. GENCANNA LOGO MEXICO 2046905 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.105. GENCANNA LOGO MEXICO 2046905 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.106. GENCANNA LOGO MEXICO 2046905 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.107. GENCANNA LOGO MEXICO 2046905 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.108. GENCANNA LOGO MEXICO 2046905 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.109. GENCANNA LOGO MEXICO 2046906 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.110. GENCANNA LOGO MEXICO 2046906 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.111. GENCANNA LOGO MEXICO 2046906 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.112. GENCANNA LOGO MEXICO 2046906 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.113. GENCANNA LOGO MEXICO 2046906 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.114. GENCANNA LOGO MEXICO 2046906 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.115. GENCANNA LOGO NICARAGUA 2019-001901 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.116. GENCANNA LOGO PANAMA 275055-01 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.117. GENCANNA LOGO PERU 25113 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.118. GENCANNA LOGO PERU 25113 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.119. GENCANNA LOGO PERU 25113 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.120. GENCANNA LOGO PERU 25113 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.121. GENCANNA LOGO PERU 25113 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.122. GENCANNA LOGO URUGUAY 506323 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.123. GENCANNA LOGO VENEZUELA 2019-008789 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.124. GENCANNA LOGO VENEZUELA 2019-008791 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.125. GENCANNA LOGO VENEZUELA 2019-008792 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.126. GENCANNA LOGO VENEZUELA 2019-008795 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.127. GENCANNA LOGO CANADA 1962039 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.128. GENCANNA LOGO CHINA TBD | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.129. GENCANNA LOGO EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18061797 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.130. GENCANNA LOGO EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18061797 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.131. GENCANNA LOGO EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18061797 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.132. GENCANNA LOGO EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18061797 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.133. GENCANNA LOGO EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18061797 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.134. GENCANNA LOGO JAPAN 2019-067711 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.135. GENCANNA LOGO UNITED STATES OF AMERICA 88/418663 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.136. GENCANNA LOGO UNITED STATES OF AMERICA 88/418663 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.137. GENCANNA LOGO UNITED STATES OF AMERICA 88/418663 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.138. GENCANNA LOGO UNITED STATES OF AMERICA 88/418663 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.139. GENCANNA LOGO UNITED STATES OF AMERICA 88/418663 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.140. GENCANNA LOGO UNITED STATES OF AMERICA 88/418663 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.141. GENCANNA MEXICO 2228494 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.142. GENCANNA MEXICO 2228495 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.143. GENCANNA MEXICO 2228497 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.144. GENCANNA MEXICO 2228499 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.145. GENCANNA NICARAGUA 2019-001897 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.146. GENCANNA PANAMA 275051-01 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.147. GENCANNA PERU 25224 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.148. GENCANNA PERU 25224 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.149. GENCANNA PERU 25224 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.150. GENCANNA PERU 25224 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.151. GENCANNA PERU 25224 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.152. GENCANNA UNITED STATES OF AMERICA 88/407129 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.153. GENCANNA UNITED STATES OF AMERICA 88/407129 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.154. GENCANNA UNITED STATES OF AMERICA 88/407129 | UNKNOWN | UNKNOWN | UNKNOWN |

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 60. PATENTS, COPYRIGHTS, TRADEMARKS, AND TRADE SECRETS | | | |
| 60.155. GENCANNA UNITED STATES OF AMERICA 88/407129 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.156. GENCANNA UNITED STATES OF AMERICA 88/407129 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.157. GENCANNA UNITED STATES OF AMERICA 88/407129 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.158. GENCANNA URUGUAY 506322 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.159. GENCANNA VENEZUELA 2019-008812 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.160. GENCANNA VENEZUELA 2019-008821 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.161. GENCANNA VENEZUELA 2019-008822 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.162. GENCANNA VENEZUELA 2019-008823 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.163. HENRI MARMILLON | \$4,812.50 | COST | \$4,812.50 |
| 60.164. HOURGLASS HEXAGON AUSTRALIA 2007832 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.165. JEFF MONTGOMERY | \$53.30 | COST | \$53.30 |
| 60.166. OC:00 ARGENTINA 3821744 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.167. OC:00 ARGENTINA 3821745 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.168. OC:00 ARGENTINA 3821746 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.169. OC:00 ARGENTINA 3821747 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.170. OC:00 BRAZIL 917750454 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.171. OC:00 BRAZIL 917750543 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.172. OC:00 BRAZIL 917750616 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.173. OC:00 BRAZIL 917750730 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.174. OC:00 CHILE 1328601 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.175. OC:00 COLOMBIA SD2019/0057296 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.176. OC:00 COSTA RICA 2019-007218 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.177. OC:00 MEXICO 2047453 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.178. OC:00 MEXICO 2047453 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.179. OC:00 MEXICO 2047453 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.180. OC:00 MEXICO 2047453 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.181. OC:00 MEXICO 2047453 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.182. OC:00 MEXICO 2047453 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.183. OC:00 MEXICO 2047454 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.184. OC:00 MEXICO 2047454 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.185. OC:00 MEXICO 2047454 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.186. OC:00 MEXICO 2047454 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.187. OC:00 MEXICO 2047454 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.188. OC:00 MEXICO 2047454 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.189. OC:00 MEXICO 2228488 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.190. OC:00 MEXICO 228490 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.191. OC:00 NICARAGUA 2019-001899 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.192. OC:00 PANAMA 275055-01 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.193. OC:00 PERU 25108 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.194. OC:00 PERU 25108 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.195. OC:00 PERU 25108 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.196. OC:00 PERU 25108 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.197. OC:00 PERU 25108 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.198. OC:00 URUGUAY 506319 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.199. OC:00 VENEZUELA 2019-008816 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.200. OC:00 VENEZUELA 2019-008817 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.201. OC:00 VENEZUELA 2019-008824 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.202. OC:00 VENEZUELA 2019-008825 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.203. OC:00 AUSTRALIA 2003769 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.204. OC:00 CANADA 1957832 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.205. OC:00 CHINA 39925178 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.206. OC:00 EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053951 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.207. OC:00 EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053951 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.208. OC:00 EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053951 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.209. OC:00 EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053951 | UNKNOWN | UNKNOWN | UNKNOWN |

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|--|--|---|------------------------------------|
| 60. PATENTS, COPYRIGHTS, TRADEMARKS, AND TRADE SECRETS | | | |
| 60.210. OC:00 EUROPEAN UNION INTELLECTUAL PROPERTY OFFICE 18053951 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.211. OC:00 JAPAN 2019-055938 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.212. OC:00 UNITED STATES OF AMERICA 88/278865 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.213. OC:00 UNITED STATES OF AMERICA 88/278865 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.214. OC:00 UNITED STATES OF AMERICA 88/278865 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.215. OC:00 UNITED STATES OF AMERICA 88/278865 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.216. OC:00 UNITED STATES OF AMERICA 88/278865 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.217. OC:00 UNITED STATES OF AMERICA 88/278865 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.218. OUTDOOR CANNABIS VENEZUELA 2019-008818 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.219. OUTDOOR CANNABIS ARGENTINA 3821742 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.220. OUTDOOR CANNABIS ARGENTINA 3821743 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.221. OUTDOOR CANNABIS BRAZIL 917750870 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.222. OUTDOOR CANNABIS BRAZIL 917750977 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.223. OUTDOOR CANNABIS MEXICO 2230830 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.224. OUTDOOR CANNABIS VENEZUELA 2019-008819 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.225. OUTDOOR CANNABIS VENEZUELA 2019-008820 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.226. OUTDOOR CANNABIS ARGENTINA 3821740 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.227. OUTDOOR CANNABIS ARGENTINA 3821741 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.228. OUTDOOR CANNABIS AUSTRALIA 2003750 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.229. OUTDOOR CANNABIS BRAZIL 917750780 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.230. OUTDOOR CANNABIS BRAZIL 917751035 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.231. OUTDOOR CANNABIS CANADA 1957831 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.232. OUTDOOR CANNABIS CHILE 1328603 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.233. OUTDOOR CANNABIS COLOMBIA SD2019/0057293 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.234. OUTDOOR CANNABIS JAPAN 2019-055940 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.235. OUTDOOR CANNABIS MEXICO 2230828 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.236. OUTDOOR CANNABIS MEXICO 2230831 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.237. OUTDOOR CANNABIS MEXICO 2230832 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.238. OUTDOOR CANNABIS NICARAGUA 2019-001898 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.239. OUTDOOR CANNABIS PANAMA 275052-01 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.240. OUTDOOR CANNABIS PERU 804372-2019 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.241. OUTDOOR CANNABIS UNITED STATES OF AMERICA 88/278855 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.242. OUTDOOR CANNABIS UNITED STATES OF AMERICA 88/278855 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.243. OUTDOOR CANNABIS UNITED STATES OF AMERICA 88/278855 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.244. OUTDOOR CANNABIS UNITED STATES OF AMERICA 88/278855 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.245. OUTDOOR CANNABIS UNITED STATES OF AMERICA 88/278855 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.246. OUTDOOR CANNABIS UNITED STATES OF AMERICA 88/278855 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.247. OUTDOOR CANNABIS URUGUAY 506318 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.248. OUTDOOR CANNABIS VENEZUELA 2019-008893 | UNKNOWN | UNKNOWN | UNKNOWN |
| 60.249. PURPLE MESA | \$38,750.04 | COST | \$38,750.04 |
| 60.250. PURPLE MESA | \$18,958.28 | COST | \$18,958.28 |
| 60.251. SEEDS | \$191.86 | COST | \$191.86 |
| 60.252. UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION | \$15,583.16 | COST | \$15,583.16 |
| 60.253. UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION | \$15,531.41 | COST | \$15,531.41 |
| 60.254. UNIVERSITY OF KY RESEARCH FOUNDATION | \$8,678.47 | COST | \$8,678.47 |
| 60.255. UNIVERSITY OF KY RESEARCH FOUNDATION | \$8,299.37 | COST | \$8,299.37 |
| 60.256. UNIVERSITY OF KY RESEARCH FOUNDATION | \$8,298.86 | COST | \$8,298.86 |
| 60.257. UNIVERSITY OF KY RESEARCH FOUNDATION | \$8,134.53 | COST | \$8,134.53 |
| 60.258. UNIVERSITY OF KY RESEARCH FOUNDATION | \$7,477.67 | COST | \$7,477.67 |
| 60.259. UNIVERSITY OF KY RESEARCH FOUNDATION | \$7,313.33 | COST | \$7,313.33 |
| 61. INTERNET DOMAIN NAMES AND WEBSITES | | | |
| NONE | | | |

| General description | Net book value of debtor's interest (Where available) | Valuation method used for current value | Current value of debtor's interest |
|---|--|---|------------------------------------|
| 62. LICENSES, FRANCHISES, AND ROYALTIES | | | |
| 62.1. 21CFR111 (DIETARY SUPPLEMENT CERTIFICATION PENDING TECHNICAL REVIEW) | UNKNOWN | UNKNOWN | UNKNOWN |
| 62.2. FDA AUDIT FORM | UNKNOWN | UNKNOWN | UNKNOWN |
| 62.3. FDA REGISTRATION | UNKNOWN | UNKNOWN | UNKNOWN |
| 62.4. INDUSTRIAL HEMP RESEARCH PILOT PROGRAM | UNKNOWN | UNKNOWN | UNKNOWN |
| 62.5. PROCESSOR/HANDLER LICENSING AGREEMENT | UNKNOWN | UNKNOWN | UNKNOWN |
| 62.6. SHELF STABILITY APPROVAL LETTER | UNKNOWN | UNKNOWN | UNKNOWN |
| 62.7. U.S. HEMP AUTHORITY CERTIFICATION | UNKNOWN | UNKNOWN | UNKNOWN |
| 62.8. U.S. HEMP AUTHORITY CERTIFICATION | UNKNOWN | UNKNOWN | UNKNOWN |
| 63. CUSTOMER LISTS, MAILING LISTS, OR OTHER COMPILATIONS | | | |
| 63.1. CUSTOMER LISTS | UNKNOWN | UNKNOWN | UNKNOWN |
| 63.2. MAILING LISTS | UNKNOWN | UNKNOWN | UNKNOWN |
| 64. OTHER INTANGIBLES, OR INTELLECTUAL PROPERTY | | | |
| NONE | | | |
| 65. GOODWILL | | | |
| NONE | | | |
| 66 Total of Part 10. ADD LINES 60 THROUGH 65. COPY THE TOTAL TO LINE 89. | | | \$256,379.66 |
| 67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | | | |
| 68. Is there an amortization or other similar schedule available for any of the property listed in Part 10? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes | | | |
| 69. Has any of the property listed in Part 10 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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. <input type="checkbox"/> No. Go to Part 12. <input checked="" type="checkbox"/> Yes. Fill in the information below. | | | |
| | | | Current value of debtor's interest |
| 71. NOTES RECEIVABLE | | | |
| DESCRIPTION (INCLUDE NAME OF OBLIGOR) | | | |
| 4274 COLBY, LLC | \$673,779.38 | - | \$673,779.38 |
| | total face amount | doubtful or uncollectable accounts | |
| ATALO HOLDINGS, INC. - INTEREST ON NOTE RECEIVABLE | \$203,125.00 | - | \$203,125.00 |
| | total face amount | doubtful or uncollectable accounts | |
| ATALO HOLDINGS, INC. - NOTE RECEIVABLE | \$2,500,000.00 | - | \$2,500,000.00 |
| | total face amount | doubtful or uncollectable accounts | |
| ATALO HOLDINGS, INC. - RECEIVABLE FOR 4274 COLBY AMOUNTS PAID BY THE COMPANY ON ATALO'S BEHALF | \$446,416.27 | - | \$446,416.27 |
| | total face amount | doubtful or uncollectable accounts | |
| HEMP KENTUCKY LLC - NOTE RECEIVABLE | \$10,656,133.96 | - | \$10,656,133.96 |
| | total face amount | doubtful or uncollectable accounts | |
| MATTY MANGONE-MIRANDA - COMPANY PAID FOR PERSONAL HEALTH INSURANCE | \$3,849.93 | - | \$3,849.93 |
| | total face amount | doubtful or uncollectable accounts | |

71. NOTES RECEIVABLE

| DESCRIPTION (INCLUDE NAME OF OBLIGOR) | | | | |
|--|-------------------|------------------------------------|-----|--------------|
| MATTY MANGONE-MIRANDA - COMPANY PAID FOR PERSONAL TAX SERVICES | \$83,140.00 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$83,140.00 |
| MATTY MANGONE-MIRANDA - INTEREST ON NOTE RECEIVABLE | \$3,996.83.00 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$3,996.83 |
| MATTY MANGONE-MIRANDA - NOTE RECEIVABLE | \$23,0000.00 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$230,000.00 |
| NEGATIVE AP - VENDOR:BOTTLE BARONS LLC | \$14,760.00 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$14,760.00 |
| NEGATIVE AP - VENDOR:CONN FARMS | \$50,000.00 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$50,000.00 |
| NEGATIVE AP - VENDOR:FACE AND BODY COSMETICS | \$22,097.02 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$22,097.02 |
| NEGATIVE AP - VENDOR:FASTENAL | \$501.34 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$501.34 |
| NEGATIVE AP - VENDOR:KAI SU | \$4,500.00 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$4,500.00 |
| NEGATIVE AP - VENDOR:KENTUCKY STATE TREASURER | \$36,000.00 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$36,000.00 |
| NEGATIVE AP - VENDOR:PCE AMERICAS INC. | \$3,149.00 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$3,149.00 |
| NEGATIVE AP - VENDOR:RNA CORPORATION | \$7,821.40 | | | |
| | total face amount | doubtful or uncollectable accounts | = ➔ | \$7,821.40 |
| SOUTHERN TIER HEMP LLC - FOR EXPENSES PAID ON BEHALF OF STH TO VARIOUS VENDORS | \$3,363,964.26 | \$3,363,964.26 | = ➔ | \$0.00 |
| | total face amount | doubtful or uncollectable accounts | | |
| SOUTHERN TIER HEMP LLC - INTEREST ON NOTE RECEIVABLE | \$32,869.00 | \$32,869.00 | = ➔ | \$0.00 |
| | total face amount | doubtful or uncollectable accounts | | |
| SOUTHERN TIER HEMP LLC - NOTE RECEIVABLE | \$750,000.00 | \$750,000.00 | = ➔ | \$0.00 |
| | total face amount | doubtful or uncollectable accounts | | |

72. TAX REFUNDS AND UNUSED NET OPERATING LOSSES (NOLS)

| DESCRIPTION (FOR EXAMPLE, FEDERAL, STATE, LOCAL) | | | | |
|--|--|---------------|--|----------------|
| 2018 DEFERRED TAX ASSETS | | Tax year 2018 | | \$1,464,818.00 |
| 2019 DEFERRED TAX ASSETS | | Tax year 2019 | | UNKNOWN |

73. INTERESTS IN INSURANCE POLICIES OR ANNUITIES

NONE

74. CAUSES OF ACTION AGAINST THIRD PARTIES (WHETHER OR NOT A LAWSUIT HAS BEEN FILED)

| | | | |
|---|--------------------|--|---------|
| Nature of claim | BREACH OF CONTRACT | | |
| Amount requested | \$2.2MM | | |
| CASE NO. 5:19-CV-00387-DCR: JENCO PROMISED TO PROVIDE GENCANNA WITH EQUIPMENT. GENCANNA HAS MADE OVER \$2.2MM IN PAYMENTS WHILE JENCO AS FAILED TO DELIVER ANY FUNCTIONAL UNIT. | | | UNKNOWN |
| Nature of claim | DAMAGES | | |
| Amount requested | \$67,500.00 | | |
| GENCANNA CONTRACTED IMMACULATE FLOORING TO INSTALL FLOORING. DUE TO IMMACULATE'S NEGLIGENCE, GENCANNA WAS FORCED TO HALT PRODUCTION FOR ALMOST TWO DAYS. | | | UNKNOWN |
| Nature of claim | BREACH OF CONTRACT | | |
| Amount requested | \$1.1MM | | |
| GENCANNA PROVIDED PRODUCT FOR FREYHERR THAT FREYHERR HAS BEEN UNABLE TO PAY FOR. | | | UNKNOWN |
| Nature of claim | BREACH OF CONTRACT | | |
| Amount requested | UNKNOWN | | |
| JAMS REF. NO. 1425027783: GENCANNA IS PART OF A JOINT VENTURE, FLORIDA MCBBD, LLC INVOLVING SUNBULB. SUN BULB DID NOT PREFORM THEIR OBLIGATIONS TO THE JV. | | | UNKNOWN |

| | | Current value of debtor's interest |
|---|--------------------|------------------------------------|
| 74. CAUSES OF ACTION AGAINST THIRD PARTIES (WHETHER OR NOT A LAWSUIT HAS BEEN FILED) | | |
| Nature of claim | BREACH OF CONTRACT | |
| Amount requested | \$921,349.00 | |
| ORKEL AGREED TO SELL GENCANNA TWO BALERS. ORKEL HAS FAILED TO DELIVER THE BALERS. | | UNKNOWN |
| 75. OTHER CONTINGENT AND UNLIQUIDATED CLAIMS OR CAUSES OF ACTION OF EVERY NATURE, INCLUDING COUNTERCLAIMS OF THE DEBTOR AND RIGHTS TO SET OFF CLAIMS | | |
| Nature of claim | BREACH OF CONTRACT | |
| Amount requested | | |
| 19-CI-223: FURNWOOD FARM FILED SUIT AGAINST GENCANNA. IN NOVEMBER 2019 A EMERGENCY ARBITRATION ORDER WAS GRANTED ON BEHALF OF GENCANNA ORDERING FURNWOOD TO HARVEST THE MATERIAL AND DELIVER ALL BIOMASS. | | \$245,000.00 |
| Nature of claim | DAMAGES | |
| Amount requested | \$67,500.00 | |
| GENCANNA CONTRACTED IMMACULATE FLOORING TO INSTALL FLOORING. DUE TO IMMACULATE'S NEGLIGENCE, GENCANNA WAS FORCED TO HALT PRODUCTION FOR ALMOST TWO DAYS. | | UNKNOWN |
| 76. TRUSTS, EQUITABLE OR FUTURE INTERESTS IN PROPERTY | | |
| NONE | | |
| 77. OTHER PROPERTY OF ANY KIND NOT ALREADY LISTED <i>EXAMPLES: SEASON TICKETS, COUNTRY CLUB MEMBERSHIP</i> | | |
| CERTAIN EQUIPMENT AND SUPPLIES LOCATED AT PADUCAH FACILITY THAT MAY NOT HAVE BEEN RECORDED INTO FIXED ASSETS | | UNKNOWN |
| CONSTRUCTION IN PROGRESS - 3DELTA INC | | \$100,000.00 |
| CONSTRUCTION IN PROGRESS - AIR TECHNOLOGIES | | \$242,377.15 |
| CONSTRUCTION IN PROGRESS - AMHEMP | | \$200,000.00 |
| CONSTRUCTION IN PROGRESS - B/R INSTRUMENT CORPORATION | | \$20,800.00 |
| CONSTRUCTION IN PROGRESS - BACON FARMER WORKMAN | | \$20,268.00 |
| CONSTRUCTION IN PROGRESS - CAYCE MILL SUPPLY | | \$153,882.34 |
| CONSTRUCTION IN PROGRESS - CHEMTREAT | | \$18,004.80 |
| CONSTRUCTION IN PROGRESS - DIAMOND FOREST RESOURCES | | \$2,000.00 |
| CONSTRUCTION IN PROGRESS - FIREFLY NA | | \$146,042.40 |
| CONSTRUCTION IN PROGRESS - GEBR. KNOLL | | \$32,500.00 |
| CONSTRUCTION IN PROGRESS - GOWEIL | | \$357,355.25 |
| CONSTRUCTION IN PROGRESS - GRAVES COUNTY ECONOMIC DEVELOPMENT INC | | \$50,000.00 |
| CONSTRUCTION IN PROGRESS - HIGH QUALITY COLLISON CENTER | | \$5,600.00 |
| CONSTRUCTION IN PROGRESS - KICE INDUSTRIES INC | | \$40,185.00 |
| CONSTRUCTION IN PROGRESS - LECORP | | \$48,389.00 |
| CONSTRUCTION IN PROGRESS - MASON TECHNOLOGIES, INC. | | \$477,747.50 |
| CONSTRUCTION IN PROGRESS - MATTINGLY SILO INC. | | \$47,262.43 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - AUTHORIZED GRAIN SERVICE, LLC | | \$1,600.00 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - BACON FARMER WORKMAN | | \$28,348.25 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - BLACK DIAMOND | | \$28,558.75 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - CFBS | | \$3,669,152.06 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - CHEMTREAT | | \$9,045.89 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - CIP - NETS TO ZERO | | \$10,191.25 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - CRAWFORD DOOR AND LOCK | | \$246,575.00 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - CSE BLISS MANUFACTURING | | \$177,840.84 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - DCL | | \$48,472.80 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - DEAN DORTON ALLEN FORD | | \$316,902.33 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - INDUSTRIAL AUTHORITY OF MAYFIELD-GRAVES COUNTY | | \$5,301,079.68 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - J. SMITH LANIER | | \$10,138.14 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - KENTUCKY STATE TREASURER | | \$19,850.15 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - KICE INDUSTRIES INC | | \$2,374,000.00 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - LAIDIG | | \$152,950.00 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - LECORP | | \$495,327.30 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - LOUISVILLE DRYER COMPANY | | \$1,491,098.00 |

Current value of
debtor's interest

77. OTHER PROPERTY OF ANY KIND NOT ALREADY LISTED *EXAMPLES:* SEASON TICKETS, COUNTRY CLUB MEMBERSHIP

| | |
|--|-----------------|
| CONSTRUCTION IN PROGRESS - MAYFIELD - MASON TECHNOLOGIES, INC. | \$32,500.00 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - MAYFIELD START UP EXPENSES | \$304,105.69 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - PAC-VAN | \$700.00 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - PINNACLE, INC | \$20,061,658.91 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - POWER EQUIPMENT COMPANY OF MEMPHIS | \$325,688.96 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - ROTEX GLOBAL | \$800,698.00 |
| CONSTRUCTION IN PROGRESS - MAYFIELD - WALLACE ELECTRICAL SYSTEMS, LLC | \$531,428.92 |
| CONSTRUCTION IN PROGRESS - NORTHERN TOOL AND EQUIPMENT | \$459.98 |
| CONSTRUCTION IN PROGRESS - PADUCAH - CFBS | \$1,250,346.00 |
| CONSTRUCTION IN PROGRESS - PADUCAH - I5 DESIGN | \$8,964.00 |
| CONSTRUCTION IN PROGRESS - PADUCAH - PADUCAH START UP EXPENSES | \$21,097.13 |
| CONSTRUCTION IN PROGRESS - PINNACLE, INC | \$60,008.97 |
| CONSTRUCTION IN PROGRESS - POPE SCIENTIFIC INC. | \$3,000.00 |
| CONSTRUCTION IN PROGRESS - QC MATERIAL HANDLING EQUIPMENT | \$64,120.38 |
| CONSTRUCTION IN PROGRESS - RFSMART | \$113,578.63 |
| CONSTRUCTION IN PROGRESS - ROOT SCIENCES | \$10,360.89 |
| CONSTRUCTION IN PROGRESS - SRM CONCRETE | \$25,483.00 |
| CONSTRUCTION IN PROGRESS - THOMPSON CONSTRUCTION | \$1,465,496.56 |
| CONSTRUCTION IN PROGRESS - TRIANGLE | \$13,857.00 |
| CONSTRUCTION IN PROGRESS - WALLACE ELECTRICAL SYSTEMS, LLC | \$375,375.13 |
| CONSTRUCTION IN PROGRESS - WILLIAMS SCOTSMAN, INC. | \$13,180.55 |

78 Total of Part 11.
ADD LINES 71 THROUGH 77. COPY THE TOTAL TO LINE 90.

\$58,474,741.14

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

- ☒ No
☐ Yes

Part 12: Summary

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

| Type of property | Current value of personal property | Current value of real property |
|--|---------------------------------------|-----------------------------------|
| 80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i> | \$1,465,405.21 | |
| 81. Deposits and prepayments. <i>Copy line 9, Part 2.</i> | \$16,659,236.45 | |
| 82. Accounts receivable. <i>Copy line 12, Part 3.</i> | \$4,017,248.70 | |
| 83. Investments. <i>Copy line 17, Part 4.</i> | UNKNOWN | |
| 84. Inventory. <i>Copy line 23, Part 5.</i> | \$34,865,208.00 | |
| 85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i> | \$77,596,410.97 | |
| 86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i> | \$3,395,521.89 | |
| 87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i> | \$9,483,977.23 | |
| 88. Real property. <i>Copy line 56, Part 9.</i> ➔ | | \$3,189,138.00 |
| 89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i> | \$256,379.66 | |

| | | | |
|--|---|-----------------------------|-------------------------------|
| 90. All other assets. Copy line 78, Part 11. | + | \$58,474,741.14 | |
| 91. Total. Add lines 80 through 90 for each column. 91a. | | <div>\$206,214,129.25</div> | 91b <div>\$3,189,138.00</div> |
| 92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. | | | <div>\$209,403,267.25</div> |

Fill in this information to identify the case:

Debtor

GenCanna Global USA, Inc.

United States Bankruptcy Court for the:

Eastern District of Kentucky

Case number
(if known)

20-50133

☐ 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. 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 Amount of claim <i>Do not deduct the value of collateral.</i> | Column B Value of collateral that supports this claim |
|-----|---|--|--|
| 2.1 | <div><div>Creditor's name</div><div>ALLY</div><div>Creditor's mailing address</div><div>PO BOX 380902 BLOOMINGTON, MN 55438-0902</div><div>Creditor's email address</div><div>Date or dates debt was incurred</div><div>5/1/2019</div><div>Last 4 digits of account number: 4000</div><div>Do multiple creditors have an interest in the same property?</div><div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div></div> | <div><div>Describe debtor's property that is subject to a lien</div><div>VEHICLE SUBJECT OF THE LEASE</div><div>Describe the lien</div><div>AUTO LOAN</div><div>Is the creditor an insider or related party?</div><div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div><div>Is anyone else liable on this claim?</div><div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div><div>As of the petition filing date, the claim is: <i>Check all that apply.</i></div><div><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</div></div> | <div>\$27,413.26</div> <div>UNKNOWN</div> |
| 2.2 | <div><div>Creditor's name</div><div>ARROW FARMS, LLC</div><div>Creditor's mailing address</div><div>ATTN: CHRIS PETTY 8255 OLD LOVELACEVILLE ROAD PADUCAH, KY 42001</div><div>Creditor's email address</div><div>Date or dates debt was incurred</div><div>8/29/2019</div><div>Last 4 digits of account number: 6060</div><div>Do multiple creditors have an interest in the same property?</div><div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div></div> | <div><div>Describe debtor's property that is subject to a lien</div><div>FARMING EQUIPMENT</div><div>Describe the lien</div><div>CAPITAL LEASE AGREEMENT</div><div>Is the creditor an insider or related party?</div><div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div><div>Is anyone else liable on this claim?</div><div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div><div>As of the petition filing date, the claim is: <i>Check all that apply.</i></div><div><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</div></div> | <div>\$6,535,296.00</div> <div>UNKNOWN</div> |

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 | Creditor's name AVT - KENTUCKY LP Creditor's mailing address 6995 UNION PARK CENTER, SUITE 400 COTTONWOOD HEIGHTS, UT 84047 Creditor's email address Date or dates debt was incurred 3/5/2019 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien PROPERTY SUBJECT OF THE LIEN Describe the lien FINANCING STATEMENT Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | UNKNOWN |
| 2.4 | Creditor's name AVTECH CAPITAL, LLC Creditor's mailing address 6995 UNION PARK CENTER COTTONWOOD HEIGHTS, UT 84047 Creditor's email address Date or dates debt was incurred VARIOUS Last 4 digits of account number: 1002 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien EQUIPMENT SUBJECT OF THE PURCHASE AGREEMENT Describe the lien EQUIPMENT PURCHASE Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$5,689,694.53 | UNKNOWN |
| 2.5 | Creditor's name CENTRAL BANK & TRUST CO. Creditor's mailing address PO BOX 1360 LEXINGTON, KY 40588-1360 Creditor's email address Date or dates debt was incurred 1/1/2019 Last 4 digits of account number: 5010 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien CERTAIN OF DEBTOR'S PROPERTY Describe the lien MORTGAGE Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$263,018.44 | 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 | Creditor's name COMMUNITY FINANCIAL SERVICES BANK Creditor's mailing address Creditor's email address Date or dates debt was incurred 11/1/2018 Last 4 digits of account number: 5000 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien CERTAIN OF DEBTOR'S PROPERTY Describe the lien PROPERTY LEASE Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$911,798.35 | UNKNOWN |
| 2.7 | Creditor's name DE LAGE LANDEN FINANCIAL SERVICES INC Creditor's mailing address 1111 OLD EAGLE SCHOOL ROAD WAYNE, PA 19087 Creditor's email address Date or dates debt was incurred 9/13/2019 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien PROPERTY SUBJECT OF THE CONTRACT Describe the lien FINANCING STATEMENT Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | UNKNOWN |
| 2.8 | Creditor's name DE LAGE LANDEN FINANCIAL SERVICES, INC. Creditor's mailing address 1111 OLD EAGLE SCHOOL ROAD WAYNE, PA 19087-1453 Creditor's email address Date or dates debt was incurred 10/1/2019 Last 4 digits of account number: 6070 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien EQUIPMENT SUBJECT OF THE LOAN Describe the lien EQUIPMENT LOAN Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$185,870.82 | 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 | Creditor's name DORAL CORPORATION Creditor's mailing address 427 EAST STEWART STREET MILWAUKEE, WI 53207 Creditor's email address Date or dates debt was incurred 4/5/2019 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien PROPERTY SUBJECT OF THE LIEN Describe the lien MECHANIC'S LIEN Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | UNKNOWN |
| 2.10 | Creditor's name DT2019-2 (A DELAWARE STATUTORY TRUST) Creditor's mailing address C/O LORD SECURITIES CORP 48 WALL STREET, 27TH FLOOR NEW YORK, NY 10005 Creditor's email address Date or dates debt was incurred 11/22/2019 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien EQUIPMENT / ASSETS / PROPERTY SUBJECT OF THE AGREEMENT Describe the lien FINANCING STATEMENT Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | UNKNOWN |
| 2.11 | Creditor's name DT2019-2, LORD SECURITIES CORPORATION Creditor's mailing address ADMINISTRATIVE TRUSTEE 48 WALL STREET, 27TH FLOOR NEW YORK, NY 10005 Creditor's email address Date or dates debt was incurred 8/7/2019 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien PROPERTY SUBJECT OF THE LIEN Describe the lien UCC LIEN Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | 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 | <p>Creditor's name GRAVES COUNTY ECONOMIC DEPARTMENT, INC.</p> <p>Creditor's mailing address 2012 E. COLLEGE STREET MAYFIELD, KY 42066</p> <p>Creditor's email address</p> <p>Date or dates debt was incurred 9/1/2019</p> <p>Last 4 digits of account number: 6080</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Describe debtor's property that is subject to a lien CERTAIN OF DEBTOR'S PROPERTY</p> <p>Describe the lien PROPERTY LEASE</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> | \$899,620.45 | UNKNOWN |
| 2.13 | <p>Creditor's name IJARAH 2.0 TRUST 2019-1 (A DELAWARE STATUTORY TRUST)</p> <p>Creditor's mailing address C/O LORD SECURITIES CORP 48 WALL STREET, 27TH FLOOR NEW YORK, NY 10005</p> <p>Creditor's email address</p> <p>Date or dates debt was incurred 11/22/2019</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Describe debtor's property that is subject to a lien EQUIPMENT / ASSETS / PROPERTY SUBJECT OF THE AGREEMENT</p> <p>Describe the lien FINANCING STATEMENT</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> | UNKNOWN | UNKNOWN |
| 2.14 | <p>Creditor's name IJARAH 2.0 TRUST 2019-1, LORD SECURITIES CORPORATION</p> <p>Creditor's mailing address TRUSTEE 48 WALL STREET, 27TH FLOOR NEW YORK, NY 10005</p> <p>Creditor's email address</p> <p>Date or dates debt was incurred 8/15/2019</p> <p>Last 4 digits of account number:</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> | <p>Describe debtor's property that is subject to a lien PROPERTY SUBJECT OF THE LIEN</p> <p>Describe the lien UCC LIEN</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> | UNKNOWN | 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 | Creditor's name INDUSTRIAL AUTHORITY OF MAYFIELD-GRAVES COUNTY Creditor's mailing address ATTN: RYAN DRANE 201 E COLLEGE ST MAYFIELD, KY 42066-2728 Creditor's email address Date or dates debt was incurred VARIOUS Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien EQUIPMENT / ASSETS / PROPERTY SUBJECT OF THE LIEN Describe the lien CONTRUCTION LIENS Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$3,552,195.60 | UNKNOWN |
| 2.16 | Creditor's name INTEGRITY / ARCHITECHTURE PLLC Creditor's mailing address 2414 PALUMBO DR., STE 125 LEXINGTON, KY 40509 Creditor's email address Date or dates debt was incurred 12/16/2019 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien GENCANNA - WINCHESTER DRYING FACILITY LOCATED 285 TIERNEY WAY, WINCHESTER, KY 40391; SEE DEED BOOK 506, PAGE 493, CLARK COUNTY CLERK'S OFFICE Describe the lien MECHANIC'S LIEN Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | UNKNOWN |
| 2.17 | Creditor's name INTEGRITY ARCHITECTURE, PLLC Creditor's mailing address 2414 PALUMBO DRIVE, SUITE 125 LEXINGTON, KY 40509 Creditor's email address Date or dates debt was incurred VARIOUS Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien EQUIPMENT / ASSETS / PROPERTY Describe the lien CONTRUCTION LIENS Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$321,862.02 | 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 | Creditor's name INVISON-COMCORCO FLOORING Creditor's mailing address 11341 DECIMAL DR LOUISVILLE, KY 40299 Creditor's email address Date or dates debt was incurred 11/25/2019 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien PROPERTY SUBJECT OF THE LIEN Describe the lien MECHANIC'S LIEN Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | UNKNOWN |
| 2.19 | Creditor's name KENTUCKY BANK Creditor's mailing address 360 EAST VINE STREET SUITE 100 LEXINGTON, KY 40507 Creditor's email address Date or dates debt was incurred 5/1/2019 Last 4 digits of account number: 6020 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien CERTAIN OF DEBTOR'S PROPERTY Describe the lien LAND LOAN Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$1,823,101.80 | UNKNOWN |
| 2.20 | Creditor's name MGG INVESTMENT GROUP Creditor's mailing address ONE PENN PLAZA 53RD FLOOR NEW YORK, NY 10119 Creditor's email address Date or dates debt was incurred VARIOUS Last 4 digits of account number: 6050 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien ALL ASSETS Describe the lien BANK LOAN Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | \$65,282,390.01 | 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 | |
|------|---|---|--|---------|
| 2.21 | Creditor's name MGG INVESTMENT GROUP LP Creditor's mailing address AS COLLATERAL AGENT ONE PENN PLAZA, 53RD FLOOR NEW YORK, NY 10119 Creditor's email address Date or dates debt was incurred 6/24/2019 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien SUBSTANTIALLY ALL ASSETS Describe the lien FINANCING STATEMENT Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed | UNKNOWN | UNKNOWN |
| 2.22 | Creditor's name PINNACLE, INC Creditor's mailing address ATTN: DENNIS SMITH PO BOX 352 BENTON, KY 42025 Creditor's email address Date or dates debt was incurred VARIOUS Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien EQUIPMENT / ASSETS / PROPERTY SUBJECT OF THE LIEN Describe the lien CONTRUCTION LIENS Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$14,253,463.25 | UNKNOWN |
| 2.23 | Creditor's name SMYRNA READY MIX LLC Creditor's mailing address 1136 2ND AVE N NASHVILLE, TN Creditor's email address Date or dates debt was incurred 1/31/2020 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien PROPERTY SUBJECT OF THE LIEN Describe the lien MECHANIC'S LIEN Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | 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 | |
|------|---|--|--|---------|
| 2.24 | Creditor's name SQN ASSET INCOME FUND V LP Creditor's mailing address 100 ARBORETUM DRIVE, SUITE 105 PORTSMOUTH, NH Creditor's email address Date or dates debt was incurred 6/3/2019 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien EQUIPMENT SUBJECT OF THE AGREEMENT Describe the lien FINANCING STATEMENT Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | UNKNOWN |
| 2.25 | Creditor's name SQN ASSET INCOME FUND V, L.P. Creditor's mailing address 115 HOUZE RD. STE. 150 ROSWELL, GA 30076 Creditor's email address Date or dates debt was incurred 6/1/2019 Last 4 digits of account number: 1001 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien EQUIPMENT SUBJECT OF THE PURCHASE AGREEMENT Describe the lien EQUIPMENT PURCHASE Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$3,332,208.51 | UNKNOWN |
| 2.26 | Creditor's name THOMPSON CONSTRUCTION Creditor's mailing address ATTN: HOOTIE THOMPSON 800 KY HWY 801 NORTH MOREHEAD, KY 40351 Creditor's email address Date or dates debt was incurred VARIOUS Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien PROPERTY SUBJECT OF THE LIEN Describe the lien CONTRUCTION LIENS Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$2,794,293.96 | 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 | |
|------|---|---|--|---------|
| 2.27 | Creditor's name THOMPSON CONSTRUCTION - ACCRUAL Creditor's mailing address ATTN: HOOTIE THOMPSON 800 KY HWY 801 NORTH MOREHEAD, KY 40351 Creditor's email address Date or dates debt was incurred VARIOUS Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien PROPERTY SUBJECT OF THE LIEN Describe the lien CONSTRUCTION LIENS Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$1,163,865.00 | UNKNOWN |
| 2.28 | Creditor's name TOYOTA INDUSTRIES COMMERCIAL FINANCE INC Creditor's mailing address PO BOX 9050 DALLAS, TX Creditor's email address Date or dates debt was incurred 10/28/2016 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien ONE (1) TOYOTA FORKLIFT MODEL #8FGU25 SERIAL #76144 Describe the lien FINANCING STATEMENT Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | UNKNOWN |
| 2.29 | Creditor's name WHAYNE SUPPLY COMPANY Creditor's mailing address PO BOX 35900 LOUISVILLE, KY Creditor's email address Date or dates debt was incurred 9/26/2019 Last 4 digits of account number: Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien 1 CATERPILLAR 262D SKID STEER LOADER, SERIAL NUMBER DTB10218 WITH THE FOLLOWING ATTACHMENT: -1 CATERPILLAR SSL 80' BUCKET, SERIAL NUMBER A4187BK22138 ET AL., Describe the lien LEASE Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | UNKNOWN | UNKNOWN |

Part 1: Additional Page

| | | | Column A | Column B |
|------|--|--|---|--|
| | | | Amount of claim | Value of collateral that supports this claim |
| | | | <i>Do not deduct the value of collateral.</i> | |
| 2.30 | Creditor's name WILLIAM AND CINDY LOU SOUTHERLAND Creditor's mailing address SOUTHERLANDS GREENHOUSE 1895 CLINTONVILLE RD PARIS, KY 40361 Creditor's email address Date or dates debt was incurred 5/1/2019 Last 4 digits of account number: 6025 Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | Describe debtor's property that is subject to a lien CERTAIN OF DEBTOR'S PROPERTY Describe the lien LAND LOAN Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed | \$1,033,333.33 | UNKNOWN |
| 3. | Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. | | \$108,069,425.33 | |

Fill in this information to identify the case:

Debtor

GenCanna Global USA, Inc.

United States Bankruptcy Court for the:

Eastern District of Kentucky

Case number
(if known)

20-50133

☐ 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 | <div><div>Priority creditor's name and mailing address</div><div>ADAIR, MICHAEL H. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391</div><div>Date or dates debt was incurred</div><div>VARIOUS</div><div>Last 4 digits of account number:</div><div>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</div></div> <div><div>As of the petition filing date, the claim is:</div><div>Check all that apply.</div><div><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</div><div>Basis for the claim:</div><div>EMPLOYEE COMPENSATION</div><div>Is the claim subject to offset?</div><div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div></div> | \$1,923.08 | \$1,923.08 |
| 2.2 | <div><div>Priority creditor's name and mailing address</div><div>ADAM ROBINSON 4193 COPPER CREEK RD BEREA, KY 40403</div><div>Date or dates debt was incurred</div><div>VARIOUS</div><div>Last 4 digits of account number:</div><div>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6)</div></div> <div><div>As of the petition filing date, the claim is:</div><div>Check all that apply.</div><div><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</div><div>Basis for the claim:</div><div>FARMER</div><div>Is the claim subject to offset?</div><div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div></div> | \$105,000.00 | \$6,750.00 |
| 2.3 | <div><div>Priority creditor's name and mailing address</div><div>ADAMS, CHRISTOPHER T. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391</div><div>Date or dates debt was incurred</div><div>VARIOUS</div><div>Last 4 digits of account number:</div><div>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</div></div> <div><div>As of the petition filing date, the claim is:</div><div>Check all that apply.</div><div><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</div><div>Basis for the claim:</div><div>EMPLOYEE COMPENSATION</div><div>Is the claim subject to offset?</div><div><input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</div></div> | \$1,153.85 | \$1,153.85 |

Part 1: Additional Page

| | | Total claim | Priority amount |
|-----|--|--|--|
| 2.4 | Priority creditor's name and mailing address AFSHAR, YASAMIN A. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,019.23 \$2,019.23 |
| 2.5 | Priority creditor's name and mailing address ALAN CALDERON 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$18,870.18 \$13,650.00 |
| 2.6 | Priority creditor's name and mailing address ALLEN, SKYLER 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,600.00 \$1,600.00 |
| 2.7 | Priority creditor's name and mailing address ALLES, GREG 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,692.00 \$3,692.00 |
| 2.8 | Priority creditor's name and mailing address ANDREW STUBBS 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,923.07 \$6,923.07 |

Part 1: Additional Page

| | | Total claim | Priority amount | |
|------|---|--|-----------------|------------|
| 2.9 | Priority creditor's name and mailing address ANGEL, TYLER S. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$836.00 | \$836.00 |
| 2.10 | Priority creditor's name and mailing address ARRIETA, AITOR 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,587.92 | \$7,587.92 |
| 2.11 | Priority creditor's name and mailing address AUSTIN TUDOR 8968 RICHMOND ROAD PAINT LICK, KY 40461 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$108,000.00 | \$6,750.00 |
| 2.12 | Priority creditor's name and mailing address BAIN, GARRETT 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,264.13 | \$7,264.13 |
| 2.13 | Priority creditor's name and mailing address BAIN, SONYA K. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,846.15 | \$1,846.15 |

Part 1: Additional Page

| | | Total claim | Priority amount |
|------|--|--|---|
| 2.14 | Priority creditor's name and mailing address BALLARD, JOHN S. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,038.47 \$4,038.47 |
| 2.15 | Priority creditor's name and mailing address BARNETT, BRIAN D. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,790.47 \$1,790.47 |
| 2.16 | Priority creditor's name and mailing address BARRETT, MICHAEL 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,821.09 \$6,821.09 |
| 2.17 | Priority creditor's name and mailing address BARRY HOPEWELL 820 MILLER DEAN ROAD SALVISA, KY 40372 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$73,500.00 \$6,750.00 |
| 2.18 | Priority creditor's name and mailing address BENNETT- COLOMBE, TONYA M. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$132.00 \$132.00 |

Part 1: Additional Page

| | | Total claim | Priority amount |
|------|--|--|--|
| 2.19 | Priority creditor's name and mailing address BENNETT, KELLI 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,961.54 \$2,961.54 |
| 2.20 | Priority creditor's name and mailing address BENNETT-COLOMBE, TONYA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$42.34 \$42.34 |
| 2.21 | Priority creditor's name and mailing address BENNY WEBB 4140 COMBS FERRY RD WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$448,000.00 \$6,750.00 |
| 2.22 | Priority creditor's name and mailing address BETSY SHACKELFORD 321 KIRKSVILLE ROAD RICHMOND, KY 40475 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$92,625.00 \$6,750.00 |
| 2.23 | Priority creditor's name and mailing address BICKLEY, AMY N. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,211.54 \$1,211.54 |

Part 1: Additional Page

| | | | Total claim | Priority amount |
|------|--|---|--------------|-----------------|
| 2.24 | Priority creditor's name and mailing address BRAD MATHIS 330 CRESTON RD MELBER, KY 42069 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$403,750.00 | \$6,750.00 |
| 2.25 | Priority creditor's name and mailing address BRAD WIGGINS 417 STATE ROUTE 83 MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$704,000.00 | \$6,750.00 |
| 2.26 | Priority creditor's name and mailing address BRADLEY LEAGUE 510 RAY WAY LANCASTER, KY 40444 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$57,750.00 | \$6,750.00 |
| 2.27 | Priority creditor's name and mailing address BRANDON MORGUSON 2441 FRANKS WAY LEXINGTON, KY 40509 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$115,500.00 | \$6,750.00 |
| 2.28 | Priority creditor's name and mailing address BRENT SHULTZ 1265 STATE ROUTE 1890 MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$764,500.00 | \$6,750.00 |

Part 1: Additional Page

| | | Total claim | Priority amount |
|------|--|--|--|
| 2.29 | Priority creditor's name and mailing address BRETT E. GOLDMAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$19,500.00 \$13,650.00 |
| 2.30 | Priority creditor's name and mailing address BRETT J. GOLDMAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,258.67 \$9,258.67 |
| 2.31 | Priority creditor's name and mailing address BRYAN D SPILLMAN 2330 GARDNERSVILLE RD CRITTENDEN, KY 41030 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$213,500.00 \$6,750.00 |
| 2.32 | Priority creditor's name and mailing address BRYANT, BRANDON C. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,643.42 \$1,643.42 |
| 2.33 | Priority creditor's name and mailing address CHARLES CLARK 3528 WHITE LICK RD PAINT LICK, KY 40461 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$282,562.50 \$6,750.00 |

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| | | Total claim | Priority amount |
|------|--|--|--|
| 2.34 | Priority creditor's name and mailing address CHAVARRIA, TIMOTHY M. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,440.00 \$1,440.00 |
| 2.35 | Priority creditor's name and mailing address CISSELL, MATTHEW 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,153.84 \$2,153.84 |
| 2.36 | Priority creditor's name and mailing address CLARK COUNTY TREASURER 34 SOUTH MAIN ROOM103 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: POTENTIAL TAX LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN UNKNOWN |
| 2.37 | Priority creditor's name and mailing address CLARK, JOSEPH C. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,307.69 \$2,307.69 |
| 2.38 | Priority creditor's name and mailing address CLAYCAMP, DAN L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,073.68 \$13,073.68 |

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| | | Total claim | Priority amount |
|------|---|--|--|
| 2.39 | Priority creditor's name and mailing address CLAYTON, JOSHUA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,800.00 \$1,800.00 |
| 2.40 | Priority creditor's name and mailing address CLINE, KAYLA N. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,260.60 \$2,260.60 |
| 2.41 | Priority creditor's name and mailing address COHEN, NEWT 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$57,125.71 \$13,650.00 |
| 2.42 | Priority creditor's name and mailing address COLE, WILLIAM 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$216.00 \$216.00 |
| 2.43 | Priority creditor's name and mailing address COLLETT, CHRISTOPHER S. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,440.00 \$1,440.00 |

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| | | Total claim | Priority amount | |
|------|---|--|-----------------|------------|
| 2.44 | Priority creditor's name and mailing address COLLINS, BRIAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$400.00 | \$400.00 |
| 2.45 | Priority creditor's name and mailing address COLLINS, MISTY D. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$387.00 | \$387.00 |
| 2.46 | Priority creditor's name and mailing address CONWAY, DARIEN L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,320.00 | \$1,320.00 |
| 2.47 | Priority creditor's name and mailing address CONYEA, RONALD 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,118.44 | \$4,118.44 |
| 2.48 | Priority creditor's name and mailing address CORREDOR, HUGO 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,846.15 | \$3,846.15 |

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| | | Total claim | Priority amount |
|------|---|--|--|
| 2.49 | Priority creditor's name and mailing address COUCH, BRANDON 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,280.00 \$1,280.00 |
| 2.50 | Priority creditor's name and mailing address CRASE, JEFFREY J. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$812.00 \$812.00 |
| 2.51 | Priority creditor's name and mailing address CRAWFORD, MARK 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,080.77 \$3,080.77 |
| 2.52 | Priority creditor's name and mailing address CROUCH, JEFFERY 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$830.77 \$830.77 |
| 2.53 | Priority creditor's name and mailing address CRUSE, PONICE 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,769.60 \$5,769.60 |

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| | | Total claim | Priority amount |
|------|---|--|--|
| 2.54 | Priority creditor's name and mailing address CUNDIFF, JAMES 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,640.00 \$1,640.00 |
| 2.55 | Priority creditor's name and mailing address DANNY MILLER MILLER FARM, LLC 6851 LEEANN LANE LEXINGTON, KY 40515 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$700,000.00 \$6,750.00 |
| 2.56 | Priority creditor's name and mailing address DAVID E. DUVAL 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,884.62 \$2,884.62 |
| 2.57 | Priority creditor's name and mailing address DAVID E. FRALEY 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,730.77 \$1,730.77 |
| 2.58 | Priority creditor's name and mailing address DAVID J CHERRY 14605 ST RT 303 FULTON, KY 42041 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$574,000.00 \$6,750.00 |

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| | | Total claim | Priority amount |
|------|--|--|--|
| 2.59 | Priority creditor's name and mailing address DAVID ROARK 7425 SCOTTSVILLE RD LAFAYETTE, TN Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$39,375.00 \$6,750.00 |
| 2.60 | Priority creditor's name and mailing address DAY, JOHNATHAN L. 773 HALCOMB LN PAINT LICK, KY 40461 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,065.60 \$3,065.60 |
| 2.61 | Priority creditor's name and mailing address DENNIS BRAGG 1180 GRIMWOOD ROAD TONEY, AL 35773 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,947,500.00 \$6,750.00 |
| 2.62 | Priority creditor's name and mailing address DEWAYNE HOLCOMB 2363 FALL LICK ROAD LANCASTER, KY 40444 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$71,750.00 \$6,750.00 |
| 2.63 | Priority creditor's name and mailing address DOEBLER, SETH W. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,536.00 \$1,536.00 |

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| | | Total claim | Priority amount |
|------|---|--|--|
| 2.64 | Priority creditor's name and mailing address DORSETT, MARY C. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,500.00 \$2,500.00 |
| 2.65 | Priority creditor's name and mailing address DRENNEN, RICHARD 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$36,714.39 \$13,650.00 |
| 2.66 | Priority creditor's name and mailing address EDMON, ALICE T. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$623.08 \$623.08 |
| 2.67 | Priority creditor's name and mailing address EDWARDS, JESSI 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,769.23 \$3,769.23 |
| 2.68 | Priority creditor's name and mailing address ELISHA HENDERSON 815 RICHMOND ROAD, LOOP 2 LANCASTER, KY 40444 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$80,500.00 \$6,750.00 |

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| | | Total claim | Priority amount |
|------|---|--|--|
| 2.69 | Priority creditor's name and mailing address ELLIOT, BRIAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$134.03 \$134.03 |
| 2.70 | Priority creditor's name and mailing address ELLIOTT, BRIAN D. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,700.00 \$2,700.00 |
| 2.71 | Priority creditor's name and mailing address ELLIS, CAMERON D. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$528.00 \$528.00 |
| 2.72 | Priority creditor's name and mailing address ERIC COWDEN 708 CLAYVIS COURT LEXINGTON, KY 40515 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$25,151.20 \$6,750.00 |
| 2.73 | Priority creditor's name and mailing address ERIC HOPEWELL 820 MILLER DEAN ROAD SALVISA, KY 40372 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$165,750.00 \$6,750.00 |

Part 1: Additional Page

| | | Total claim | Priority amount | |
|------|--|--|-----------------|------------|
| 2.74 | Priority creditor's name and mailing address ESPINOSA, DANIEL 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$800.00 | \$800.00 |
| 2.75 | Priority creditor's name and mailing address FAHNER, MARY 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,400.00 | \$1,400.00 |
| 2.76 | Priority creditor's name and mailing address FASSIO, MICHAEL 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 | \$1,360.00 |
| 2.77 | Priority creditor's name and mailing address FAULKNER, JUSTIN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,600.00 | \$1,600.00 |
| 2.78 | Priority creditor's name and mailing address FENNER, DAVID 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$900.00 | \$900.00 |

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| | | Total claim | Priority amount |
|------|---|--|--|
| 2.79 | Priority creditor's name and mailing address FETTERS, AMANDA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,520.00 \$1,520.00 |
| 2.80 | Priority creditor's name and mailing address FILBURN-MIRANDA, BARBARA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,637.46 \$13,637.46 |
| 2.81 | Priority creditor's name and mailing address FILBURN-MIRANDA, BARBARA M. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$290.00 \$290.00 |
| 2.82 | Priority creditor's name and mailing address FRANCIS, LUKE I. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,307.69 \$2,307.69 |
| 2.83 | Priority creditor's name and mailing address GARRETT, DAVINA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$960.00 \$960.00 |

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| | | Total claim | Priority amount |
|------|---|--|--|
| 2.84 | Priority creditor's name and mailing address GARTH MIDDAUGH 1013 CAVE HILL ROAD LAFAYETTE, TN 37083 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$90,250.00 \$6,750.00 |
| 2.85 | Priority creditor's name and mailing address GARY RILEY 1363 STATE ROUTE 1710 MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$214,061.25 \$6,750.00 |
| 2.86 | Priority creditor's name and mailing address GARY BROADBENT 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,982.17 \$3,982.17 |
| 2.87 | Priority creditor's name and mailing address GAYHEART, ZACHARY 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,320.00 \$1,320.00 |
| 2.88 | Priority creditor's name and mailing address GENE GOUGH 6540 VAUGHN RD KEVIL, KY 42053 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$95,000.00 \$6,750.00 |

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| | | Total claim | Priority amount |
|------|---|--|--|
| 2.89 | Priority creditor's name and mailing address GIBSON, CODY A. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,380.00 \$1,380.00 |
| 2.90 | Priority creditor's name and mailing address GILCHRIST, CHRISTINE L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,321.09 \$1,321.09 |
| 2.91 | Priority creditor's name and mailing address GILES B. SHELL 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,076.92 \$11,076.92 |
| 2.92 | Priority creditor's name and mailing address GIOVANNIELLO, BRITTANY R. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,355.77 \$2,355.77 |
| 2.93 | Priority creditor's name and mailing address GOOLMAN, CHAD E. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$25.52 \$25.52 |

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| | | Total claim | Priority amount |
|------|---|--|--|
| 2.94 | Priority creditor's name and mailing address GOSHORN, JONATHAN L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,461.54 \$3,461.54 |
| 2.95 | Priority creditor's name and mailing address GOSSER, THOMAS D. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$368.00 \$368.00 |
| 2.96 | Priority creditor's name and mailing address GREGORY W HENSLEY MR. GREG HENSLEY 1746 POLLYS BEND RD LANCASTER, KY 40444 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$115,500.00 \$6,750.00 |
| 2.97 | Priority creditor's name and mailing address GRIFFETT, JOSEPH 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$288.00 \$288.00 |
| 2.98 | Priority creditor's name and mailing address HALL, AMANDA M. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,380.00 \$1,380.00 |

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| | | Total claim | Priority amount |
|-------|--|--|--|
| 2.99 | Priority creditor's name and mailing address HAMILTON, SHANNON 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,692.31 \$2,692.31 |
| 2.100 | Priority creditor's name and mailing address HARDER, DANIEL K. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,983.56 \$5,983.56 |
| 2.101 | Priority creditor's name and mailing address HATFIELD, PHILLIP K. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 \$1,360.00 |
| 2.102 | Priority creditor's name and mailing address HOLLON, DAKOTA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,320.00 \$1,320.00 |
| 2.103 | Priority creditor's name and mailing address HOOVER, SAMUEL J. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,831.74 \$7,831.74 |

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| | | | Total claim | Priority amount |
|-------|---|--|--------------|-----------------|
| 2.104 | Priority creditor's name and mailing address HOWARD, JAMES M. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,320.00 | \$1,320.00 |
| 2.105 | Priority creditor's name and mailing address IAN THOMAS 630 BALDEN ROAD HARRODSBURG, KY 40330 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$220,000.00 | \$6,750.00 |
| 2.106 | Priority creditor's name and mailing address INTERNAL REVENUE SERVICE PO BOX 7346 PHILADELPHIA, PA 19101-7346 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: POTENTIAL TAX LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN | UNKNOWN |
| 2.107 | Priority creditor's name and mailing address JANICE HARPER 21 NORTH MAIN STREET WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$97,375.00 | \$6,750.00 |
| 2.108 | Priority creditor's name and mailing address JARED DONALDSON 1343 NANCE ROAD HICKORY, KY 42051 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$223,250.00 | \$6,750.00 |

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| | | Total claim | Priority amount |
|-------|--|---|--|
| 2.109 | Priority creditor's name and mailing address JEANETTA RAMSEY 452 BROWNING'S CORNER ROAD FALMOUTH, KY 41040 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$45,375.00 \$6,750.00 |
| 2.110 | Priority creditor's name and mailing address JEFF ADAMS 5045 VAN METER ROAD WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$256,000.00 \$6,750.00 |
| 2.111 | Priority creditor's name and mailing address JEFFREY L WEBB 7064 BYBEE RD WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$262,500.00 \$6,750.00 |
| 2.112 | Priority creditor's name and mailing address JEREMY SCHLABACH 380 LOCKHART LANE AUBURN, KY 42206 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$130,156.25 \$6,750.00 |
| 2.113 | Priority creditor's name and mailing address JERRY HOLLOWAY 2945 STATE ROUTE 339 E MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$636,500.00 \$6,750.00 |

Part 1: Additional Page

| | | | Total claim | Priority amount |
|-------|--|--|--------------|-----------------|
| 2.114 | Priority creditor's name and mailing address JILL COFFEY 3105 STATE ROUTE 125 HICKMAN, KY 42050 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$562,500.00 | \$6,750.00 |
| 2.115 | Priority creditor's name and mailing address JIMMY TUDOR 9032 RICHMOND ROAD PAINT LICK, KY 40461 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$171,000.00 | \$6,750.00 |
| 2.116 | Priority creditor's name and mailing address JOHN BOWEN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$560,000.00 | \$6,750.00 |
| 2.117 | Priority creditor's name and mailing address JOHNNATHAN DAY 773 HALCOMB LN PAINT LICK, KY 40461 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$682,500.00 | \$6,750.00 |
| 2.118 | Priority creditor's name and mailing address JONES, ADAM 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 | \$1,360.00 |

Part 1: Additional Page

| | | Total claim | Priority amount |
|-------|---|--|--|
| 2.119 | Priority creditor's name and mailing address JONES, SARAH 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,152.00 \$1,152.00 |
| 2.120 | Priority creditor's name and mailing address JOSH CURTIS JOSH CURTIS 1402 KY HWY 1940 CYNTHIANA, KY 41031 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$363,375.00 \$6,750.00 |
| 2.121 | Priority creditor's name and mailing address JUSTIN CLARK 5470 OLD US HIGHWAY 45 SOUTH PADUCAH, KY 42003 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$989,945.00 \$6,750.00 |
| 2.122 | Priority creditor's name and mailing address JUSTIN EDWARDS 5165 GILBERTSVILLE HIGHWAY CALVERT CITY, KY 42029 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$332,062.50 \$6,750.00 |
| 2.123 | Priority creditor's name and mailing address JUSTIN PAVONI 187 PEACOCK FARMS LANE FLEMINGSBURG, KY 41041 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$324,482.52 \$6,750.00 |

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| | | Total claim | Priority amount |
|-------|---|--|--|
| 2.124 | Priority creditor's name and mailing address JUSTIN WILMOT 5187 BUCKEYE RD LANCASTER, KY 40444 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$171,000.00 \$6,750.00 |
| 2.125 | Priority creditor's name and mailing address KENNETH ANDERSON 6675 VAN METER RD. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$282,187.50 \$6,750.00 |
| 2.126 | Priority creditor's name and mailing address KENTUCKY STATE TREASURER 1050 US-127 # 100 FRANKFORT, KY 40601 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: POTENTIAL TAX LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN UNKNOWN |
| 2.127 | Priority creditor's name and mailing address KENTUCKY STATE TREASURER 1050 US-127 # 100 FRANKFORT, KY 40601 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: POTENTIAL TAX LIABILITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN UNKNOWN |
| 2.128 | Priority creditor's name and mailing address KEY, CAROL 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,728.00 \$1,728.00 |

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| | | Total claim | Priority amount | |
|-------|--|--|-----------------|------------|
| 2.129 | Priority creditor's name and mailing address KEY, NATHAN T. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,000.00 | \$1,000.00 |
| 2.130 | Priority creditor's name and mailing address KIDWELL, GARY E. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$480.00 | \$480.00 |
| 2.131 | Priority creditor's name and mailing address KING, SAMANTHA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,307.69 | \$4,307.69 |
| 2.132 | Priority creditor's name and mailing address KINIRY, BRANDON T. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,440.00 | \$1,440.00 |
| 2.133 | Priority creditor's name and mailing address KIRK, LOGAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$652.50 | \$652.50 |

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| | | | Total claim | Priority amount |
|-------|---|--|--------------|-----------------|
| 2.134 | Priority creditor's name and mailing address LAMB, BRIAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$800.00 | \$800.00 |
| 2.135 | Priority creditor's name and mailing address LARRY CLARK 106 CLARK-HOOK ROAD GREENBURG, KY 42743 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$354,750.00 | \$6,750.00 |
| 2.136 | Priority creditor's name and mailing address LEWIS SWARTS 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$693.19 | \$693.19 |
| 2.137 | Priority creditor's name and mailing address LINGEMAN, DANIEL G. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,731.20 | \$1,731.20 |
| 2.138 | Priority creditor's name and mailing address LINKOUS, CHRISTOPHER L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,440.00 | \$1,440.00 |

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| | | Total claim | Priority amount | |
|-------|--|--|-----------------|------------|
| 2.139 | Priority creditor's name and mailing address LITTLETON, VICTOR R. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$252.00 | \$252.00 |
| 2.140 | Priority creditor's name and mailing address LONG, AMANDA L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,600.00 | \$1,600.00 |
| 2.141 | Priority creditor's name and mailing address LUXMORE, SHONNA A. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$232.00 | \$232.00 |
| 2.142 | Priority creditor's name and mailing address LYVERS, CHRIS 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,864.72 | \$5,864.72 |
| 2.143 | Priority creditor's name and mailing address MARCUS S WISEMAN 1296 MORRIS ROAD WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$352,187.50 | \$6,750.00 |

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| | | Total claim | Priority amount |
|-------|---|--|---|
| 2.144 | Priority creditor's name and mailing address MARK MAYER 1585 BOONESBORO ROAD WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$90,200.00 \$6,750.00 |
| 2.145 | Priority creditor's name and mailing address MARK ROARK 1213 HANESTOWN RD LAFAYETTE, TN 37083 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$67,500.00 \$6,750.00 |
| 2.146 | Priority creditor's name and mailing address MAYS, BRIAN W. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 \$1,360.00 |
| 2.147 | Priority creditor's name and mailing address MCCOY, MIKE W. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 \$1,360.00 |
| 2.148 | Priority creditor's name and mailing address MCDONALD, JASON 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 \$1,360.00 |

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| | | | Total claim | Priority amount |
|-------|---|--|-------------|-----------------|
| 2.149 | Priority creditor's name and mailing address MCMANUS, STARLEY K. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,680.00 | \$1,680.00 |
| 2.150 | Priority creditor's name and mailing address MEANS, JAMES 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,115.38 | \$2,115.38 |
| 2.151 | Priority creditor's name and mailing address MICHAEL T. RAMSEY 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,000.00 | \$2,000.00 |
| 2.152 | Priority creditor's name and mailing address MILLER, CLINT W. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 | \$1,360.00 |
| 2.153 | Priority creditor's name and mailing address MILLER, ERIK 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$31,943.50 | \$13,650.00 |

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| | | | Total claim | Priority amount |
|-------|--|--|-------------|-----------------|
| 2.154 | Priority creditor's name and mailing address MILLER, ERIK F. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,384.62 | \$1,384.62 |
| 2.155 | Priority creditor's name and mailing address MILLER, MCKENZIE C. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$660.00 | \$660.00 |
| 2.156 | Priority creditor's name and mailing address MONROE, AUSTIN G. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$168.00 | \$168.00 |
| 2.157 | Priority creditor's name and mailing address MORRIS, ALEXANDER J. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,160.00 | \$4,160.00 |
| 2.158 | Priority creditor's name and mailing address MORSE, HOLLIE L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,161.60 | \$1,161.60 |

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| | | Total claim | Priority amount |
|-------|--|--|--|
| 2.159 | Priority creditor's name and mailing address NEIL ISHMAEL 1120 ROBINSON RENAKER ROAD BERRY, KY 41003 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$380,250.00 \$6,750.00 |
| 2.160 | Priority creditor's name and mailing address NELSON, MITCHELL 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,396.02 \$2,396.02 |
| 2.161 | Priority creditor's name and mailing address NEY, ROBERT M. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,769.23 \$2,769.23 |
| 2.162 | Priority creditor's name and mailing address NICK ROBINSON 233 BEARKAT LANE LAFAYETTE, TN 37083 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$27,000.00 \$6,750.00 |
| 2.163 | Priority creditor's name and mailing address NORTON, MADISON R. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 \$1,360.00 |

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| | | Total claim | Priority amount | |
|-------|---|--|-----------------|-------------|
| 2.164 | Priority creditor's name and mailing address O'CONNOR, DARRELL 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$38,002.94 | \$13,650.00 |
| 2.165 | Priority creditor's name and mailing address OVERBY, JAMES 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$637.28 | \$637.28 |
| 2.166 | Priority creditor's name and mailing address PATRICK K. RYAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,307.70 | \$4,307.70 |
| 2.167 | Priority creditor's name and mailing address PATRICK RYAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$10,134.94 | \$10,134.94 |
| 2.168 | Priority creditor's name and mailing address PELFREY, TIMOTHY 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 | \$1,360.00 |

Part 1: Additional Page

| | | | Total claim | Priority amount |
|-------|--|--|-------------|-----------------|
| 2.169 | Priority creditor's name and mailing address PENNINGTON, MICHAEL E. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,332.12 | \$1,332.12 |
| 2.170 | Priority creditor's name and mailing address PHIPPS, HEATHER 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,920.00 | \$1,920.00 |
| 2.171 | Priority creditor's name and mailing address PIPKEN, CHELSEA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$407.85 | \$407.85 |
| 2.172 | Priority creditor's name and mailing address PIPKIN, CHELSEA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,000.00 | \$9,000.00 |
| 2.173 | Priority creditor's name and mailing address PLYMPTON, JEFFREY 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$840.00 | \$840.00 |

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| | | Total claim | Priority amount | |
|-------|--|--|-----------------|------------|
| 2.174 | Priority creditor's name and mailing address PORT, MICHAEL 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,201.93 | \$1,201.93 |
| 2.175 | Priority creditor's name and mailing address PREECE, DEVIN L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$980.77 | \$980.77 |
| 2.176 | Priority creditor's name and mailing address PUCKETT, JACOB K. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,153.84 | \$2,153.84 |
| 2.177 | Priority creditor's name and mailing address PULLIAM, JEREMY D. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,115.38 | \$2,115.38 |
| 2.178 | Priority creditor's name and mailing address RAMSEY, MIKE 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$126.26 | \$126.26 |

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| | | Total claim | Priority amount |
|-------|---|--|--|
| 2.179 | Priority creditor's name and mailing address RATLIFF, BRENT 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 \$1,360.00 |
| 2.180 | Priority creditor's name and mailing address RAY K MATHIS 780 DOYLE RD. HICKORY, KY 42051 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$422,812.50 \$6,750.00 |
| 2.181 | Priority creditor's name and mailing address REGINA B. ASTER 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,720.00 \$2,720.00 |
| 2.182 | Priority creditor's name and mailing address ROBERT ELLISON 2048 STATE ROUTE 97 MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$495,000.00 \$6,750.00 |
| 2.183 | Priority creditor's name and mailing address ROBERT TOON 9620 STATE ROUTE 408 FANCY FARM, KY 42039 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$753,375.00 \$6,750.00 |

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| | | Total claim | Priority amount | |
|-------|---|--|-----------------|------------|
| 2.184 | Priority creditor's name and mailing address ROBERTS, DYLAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 | \$1,360.00 |
| 2.185 | Priority creditor's name and mailing address ROBERTSON, KATHRYN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,510.38 | \$3,510.38 |
| 2.186 | Priority creditor's name and mailing address ROBIN R. DOEBLER 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$259.13 | \$259.13 |
| 2.187 | Priority creditor's name and mailing address ROBINSON, BENJAMIN R. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$160.00 | \$160.00 |
| 2.188 | Priority creditor's name and mailing address ROBINSON, GLEN R. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,000.00 | \$1,000.00 |

Part 1: Additional Page

| | | Total claim | Priority amount | |
|-------|---|--|-----------------|------------|
| 2.189 | Priority creditor's name and mailing address ROGERS, RONALD C. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 | \$1,360.00 |
| 2.190 | Priority creditor's name and mailing address RON CONYEA 3030 STATE ROUTE 1241 HICKORY, KY 42051 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$969,375.00 | \$6,750.00 |
| 2.191 | Priority creditor's name and mailing address ROSE, KLINT 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,694.38 | \$2,694.38 |
| 2.192 | Priority creditor's name and mailing address ROSE, TARYN M. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,320.00 | \$1,320.00 |
| 2.193 | Priority creditor's name and mailing address SARGENT, BRYCE K. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,440.00 | \$1,440.00 |

Part 1: Additional Page

| | | Total claim | Priority amount |
|-------|--|--|--|
| 2.194 | Priority creditor's name and mailing address SAYLOR, BRANDON 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,420.00 \$1,420.00 |
| 2.195 | Priority creditor's name and mailing address SCANNAPIECO, NICHOLAS A. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$153.84 \$153.84 |
| 2.196 | Priority creditor's name and mailing address SCHMIDT, BRITA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,153.85 \$1,153.85 |
| 2.197 | Priority creditor's name and mailing address SCHOENTHALER, AMY L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$19,019.23 \$13,650.00 |
| 2.198 | Priority creditor's name and mailing address SCOTT W. SLYKER, 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,076.91 \$11,076.91 |

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| | | Total claim | Priority amount |
|-------|---|--|--|
| 2.199 | Priority creditor's name and mailing address SCOTT, ALFRED E. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$350.00 \$350.00 |
| 2.200 | Priority creditor's name and mailing address SHANNON C. STONE 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,153.85 \$4,153.85 |
| 2.201 | Priority creditor's name and mailing address SHAUN HAYDEN 2114 COUNTY ROAD 1015 BARDWELL, KY 42023 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$512,500.00 \$6,750.00 |
| 2.202 | Priority creditor's name and mailing address SHIFFLET, WILLIAM 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,380.00 \$1,380.00 |
| 2.203 | Priority creditor's name and mailing address SHROUT, TAYLOR D. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$180.00 \$180.00 |

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| | | Total claim | Priority amount |
|-------|---|--|--|
| 2.204 | Priority creditor's name and mailing address SIMPSON, STEPHEN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$79.99 \$79.99 |
| 2.205 | Priority creditor's name and mailing address SMITH, CAMERON J. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,461.54 \$3,461.54 |
| 2.206 | Priority creditor's name and mailing address SMITH, JAMES G. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,320.00 \$1,320.00 |
| 2.207 | Priority creditor's name and mailing address SMITH, RANDY 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,800.00 \$1,800.00 |
| 2.208 | Priority creditor's name and mailing address SMITH, RICKY L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,320.00 \$2,320.00 |

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| | | Total claim | Priority amount |
|-------|---|--|--|
| 2.209 | Priority creditor's name and mailing address SMITH, STARLA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,760.00 \$1,760.00 |
| 2.210 | Priority creditor's name and mailing address SMITH, TAYLOR M. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,480.00 \$1,480.00 |
| 2.211 | Priority creditor's name and mailing address SMITHERMAN, COLLYN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,980.77 \$3,980.77 |
| 2.212 | Priority creditor's name and mailing address SNEDEGAR, JOSEPH T. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 \$1,360.00 |
| 2.213 | Priority creditor's name and mailing address SNOWDEN, CHANCELOR D. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,400.00 \$1,400.00 |

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| | | Total claim | Priority amount | |
|-------|--|--|-----------------|------------|
| 2.214 | Priority creditor's name and mailing address SOUTHERLAND, WILLIAM 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,923.08 | \$1,923.08 |
| 2.215 | Priority creditor's name and mailing address STARKS, CHRISTOPHER W. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,201.93 | \$1,201.93 |
| 2.216 | Priority creditor's name and mailing address STEVE S. BRYANT 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,229.83 | \$2,229.83 |
| 2.217 | Priority creditor's name and mailing address STIDHAM, ROBERT 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$112.50 | \$112.50 |
| 2.218 | Priority creditor's name and mailing address STONE, SHANE A. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,320.00 | \$1,320.00 |

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| | | | Total claim | Priority amount |
|-------|---|--|-------------|-----------------|
| 2.219 | Priority creditor's name and mailing address STRNAD, STUART 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,202.93 | \$3,202.93 |
| 2.220 | Priority creditor's name and mailing address STUBBS, ETHAN A. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$212.36 | \$212.36 |
| 2.221 | Priority creditor's name and mailing address TACKETT, MALLORY E. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,846.42 | \$1,846.42 |
| 2.222 | Priority creditor's name and mailing address TAYLOR, JOHNATHAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$168.28 | \$168.28 |
| 2.223 | Priority creditor's name and mailing address TAYLOR, JONATHAN L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,024.00 | \$1,024.00 |

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| | | Total claim | Priority amount |
|-------|--|--|--|
| 2.224 | Priority creditor's name and mailing address TAYLOR, LAURAA. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,269.23 \$3,269.23 |
| 2.225 | Priority creditor's name and mailing address THOMAS, JOSHUA D. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,360.00 \$1,360.00 |
| 2.226 | Priority creditor's name and mailing address THOMPSON, ADAM Z. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,440.00 \$1,440.00 |
| 2.227 | Priority creditor's name and mailing address THOMPSON, ALONA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,403.85 \$2,403.85 |
| 2.228 | Priority creditor's name and mailing address THORN, CHRISTOPHER 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,260.00 \$1,260.00 |

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| | | | Total claim | Priority amount |
|-------|---|--|-------------|-----------------|
| 2.229 | Priority creditor's name and mailing address TIPTON, JASON M. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,400.00 | \$1,400.00 |
| 2.230 | Priority creditor's name and mailing address TOLBERT, BRIAN E. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,461.54 | \$3,461.54 |
| 2.231 | Priority creditor's name and mailing address TOZZI, SASHA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,671.18 | \$3,671.18 |
| 2.232 | Priority creditor's name and mailing address TYE, KEN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,442.31 | \$1,442.31 |
| 2.233 | Priority creditor's name and mailing address WATKINS, REBECCA S. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$800.00 | \$800.00 |

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| | | | Total claim | Priority amount |
|-------|--|--|-------------|-----------------|
| 2.234 | Priority creditor's name and mailing address WEBB, MEGAN 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,059.61 | \$3,059.61 |
| 2.235 | Priority creditor's name and mailing address WHITLEY, NICHOLAS 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,640.00 | \$1,640.00 |
| 2.236 | Priority creditor's name and mailing address WILSON, HALEIGH 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,480.00 | \$1,480.00 |
| 2.237 | Priority creditor's name and mailing address WILSON, JEFFERY M. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,480.00 | \$1,480.00 |
| 2.238 | Priority creditor's name and mailing address WISE, ROBERT S. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE COMPENSATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,400.00 | \$1,400.00 |

Part 1: Additional Page

| | | Total claim | Priority amount |
|-------|--|---|--|
| 2.239 | Priority creditor's name and mailing address ZACHARY WEBB 603 ARDERY ROAD PARIS, KY 40361 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$309,375.00 \$6,750.00 |
| 2.240 | Priority creditor's name and mailing address ZACK ISON 1225 LEXINGTON ROAD HARRODSBURG, KY 40330 Date or dates debt was incurred VARIOUS Last 4 digits of account number: Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (6) | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: FARMER Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$133,000.00 \$6,750.00 |

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 | Nonpriority creditor's name and mailing address 3M COMPANY P.O. BOX 371227 PITTSBURGH, PA 15250-7227 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,462.45 |
| 3.2 | Nonpriority creditor's name and mailing address 7 POINT NATURALS LLC 1855 DR. ANDRES WAY UNIT. 7 DELRAY BEACH, FL 33445 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,894.00 |
| 3.3 | Nonpriority creditor's name and mailing address 828 LOGISTICS, LLC 9908 CARVER ROAD SUITE 200 BLUE ASH, OH 45242 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$192,225.00 |

Part 2: Additional Page

| | | | Amount of claim |
|-----|--|--|-----------------|
| 3.4 | Nonpriority creditor's name and mailing address A&J SERVICES, LLC 52 PARK PLACE NEWBERRY, SC 29108 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,073.21 |
| 3.5 | Nonpriority creditor's name and mailing address AAA FENCE, LLC 4450 CAIRO RD PADUCAH, KY 42001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$299.52 |
| 3.6 | Nonpriority creditor's name and mailing address ACTION BUSINESS SUPPLIERS 275 GOLD RUSH RD. LEXINGTON, KY 40503 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,295.48 |
| 3.7 | Nonpriority creditor's name and mailing address ADAMS INSULATION INC. 1016 NANDINO BOULEVARD LEXINGTON, KY 40511 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$608.00 |
| 3.8 | Nonpriority creditor's name and mailing address AFLAC GROUP INSURANCE PO BOX 84069 COLUMBUS, GA 31908 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$173.07 |

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| | | | Amount of claim |
|------|--|---|-----------------|
| 3.9 | Nonpriority creditor's name and mailing address AIR QUALITY SERVICES 425 MAIN ST. EVANSVILLE, IN 47708 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$417.00 |
| 3.10 | Nonpriority creditor's name and mailing address AIR TECHNOLOGIES PO BOX 73278 CLEVELAND, OH 44193 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,197.31 |
| 3.11 | Nonpriority creditor's name and mailing address AIRGAS USA LLC PO BOX 734672 DALLAS, TX 75373-4672 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$38,365.47 |
| 3.12 | Nonpriority creditor's name and mailing address ALEX ENGLISH 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$44.01 |
| 3.13 | Nonpriority creditor's name and mailing address ALL AMERICAN CONTAINERS 4400 NORTH COMMERCE DR. EAST POINT, GA 30344 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$65,788.55 |

Part 2: Additional Page

| | | | Amount of claim |
|------|---|--|-----------------|
| 3.14 | Nonpriority creditor's name and mailing address ALLY PO BOX 380902 BLOOMINGTON, MN 55438-0902 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$667.19 |
| 3.15 | Nonpriority creditor's name and mailing address ALPHA MECHANICAL SERVICE INC 7200 DISTRIBUTION DR LOUISVILLE, KY 40258 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,222.53 |
| 3.16 | Nonpriority creditor's name and mailing address AMAZON BUSINESS AMAZON CAPITAL SERVICES PO BOX 035184 SEATTLE, WA 98124-5184 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$445.14 |
| 3.17 | Nonpriority creditor's name and mailing address AMERICAN SCALE 3540 BASHFORD AVE. LOUISVILLE, KY 40218 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$10,086.27 |
| 3.18 | Nonpriority creditor's name and mailing address AMHEMP 2343 KELSO ROAD MURRAY, KY 42071 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$55,000.00 |

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| | | | Amount of claim |
|------|--|--|-----------------|
| 3.19 | Nonpriority creditor's name and mailing address AMIN TALATI UPADHYE, LLP 100 SOUTH WACKER DR. SUITE 2000 CHICAGO, IL 60606 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$336,827.00 |
| 3.20 | Nonpriority creditor's name and mailing address ANDERSON TRANSPORTATION AND LOGISTICS LLC 3300 D NORTH MAIN STREET PMB 343 ANDERSON, SC 29621 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,750.00 |
| 3.21 | Nonpriority creditor's name and mailing address APOLLO OIL PO BOX 601872 CHARLOTTE, NC 28260-1872 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$593.76 |
| 3.22 | Nonpriority creditor's name and mailing address ARROW FARMS ATTN: CHRIS PETTY 8255 OLD LOVELACEVILLE ROAD PADUCAH, KY 42001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$69,751.00 |
| 3.23 | Nonpriority creditor's name and mailing address ASENTI DILIGENCE PARTNERS LLC 1655 FORT MYER DRIVE SUITE 700 ARLINGTON, VA 22209 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$40,000.00 |

Part 2: Additional Page

| | | | Amount of claim |
|------|--|--|-----------------|
| 3.24 | Nonpriority creditor's name and mailing address ASTRONOVA INC PO BOX 419820 BOSTON, MA 02241-9820 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$650.06 |
| 3.25 | Nonpriority creditor's name and mailing address AT&T PO BOX 5019 CAROL STREAM, IL 60197-5019 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,408.34 |
| 3.26 | Nonpriority creditor's name and mailing address ATLANTIC APPRAISAL COMPANY INC 161 BURT ROAD SUITE 3 LEXINGTON, KY 40503 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,000.00 |
| 3.27 | Nonpriority creditor's name and mailing address ATLAS EQUIPMENT SERVICES PO BOX 554 MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,925.94 |
| 3.28 | Nonpriority creditor's name and mailing address ATMOS ENERGY PO BOX 790311 ST. LOUIS, MO 63179-0311 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$59.85 |

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| | | | Amount of claim |
|------|--|--|-----------------|
| 3.29 | Nonpriority creditor's name and mailing address AUTHORIZED GRAIN SERVICE, LLC 4508 GATEWAY CIRCLE KETTERING, OH 45440 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,600.00 |
| 3.30 | Nonpriority creditor's name and mailing address AVTECH CAPITAL 6995 UNION PARK CENTER SUITE 400 COTTONWOOD HEIGHTS, UT 84047 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CAPITAL LEASE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$16,120.00 |
| 3.31 | Nonpriority creditor's name and mailing address BACKFLOW TESTING & SOLUTIONS INC. 6 FAY AVE. JEFFERSONVILLE, IN 47130 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$150.00 |
| 3.32 | Nonpriority creditor's name and mailing address BACON FARMER WORKMAN P.O. BOX 120 PADUCAH, KY 42002 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$66,942.01 |
| 3.33 | Nonpriority creditor's name and mailing address BAM CAPITAL LLC ON BEHALF OF ORCA LOGISTICS BMO HARRIS BANK ATTN: BAM CAPITAL PO BOX 95182 CHICAGO, IL 60694-5182 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$10,198.00 |

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| | | | Amount of claim |
|------|--|---|-----------------|
| 3.34 | Nonpriority creditor's name and mailing address BASCO PO BOX 7203 CAROL STREAM, IL 60197-7203 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$10,139.52 |
| 3.35 | Nonpriority creditor's name and mailing address BEALL, ALEX 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.36 | Nonpriority creditor's name and mailing address BENEFIT MARKETING SOLUTIONS LLC BMS LLC PO BOX 43653 LOUISVILLE, KY 40253-0653 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$465.00 |
| 3.37 | Nonpriority creditor's name and mailing address BESTEN AND DIERUF PLLC 190 MARKET ST. LEXINGTON, KY 40507 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,448.00 |
| 3.38 | Nonpriority creditor's name and mailing address BETTER NUTRITIONALS 17120 S FIGUEROA ST. GARDENA, CA 90248 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$95,811.70 |

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| | | | Amount of claim |
|------|--|--|-----------------|
| 3.39 | Nonpriority creditor's name and mailing address BINGHAM GREENBAUM DOLL LLP 3913 SOLUTIONS CENTER CHICAGO, IL 60677-3009 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$14,497.55 |
| 3.40 | Nonpriority creditor's name and mailing address BIOSWEEP SERVICES 160 W CARMEL DR SUITE 204 CARMEL, IN 46032 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$15,968.31 |
| 3.41 | Nonpriority creditor's name and mailing address BLACK DIAMOND AVIATION 2405 BLACK DIAMOND DR. MARION, IL 62959 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$104,815.40 |
| 3.42 | Nonpriority creditor's name and mailing address BLUEGRASS COMMUNITY AND TECHNICAL COLLEGE 500 NEWTOWN PIKE LEXINGTON, KY 40508 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,800.00 |
| 3.43 | Nonpriority creditor's name and mailing address BLUEGRASS HERITAGE MUSEUM 217 SOUTH MAIN ST. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$600.00 |

Part 2: Additional Page

| | | | Amount of claim |
|------|---|--|-----------------|
| 3.44 | Nonpriority creditor's name and mailing address BOTANACOR SERVICES BOTANOCOR SERVICES 1001 S GALAPAGO ST DENVER, CO 80223 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$110.00 |
| 3.45 | Nonpriority creditor's name and mailing address BOTTLE BARONS LLC DROPPERBOTTLES.COM 2801 TECHNOLOGY DRIVE # 127 PLANO, TX 75074 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.46 | Nonpriority creditor's name and mailing address BOURBON COUNTY SHERIFF'S DEPARTMENT 301 MAIN STREET SUITE 104 PARIS, KY 40361 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GOVERNMENT ENTITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.47 | Nonpriority creditor's name and mailing address BRADLER S.A. C/O LYNCH, COX, GILMAN & GOODMAN ATTN: JOSEPH PATRICK HUMMEL LOUISVILLE, KY 40202 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.48 | Nonpriority creditor's name and mailing address BRADLEY ARANT BOULT CUMMINGS LLP PO BOX 830709 BIRMINGHAM, AL 35283-0709 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$12,661.25 |

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| | | | Amount of claim |
|------|--|---|-----------------|
| 3.49 | Nonpriority creditor's name and mailing address BRIAN, BARRETT 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.50 | Nonpriority creditor's name and mailing address BS LLC 11 GARFIELD PLACE CINCINNATI, OH 45202 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,612.50 |
| 3.51 | Nonpriority creditor's name and mailing address BYPASS RENTAL CENTER OF RICHMOND 845 BYPASS RD WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$25,787.75 |
| 3.52 | Nonpriority creditor's name and mailing address BYPASS RENTAL CENTER OF WINCHESTER 845 BYPASS RD. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$83,990.79 |
| 3.53 | Nonpriority creditor's name and mailing address BYPASS RENTAL OF GEORGETOWN 115 ETTER LANE GEORGETOWN, KY 40324 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$344.48 |

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| | | | Amount of claim |
|------|---|--|-----------------|
| 3.54 | Nonpriority creditor's name and mailing address C&W LUMBER COMPANY PO BOX 147, HWY 58 WEST WINGO, KY 42088 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,061.30 |
| 3.55 | Nonpriority creditor's name and mailing address CAD MEDIA LLC 379 WEST BROADWAY FLOOR 4 NEW YORK, NY 10012 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$50,104.92 |
| 3.56 | Nonpriority creditor's name and mailing address CANNALYSIS QC LABS 17322 MURPHY AVE. IRVINE, CA 92614-5920 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$75.00 |
| 3.57 | Nonpriority creditor's name and mailing address CANTRELL SUPPLY INC 245 NORTH MAIN ST. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$87,747.31 |
| 3.58 | Nonpriority creditor's name and mailing address CAYCE MILL SUPPLY 2225 PEMBROKE ROAD HOPKINSVILLE, KY 42240 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$144,256.75 |

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| | | | Amount of claim |
|------|---|--|-----------------|
| 3.59 | Nonpriority creditor's name and mailing address CDS COMMERCIAL DUE DILIGENCE SERVICES 355 W. ROBINSON STREET STE 300 NORMAN, OK 73072 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,600.00 |
| 3.60 | Nonpriority creditor's name and mailing address CECILS HEATING AND AIR INC 815 CONTRACT ST. LEXINGTON, KY 40505 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$23,499.56 |
| 3.61 | Nonpriority creditor's name and mailing address CENTRAL BANK AND TRUST CO PO BOX 1360 LEXINGTON, KY 40588-1360 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,910.00 |
| 3.62 | Nonpriority creditor's name and mailing address CENTRAL CABLING LLC PO BOX 837 BERE A, KY 40403 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,123.10 |
| 3.63 | Nonpriority creditor's name and mailing address CERILLIANT 811 PALOMA DR. SUITE A ROUND ROCK, TX 78665 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,412.70 |

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| | | | Amount of claim |
|------|---|---|-----------------|
| 3.64 | Nonpriority creditor's name and mailing address CHEMTREAT 5640 COX ROAD GLEN ALLEN, VA 23060 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$27,919.79 |
| 3.65 | Nonpriority creditor's name and mailing address CHILDERS, TAYLOR G. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.66 | Nonpriority creditor's name and mailing address CINCINNATI FIRE AND SAFETY SERVICE 1240 GLENDALE MILFORD RD. CINCINNATI, OH 45215 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$81.62 |
| 3.67 | Nonpriority creditor's name and mailing address CINTAS PO BOX 636525 CINCINNATI, OH 45263 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$12,887.00 |
| 3.68 | Nonpriority creditor's name and mailing address CINTAS FIRE PO BOX 636525 CINCINNATI, OH 45263 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$76,311.27 |

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| | | | Amount of claim |
|------|---|--|-----------------|
| 3.69 | Nonpriority creditor's name and mailing address CLARK COUNTY SHERIFF'S DEPARTMENT 17 CLEVELAND AVENUE WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GOVERNMENT ENTITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.70 | Nonpriority creditor's name and mailing address CLARK ENERGY PO BOX 748 WINCHESTER, KY 40392-0748 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,634.36 |
| 3.71 | Nonpriority creditor's name and mailing address CLEAN HARBORS ENV SERVICES PO BOX 3442 BOSTON, MA 02241-3442 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$285.80 |
| 3.72 | Nonpriority creditor's name and mailing address COLDER ALLIED CONSULTING LLC KARL COLDER 42448 SPRING SPLENDOR DR. ASHBURN, VA 20148 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$10,000.00 |
| 3.73 | Nonpriority creditor's name and mailing address COLUMBIA GAS OF KENTUCKY PO BOX 742523 CINCINNATI, OH 45274-2523 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$15,079.94 |

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| | | | Amount of claim |
|------|---|--|-----------------|
| 3.74 | Nonpriority creditor's name and mailing address COMCAST BUSINESS COMCAST PO BOX 70219 PHILADELPHIA, PA 19176-0219 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$652.45 |
| 3.75 | Nonpriority creditor's name and mailing address COMMONWEALTH ANALYTICS, LLC 678 WATERWORKS ROAD WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$18,000.00 |
| 3.76 | Nonpriority creditor's name and mailing address COMMONWEALTH OF KENTUCKY DEPARTMENT OF REVENUE DIVISION OF COLLECTIONS DEPARTMENT OF REVENUE STATION NUMBER 41 P.O. BOX 491 FRANKFORT, KY 40602 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GOVERNMENT ENTITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13.90 |
| 3.77 | Nonpriority creditor's name and mailing address CONCUR TECHNOLOGIES INC 62157 COLLECTIONS CENTER DR CHICAGO, IL 60693 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,259.30 |
| 3.78 | Nonpriority creditor's name and mailing address CONN FARMS 4175 HIGH BRIDGE ROAD WILMORE, KY 40390 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |

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| | | | Amount of claim |
|------|---|--|-----------------|
| 3.79 | Nonpriority creditor's name and mailing address CONNECTION DBA PO BOX 536472 PITTSBURGH, PA 15253-5906 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$82,780.59 |
| 3.80 | Nonpriority creditor's name and mailing address CONTINENTAL MACHINERY PO BOX 271590 DALLAS, TX 75227-1590 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$17,113.12 |
| 3.81 | Nonpriority creditor's name and mailing address CONVEYANCE SOLUTIONS BY CONTINENTAL 4343 EASTON ROAD ST JOSEPH, MO 64503 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,956.00 |
| 3.82 | Nonpriority creditor's name and mailing address CONYERS DILL PERMAN LIMITED CONYERS DILL PERMAN LIMITED COMMERCE HOUSE WICKHAMS CAY 1 P.O. BOX 3140 BRITISH, VI VG1110 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$69,986.92 |
| 3.83 | Nonpriority creditor's name and mailing address CORNERSTONE PROTECTION 107 TEAL LANE WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$649.35 |

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| | | | Amount of claim |
|------|---|---|-----------------|
| 3.84 | Nonpriority creditor's name and mailing address CORT FURNITURE PO BOX 17401 BALTIMORE, MD 21297-1401 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$159,336.39 |
| 3.85 | Nonpriority creditor's name and mailing address COSMAX NBT 3350 MARQUIS DR. GARLAND, TX 75042 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$39,662.15 |
| 3.86 | Nonpriority creditor's name and mailing address COSMETIC SOLUTIONS LLC 6101 PARK OF COMMERCE BLVD. BOCA RATON, FL 33487 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$33,347.77 |
| 3.87 | Nonpriority creditor's name and mailing address COURT'S DESIGN LTD. 8 LONDON ST. BASINGSTOKE HANTS RG21 7NU UNITED KINGDOM Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,054.89 |
| 3.88 | Nonpriority creditor's name and mailing address CRAIG, ASHLEY L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |

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| | | | Amount of claim |
|------|---|---|-----------------|
| 3.89 | Nonpriority creditor's name and mailing address CRAIG, DANIEL J. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.90 | Nonpriority creditor's name and mailing address CRAWFORD DOOR AND LOCK PO BOX 4878 EVANSVILLE, IN 47724 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$157,875.00 |
| 3.91 | Nonpriority creditor's name and mailing address CROWE SOBERMAN LLP 2 ST. CLAIR AVENUE EAST SUITE 1100 TORONTO, ON M4T2T5 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,093.75 |
| 3.92 | Nonpriority creditor's name and mailing address CST CO. PO BOX 140766 LOUISVILLE, KY 40232 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$75.00 |
| 3.93 | Nonpriority creditor's name and mailing address CW ANALYTICAL LABORATORIES 851 81ST AVENUE UNIT D OAKLAND, CA 94621 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,463.18 |

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| | | | Amount of claim |
|------|---|--|-----------------|
| 3.94 | Nonpriority creditor's name and mailing address CORTH INC 1403 VERSAILLES RD. LEXINGTON, KY 40504 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$245.31 |
| 3.95 | Nonpriority creditor's name and mailing address D & B ELECTRIC AND COMMUNICATIONS, LLC 686 HALCOMBE LANE PAINT LICK, KY 40461 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,271.65 |
| 3.96 | Nonpriority creditor's name and mailing address DAVID GRAND PO BOX 182 BRACEBRIDGE, ON P1L 1T6 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$495,462.22 |
| 3.97 | Nonpriority creditor's name and mailing address DEAN DORTON ALLEN FORD 106 W. VINE ST. SUITE 600 LEXINGTON, KY 40507 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$496,550.08 |
| 3.98 | Nonpriority creditor's name and mailing address DEE FARM PO BOX F ALICEVILLE, AL 35441 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$21,300.00 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.99 | Nonpriority creditor's name and mailing address DENNSCO INDUSTRIAL SAFETY LLC 4049 GROVE PARK CIRCLE BIRMINGHAM, AL 35242 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,700.00 |
| 3.100 | Nonpriority creditor's name and mailing address DH WIRELESS SOLUTIONS 175 HILL BRADY RD. BATTLE CREEK, MI 49037 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,421.51 |
| 3.101 | Nonpriority creditor's name and mailing address DIAMOND FOREST RESOURCES INC PO BOX 788 MOREHEAD, KY 40351 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,000.00 |
| 3.102 | Nonpriority creditor's name and mailing address DISCOUNT VIALS 2842 PROGRESS RD MADISON, WI 53716 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,814.76 |
| 3.103 | Nonpriority creditor's name and mailing address DONNELLEY FINANCIAL LLC PO BOX 842282 BOSTON, MA 02284-2282 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$21,076.35 |

Part 2: Additional Page

| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.104 | Nonpriority creditor's name and mailing address DRENNEN, RICHARD H. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.105 | Nonpriority creditor's name and mailing address DRISTEL FINANCE S.A. C/O LYNCH, COX, GILMAN & GOODMAN ATTN: JOSEPH PATRICK HUMMEL LOUISVILLE, KY 40202 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.106 | Nonpriority creditor's name and mailing address DUPLICATOR SALES AND SERVICE 831 EAST BROADWAY LOUISVILLE, KY 40204 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,986.01 |
| 3.107 | Nonpriority creditor's name and mailing address ECOLAB PO BOX 32027 NEW YORK, NY 10087-2027 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,431.68 |
| 3.108 | Nonpriority creditor's name and mailing address ECRM 27070 MILES RD. SUITE A SOLON, OH 44139 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,200.00 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.109 | Nonpriority creditor's name and mailing address ECS BRANDS 295 INTERLOCKEN BLVD # 500 BROOMFIELD, CO 80021 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$250,000.00 |
| 3.110 | Nonpriority creditor's name and mailing address EDQM 7 ALLÉE KASTNER CS 30026 STRASBOURG 67081 FRANCE Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$598.99 |
| 3.111 | Nonpriority creditor's name and mailing address EIC TECHNOLOGIES, INC. 6701 ARTISAN WAY LOUISVILLE, KY 40228 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$924.29 |
| 3.112 | Nonpriority creditor's name and mailing address EIDE BAILLY LLP 5929 FASHION POINT DR. SUITE 300 OGDEN, UT 84403 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$128,010.74 |
| 3.113 | Nonpriority creditor's name and mailing address EMPIRE ADVOCATES LLC BARCLAY DAMON TOWER 125 E. JEFFERSON ST. SYRACUSE, NY 13202 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$102,200.00 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.114 | Nonpriority creditor's name and mailing address EMPLOYMENT SCREENING SERVICES DEPT. K PO BOX 830520 BIRMINGHAM, AL 35283 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$101.10 |
| 3.115 | Nonpriority creditor's name and mailing address ENTERPRISE RENT-A-CAR EAN SERVICES, LLC PO BOX 402383 ATLANTA, GA 30384-2383 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$500.00 |
| 3.116 | Nonpriority creditor's name and mailing address ENVIRONMENTAL MANAGEMENT CONSULTANTS 427 MAIN STREET EVANSVILLE, IN 47708 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,622.50 |
| 3.117 | Nonpriority creditor's name and mailing address EPPIC FILMS 124 GADWALL LANE WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$29,250.00 |
| 3.118 | Nonpriority creditor's name and mailing address EPS PRODUCTS LLC 1490 HWY 35 SPARTA, KY 41086 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$55,638.00 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.119 | Nonpriority creditor's name and mailing address EUROPEAN INDUSTRIAL HEMP ASSOCIATION INDUSTRIESTR. 300 HURTH 50354 GERMANY Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,125.25 |
| 3.120 | Nonpriority creditor's name and mailing address FACE AND BODY COSMETICS 133 CHARTER PLACE LA VERGNE, TN 37086 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,075.44 |
| 3.121 | Nonpriority creditor's name and mailing address FALDER'S INC. 1428 CUBA RD MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,270.72 |
| 3.122 | Nonpriority creditor's name and mailing address FARM JOURNAL INC. PO BOX 28742 NEW YORK, NY 10087-8742 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$100,000.00 |
| 3.123 | Nonpriority creditor's name and mailing address FARMACEUTICAL PARTNERS, LLC 125 HWY 75 BLOUNTVILLE, TN 37617 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$40,274.27 |

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| | | | Amount of claim |
|-------|--|---|-----------------|
| 3.124 | Nonpriority creditor's name and mailing address FAST SLOW MOTION 2120 16TH AVENUE SOUTH SUITE 310 BIRMINGHAM, AL 35205 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$31,500.00 |
| 3.125 | Nonpriority creditor's name and mailing address FAYETTE COUNTY CLERK 162 EAST MAIN ST. LEXINGTON, KY 40507 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GOVERNMENT ENTITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$424.56 |
| 3.126 | Nonpriority creditor's name and mailing address FAYETTE COUNTY CLERK 162 EAST MAIN ST. LEXINGTON, KY 40507 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GOVERNMENT ENTITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.127 | Nonpriority creditor's name and mailing address FENNER, HEATHER D. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.128 | Nonpriority creditor's name and mailing address FERN EXPOSITION SERVICES LLC 645 LINN ST CINCINNATI, OH 45203 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,553.84 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.129 | Nonpriority creditor's name and mailing address FIREFLY NA 7753 E. OVERLOOK DRIVE SCOTTSDALE, AZ 85255 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$146,042.40 |
| 3.130 | Nonpriority creditor's name and mailing address FISCALNOTE 1201 PENNSYLVANIA AVE NW, 6TH FLOOR WASHINGTON, DC 20004 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,500.00 |
| 3.131 | Nonpriority creditor's name and mailing address FISKARS PO BOX 802587 CHICAGO, IL 60680-2587 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$847.03 |
| 3.132 | Nonpriority creditor's name and mailing address FLANDERS, BRYAN L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.133 | Nonpriority creditor's name and mailing address FLORANCE 10 OCEANA WAY NORWOOD, MA 20262 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: NOTE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$600,000.00 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.134 | Nonpriority creditor's name and mailing address FRANK RECRUITMENT GROUP 110 WILLIAM STREET FL 21 NEW YORK, NY 10038 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$35,000.00 |
| 3.135 | Nonpriority creditor's name and mailing address FRED C. GLOECKNER & COMPANY, INC. 550 MAMARONECK AVENUE, SUITE 510 HARRISON, NY 10528 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,537.67 |
| 3.136 | Nonpriority creditor's name and mailing address FRESH CUT LAWN SERVICES 330 BUFFALO TRACE WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,283.41 |
| 3.137 | Nonpriority creditor's name and mailing address FRITSCH, STEFANIE L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.138 | Nonpriority creditor's name and mailing address FROST BROWN TODD LLC PO BOX 70087 LOUISVILLE, KY 40270-0087 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$132,559.68 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.139 | Nonpriority creditor's name and mailing address FUGATE, ZACHARY 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.140 | Nonpriority creditor's name and mailing address GALBRAITH LABORATORIES INC. PO BOX 51610 KNOXVILLE, TN 37950-1610 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,500.00 |
| 3.141 | Nonpriority creditor's name and mailing address GALLUP INC PO BOX 310284 DES MOINES, IA 50331-0284 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$524.70 |
| 3.142 | Nonpriority creditor's name and mailing address GARRARD COUNTY WATER ASSOCIATION 315 LEXINGTON RD PO BOX 670 LANCASTER, KY 40444-0670 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$430.16 |
| 3.143 | Nonpriority creditor's name and mailing address GARY SHELL 1172 RICHMOND ROAD LOOP 2 LANCASTER, KY 40444 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: REAL PROPERTY LEASE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$450,000.00 |

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| | | | Amount of claim |
|-------|--|---|-----------------|
| 3.144 | Nonpriority creditor's name and mailing address GEBR. KNOLL ACHTHOEVENWEG 40 7951 SK STAPHORST NETHERLANDS Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$566.42 |
| 3.145 | Nonpriority creditor's name and mailing address GIBSON, JAMES C. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.146 | Nonpriority creditor's name and mailing address GLOBAL INDUSTRIAL 11 HARBOR PARK DR. PORT WASHINGTON, NY 11050 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,186.10 |
| 3.147 | Nonpriority creditor's name and mailing address GOLD COAST 2429 YATES AVE. COMMERCE, CA 90040 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$336.13 |
| 3.148 | Nonpriority creditor's name and mailing address GOWEIL DAVIDSCHLAG 11 KIRCHSCHLAG A-4202 AUSTRIA Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$59,846.51 |

Part 2: Additional Page

| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.149 | Nonpriority creditor's name and mailing address GRAHAMS 847 BYPASS RD. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,071.13 |
| 3.150 | Nonpriority creditor's name and mailing address GRAINGER DEPT. 886654742 PALATINE, IL 60038-0001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$531.65 |
| 3.151 | Nonpriority creditor's name and mailing address GRAPHIC PRODUCTIONS INC 2108 LEAFLAND PLACE LEXINGTON, KY 40515 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$20,931.34 |
| 3.152 | Nonpriority creditor's name and mailing address GREAT PLAINS ANALYTICAL LABORATORY 9503 N CONGRESS AVE KANSAS CITY, MO 64153 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,070.20 |
| 3.153 | Nonpriority creditor's name and mailing address GREENFIELD GLOBAL DEPARTMENT # 267501 PO BOX 67000 DETROIT, MI 48267-2675 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$120,751.37 |

Part 2: Additional Page

| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.154 | Nonpriority creditor's name and mailing address GREER NEON CO., INC. 325 W. BROADWAY MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,378.00 |
| 3.155 | Nonpriority creditor's name and mailing address GRIFFIN GREENHOUSE SUPPLIES PO BOX 842937 BOSTON, MA 02284-2937 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$48,419.48 |
| 3.156 | Nonpriority creditor's name and mailing address GRIMKAR INVESTMENT S.A. C/O LYNCH, COX, GILMAN & GOODMAN ATTN: JOSEPH PATRICK HUMMEL LOUISVILLE, KY 40202 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.157 | Nonpriority creditor's name and mailing address GROHAPPY INC PO BOX 754 DAVENPORT, FL 33837 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$77,332.48 |
| 3.158 | Nonpriority creditor's name and mailing address H & R AGRI-POWER 843 E BROADWAY MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,114.35 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.159 | Nonpriority creditor's name and mailing address HAMMERHEAD SIGNS 1023 W. LEXINGTON AVE. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,265.66 |
| 3.160 | Nonpriority creditor's name and mailing address HAMPTON INN WINCHESTER 1025 EARLY DR. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$8,338.56 |
| 3.161 | Nonpriority creditor's name and mailing address HARRINGTON INDUSTRIAL PLASTICS P.O. BOX 991099 LOUISVILLE, KY 40269 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$33,736.18 |
| 3.162 | Nonpriority creditor's name and mailing address HARRIS, MICHAEL S. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.163 | Nonpriority creditor's name and mailing address HAWTHORNE GARDENING CO 800 PORT WASHINGTON BLVD PORT WASHINGTON, NY 11050 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$221.85 |

Part 2: Additional Page

| | | | Amount of claim |
|-------|--|---|-----------------|
| 3.164 | Nonpriority creditor's name and mailing address HCA PHARMACY AND MEDICAL EQUIPMENT 1113 WEST LEXINGTON AVE. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$55.00 |
| 3.165 | Nonpriority creditor's name and mailing address HELENA AGRI ENTERPRISES LLC PO BOX 846350 DALLAS, TX 75284-6350 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$50,548.30 |
| 3.166 | Nonpriority creditor's name and mailing address HEMP AND CBD MEDIA LIMITED COTES PARK LANE ALFRETON DE55 4NJ UNITED KINGDOM Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,488.80 |
| 3.167 | Nonpriority creditor's name and mailing address HEMP KENTUCKY GROWERS 2101 CAPSTONE DR. STE. 120 LEXINGTON, KY 40511 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: UNSECURED LOAN Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,533,135.00 |
| 3.168 | Nonpriority creditor's name and mailing address HEMP KENTUCKY GROWERS LLC 2101 CAPSTONE DR. STE. 120 LEXINGTON, KY 40511 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |

Part 2: Additional Page

| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.169 | Nonpriority creditor's name and mailing address HEMP OIL CANADA 69 EAGLE DR. WINNIPEG, MB R2R1V4 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$52,400.00 |
| 3.170 | Nonpriority creditor's name and mailing address HENDERSON SERVICES LLC 1140 FLOYD DR. LEXINGTON, KY 40505 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$17,962.99 |
| 3.171 | Nonpriority creditor's name and mailing address HENRY WATZ RAINE & MARINO PLLC 401 WEST MAIN STREET LEXINGTON, KY 40507 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,050.00 |
| 3.172 | Nonpriority creditor's name and mailing address HIGHBRIDGE SPRING WATER CO INC PO BOX 100 WILMORE, KY 40390 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$18.59 |
| 3.173 | Nonpriority creditor's name and mailing address HISTORIC TAYLOR MANOR LLC 2527 BECKNERVILLE ROAD WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,500.00 |

Part 2: Additional Page

| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.174 | Nonpriority creditor's name and mailing address HOLIDAY INN EXPRESS 100 WINCHESTER PLAZA WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,809.58 |
| 3.175 | Nonpriority creditor's name and mailing address HOMEWOOD SUITES 2033 BRYANT RD LEXINGTON, KY 40509 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.176 | Nonpriority creditor's name and mailing address HORST FRISCH INC. 2450 N STREET SUITE 310 WASHINGTON, DC 20037 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$30,998.19 |
| 3.177 | Nonpriority creditor's name and mailing address HOULIHAN DISPUTE RESOLUTION PLLC 333 W VINE ST STE 300 LEXINGTON, KY 40507 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,090.00 |
| 3.178 | Nonpriority creditor's name and mailing address HTI, INC, HTI, INC. 105 N. SPRING ST. GREENVILLE, SC 29601 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$750.00 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.179 | Nonpriority creditor's name and mailing address HUGH N WILSON 1305 KY HWY 590 STANFORD, KY 40484 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,000.00 |
| 3.180 | Nonpriority creditor's name and mailing address HULL, WAYNE 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.181 | Nonpriority creditor's name and mailing address HUMANA HEALTH PLAN INC PO BOX 3225 MILWAUKEE, WI 53201-3225 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$259,573.80 |
| 3.182 | Nonpriority creditor's name and mailing address I5 DESIGN GROUP INC 401 BROADWAY PADUCAH, KY 42001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$630.00 |
| 3.183 | Nonpriority creditor's name and mailing address IDEALS SOLUTIONS GROUP 815 N ROYAL ST. SUITE 202 ALEXANDRIA, VA 22314 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$606.68 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.184 | Nonpriority creditor's name and mailing address IIR EXHIBITIONS LTD 2ND FLOOR 5 HOWICK PLACE LONDON SW1P 1WG UNITED KINGDOM Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$45,812.30 |
| 3.185 | Nonpriority creditor's name and mailing address ILOBBY CORP. 3605 WESTEN ROAD TORONTO, ON M9L 1V7 CANADA Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$10,575.00 |
| 3.186 | Nonpriority creditor's name and mailing address INFORMA EXHIBITIONS PO BOX 419018 BOSTON, MA 02241-9018 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$8,750.00 |
| 3.187 | Nonpriority creditor's name and mailing address INFORMA MEDIA INC 24654 NETWORK PLACE CHICAGO, IL 60673-1246 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,500.00 |
| 3.188 | Nonpriority creditor's name and mailing address INTEGRA OPTICS 745 ALBANY SHAKER ROAD LATHAM, NY 12110 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,809.32 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.189 | Nonpriority creditor's name and mailing address INTELEPEER DEPT LA 24295 PASADENA, CA 91185-4295 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$980.21 |
| 3.190 | Nonpriority creditor's name and mailing address INVGATE INC 540 HOWARD ST. 2ND FLOOR # 122 SAN FRANCISCO, CA 94105 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$540.00 |
| 3.191 | Nonpriority creditor's name and mailing address INVISION-COMCORCO 11341 DECIMAL DR. LOUISVILLE, KY 40299 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$41,681.00 |
| 3.192 | Nonpriority creditor's name and mailing address IUCG CORP DBA SUNSHINE DESIGN 324 CAMPUS LANE, STE B FAIRFIELD, CA 94534 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$31,974.11 |
| 3.193 | Nonpriority creditor's name and mailing address JASON EPPERSON AND EPPIC FILMS, INC. C/O WHITE, MCCANN & STEWART PO BOX 578 WINCHESTER, KY 40392-0578 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.194 | Nonpriority creditor's name and mailing address JEDWARDS INTERNATIONAL INC 141 CAMJPANELLI DR. BRAINTREE, MA 02184 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$64,942.73 |
| 3.195 | Nonpriority creditor's name and mailing address JIFFY PRODUCTS OF AMERICA INC DEPT 0390 PO BOX 120390 DALLAS, TX 75312-0390 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$129,945.00 |
| 3.196 | Nonpriority creditor's name and mailing address JOHN S. LEAMAN C/O LYNCH, COX, GILMAN & GOODMAN ATTN: JOSEPH PATRICK HUMMEL LOUISVILLE, KY 40202 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.197 | Nonpriority creditor's name and mailing address JOINPLUS J. SMITH LANIER & CO SERVICE CENTER PO BOX 70 WEST POINT, GA 31833 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,076.00 |
| 3.198 | Nonpriority creditor's name and mailing address JONAH BRANNON 12500 HWY 641 NORTH PURYEAR, TN 38251 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$750.00 |

Part 2: Additional Page

| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.199 | Nonpriority creditor's name and mailing address KAI SU KAI SU 677 SOUTHPOINT DRIVE LEXINGTON, KY 40515 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.200 | Nonpriority creditor's name and mailing address KEMI PAYMENT PROCESSING CENTER PO BOX 12500 LEXINGTON, KY 40583-2500 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$113,482.19 |
| 3.201 | Nonpriority creditor's name and mailing address KENTUCKY AIRMOTIVE 709 AIRPORT ROAD MOUNT STERLING, KY 40353 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,704.37 |
| 3.202 | Nonpriority creditor's name and mailing address KENTUCKY AMERICAN WATER PO BOX 790247 ST LOUIS, MO 63179-0247 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$351.56 |
| 3.203 | Nonpriority creditor's name and mailing address KENTUCKY BANK 360 EAST VINE STREET SUITE 100 LEXINGTON, KY 40507 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$39,716.07 |

Part 2: Additional Page

| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.204 | Nonpriority creditor's name and mailing address KENTUCKY CHAMBER 464 CHENAULT ROAD FRANKFORT, KY 40601 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,000.00 |
| 3.205 | Nonpriority creditor's name and mailing address KENTUCKY DEPARTMENT OF AGRICULTURE HEMP PROGRAM 111 CORPORATE DRIVE FRANKFORT, KY 40601 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GOVERNMENT ENTITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.206 | Nonpriority creditor's name and mailing address KENTUCKY IRRIGATION 605 BLUE SKY PARKWAY LEXINGTON, KY 40509 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,157.14 |
| 3.207 | Nonpriority creditor's name and mailing address KENTUCKY RESTAURANT ASSOCIATION 133 EVERGREEN RD. SUITE 201 LOUISVILLE, KY 40243 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,710.00 |
| 3.208 | Nonpriority creditor's name and mailing address KENTUCKY UTILITIES COMPANY KENTUCKY UTILITIES PO BOX 25212 LEHIGH VALLEY, PA 18002-5212 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,258.12 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.209 | Nonpriority creditor's name and mailing address KING BOTTLING INC 6311 CLIMAX RD. ORLANDO, KY 40460 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,175.00 |
| 3.210 | Nonpriority creditor's name and mailing address KINGDOM WORD FELLOWSHIP 433 WALNUT STREET WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,000.00 |
| 3.211 | Nonpriority creditor's name and mailing address KNIFLEY, ROLLIN J. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.212 | Nonpriority creditor's name and mailing address KNIGHTHORST SHREDDING LLC P.O. BOX 424 BRENTWOOD, TN 37024-0424 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$235.40 |
| 3.213 | Nonpriority creditor's name and mailing address KORN FERRY NW 5854 PO BOX 1450 MINNEAPOLIS, MN 55485-5854 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$131,191.00 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.214 | Nonpriority creditor's name and mailing address LAIDIG SYSTEMS INC 14535 DRAGOON TRAIL MISHAWAKA, IN 46544-6896 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$96,350.00 |
| 3.215 | Nonpriority creditor's name and mailing address LAKE BREEZE FARMS LLC PO 123 CATO, NY 13033 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$804,608.77 |
| 3.216 | Nonpriority creditor's name and mailing address LANDSTAR 12793 COLLECTIONS CENTER DR CHICAGO, IL 60693 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$431,993.97 |
| 3.217 | Nonpriority creditor's name and mailing address LANES MOBILE JOHN INC 3133 VANZORA ROAD BENTON, KY 42025 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,760.25 |
| 3.218 | Nonpriority creditor's name and mailing address LAZ PARKING PO BOX 8315 DENVER, CO 80201 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$860.00 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.219 | Nonpriority creditor's name and mailing address LECORP 3503 CLINTON ROAD PADUCAH, KY 42001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$536,475.18 |
| 3.220 | Nonpriority creditor's name and mailing address LES ELECTRICAL SERVICE LLC 227 ROBERT COURT WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$41,320.00 |
| 3.221 | Nonpriority creditor's name and mailing address LEXINGTON FAYETTE URBAN COUNTY GOVERNMENT P.O. BOX 34090 LEXINGTON, KY 40588-4090 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GOVERNMENT ENTITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$33.41 |
| 3.222 | Nonpriority creditor's name and mailing address LEX-ROOTER SEWER & DRAIN CLEANING 320 UNITED CT SUITE # 3 LEXINGTON, KY 40509 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$875.00 |
| 3.223 | Nonpriority creditor's name and mailing address LEYBOLD USA INC. 25968 NETWORK PLACE CHICAGO, IL 60673-1259 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$740.28 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.224 | Nonpriority creditor's name and mailing address LIQUIDATORS WORLD HOLDING, LLC 5481 B CREEK RD CINCINNATI, OH 45242 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,663.22 |
| 3.225 | Nonpriority creditor's name and mailing address LIVE NATION WORLDWIDE INC DEPT LA23613 PASADENA, CA 91185-3613 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$10,000.00 |
| 3.226 | Nonpriority creditor's name and mailing address LOUISVILLE DRYER COMPANY 12711 TOWNEPARK WAY LOUISVILLE, KY 40243 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$645,831.00 |
| 3.227 | Nonpriority creditor's name and mailing address LOWES 1000 LOWE'S BOULEVARD MOORESVILLE, NC 28117 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$199.64 |
| 3.228 | Nonpriority creditor's name and mailing address LOWES - LAR ACCOUNT LOWES PO BOX 530954 ATLANTA, GA 30353-0954 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$30,993.24 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.229 | Nonpriority creditor's name and mailing address M W WATERMARK M.W. WATERMARK 4660 136TH AVE. HOLLAND, MI 49424 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,639.32 |
| 3.230 | Nonpriority creditor's name and mailing address MAGID GLOVE AND SAFETY MANUFACTURING 1300 NAPERVILLE DR ROMEDEVILLE, IL 60446 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$80.74 |
| 3.231 | Nonpriority creditor's name and mailing address MAIA PRODUCTS, INC. - HORMEX 3835R E. THOUSAND OAKS BLVD. # 290 WESTLAKE VILLAGE, CA 91362 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,827.16 |
| 3.232 | Nonpriority creditor's name and mailing address MAKO INDUSTRIES, LLC 382 HAVEN RD MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,169.54 |
| 3.233 | Nonpriority creditor's name and mailing address MARCUM ENGINEERING INC 500 S 17TH ST PO BOX 120 PADUCAH, KY 42002 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$38,470.49 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.234 | Nonpriority creditor's name and mailing address MARCUM LLP 750 THIRD AVENUE, 11TH FLOOR NEW YORK, NY 10017 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$26,007.50 |
| 3.235 | Nonpriority creditor's name and mailing address MARIMED HEMP 10 OCEANA WAY FLOOR 2 NORWOOD, MA 02062 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$33,200,000.08 |
| 3.236 | Nonpriority creditor's name and mailing address MASON TECHNOLOGIES, INC. BRUCE VENTURA 517 COMMACK ROAD DEER PARK, NY 11729 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$478,722.50 |
| 3.237 | Nonpriority creditor's name and mailing address MATT DEARINGER PLUMBING 292 PLEASANT POINTE LEXINGTON, KY 40517 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,362.88 |
| 3.238 | Nonpriority creditor's name and mailing address MATTINGLY SILO INC. 7655 BLOOMFIELD ROAD BARDSTOWN, KY 40004 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$41,767.14 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.239 | Nonpriority creditor's name and mailing address MATTY MIRANDA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.240 | Nonpriority creditor's name and mailing address MAYFIELD EWS P.O. BOX 347 MAYFIELD, KY 42066-2405 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$43.17 |
| 3.241 | Nonpriority creditor's name and mailing address MAYNARD COOPER GALE 1901 SIXTH AVE. NORTH 2400 REGIONS/HARBERT PLAZA BRIMINGHAM, AL 35203-2618 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,603.50 |
| 3.242 | Nonpriority creditor's name and mailing address MCCLANAHAN EYE CARE 130 HOSPITAL DR. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$725.00 |
| 3.243 | Nonpriority creditor's name and mailing address MCGOWAN, JAMES R. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |

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| | | | Amount of claim |
|-------|--|---|-----------------|
| 3.244 | Nonpriority creditor's name and mailing address MCMaster-CARR SUPPLY COMPANY PO BOX 7690 CHICAGO, IL 60680-7690 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,019.49 |
| 3.245 | Nonpriority creditor's name and mailing address MCNAMARA SEARCH ASSOCIATES INC 2280 GUILFORD CENTRE LEXINGTON, KY 40513 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$29,250.00 |
| 3.246 | Nonpriority creditor's name and mailing address MEDSUPPLY PARTNERS ACCOUNTS RECEIVABLE 3715 ATLANTA INDUSTRIAL PKWY NW SUITE B ATLANTA, GA 30331-1063 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$65.32 |
| 3.247 | Nonpriority creditor's name and mailing address MEECE, BOBBY R. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.248 | Nonpriority creditor's name and mailing address MERCER (US) INC 99 HIGH ST BOSTON, MA 02110 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$12,938.00 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.249 | Nonpriority creditor's name and mailing address MERCER, TYLER S. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.250 | Nonpriority creditor's name and mailing address MICROBAC LABORATORIES, INC. PO BOX 3510 PITTSBURGH, PA 15230 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$160.00 |
| 3.251 | Nonpriority creditor's name and mailing address MIDWEST AVIATION SERVICES 200 HARDY ROBERTS DRIVE PO BOX 219 W. PADUCAH, KY 42086 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$465.23 |
| 3.252 | Nonpriority creditor's name and mailing address MIDWEST LABORATORIES INC 13611 B STREET OMAHA, NE 68144 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$155.00 |
| 3.253 | Nonpriority creditor's name and mailing address MIRANDA, MATTY 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |

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| | | | Amount of claim |
|-------|--|---|-----------------|
| 3.254 | Nonpriority creditor's name and mailing address MOLECULAR HEALTH TECHNOLOGIES 48 ESSEX ST. SUITE 204 MILBURN, NJ 07041 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$281,910.14 |
| 3.255 | Nonpriority creditor's name and mailing address MONTY'S PLANT FOOD 4800 STRAWBERRY LANE LOUISVILLE, KY 40209 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,837.84 |
| 3.256 | Nonpriority creditor's name and mailing address MOO INC ATTN. ACCOUNTS RECEIVABLE 109 KINGSTON ST., FLOOR2 BOSTON, MA 02111 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,059.42 |
| 3.257 | Nonpriority creditor's name and mailing address MORRIS, JAMES S. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.258 | Nonpriority creditor's name and mailing address MOTORISTS MUTUAL INSURANCE COMPANY 471 EAST BROAD STREET COLUMBUS, OH 43215 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$925.63 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.259 | Nonpriority creditor's name and mailing address MURRAY STATE UNIVERSITY HUTSON SCHOOL OF AGRICULTURE 102 CURRIS CENTER MURRAY, KY 42071 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$20,000.00 |
| 3.260 | Nonpriority creditor's name and mailing address NANTICOKE GARDENS 1543 UNION CENTER MAINE HWY ENDICOTT, NY 13760 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$40,041.60 |
| 3.261 | Nonpriority creditor's name and mailing address NATIONAL FIRE ADJUSTMENT COMPANY INC 5850 COURT STREET ROAD SYRACUSE, NY 13206-1703 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,858.87 |
| 3.262 | Nonpriority creditor's name and mailing address NATLAND INTERNATIONAL CORP. 3000 BEARCAT WAY SUITE 111 MORRISVILLE, NC 27560 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,660.00 |
| 3.263 | Nonpriority creditor's name and mailing address NEELY, BRIEN, WILSON & TOOMBS, PLLC 238 NORTH 7TH ST. PO BOX 708 MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,697.80 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.264 | Nonpriority creditor's name and mailing address NETAFIM IRRIGATION, INC 5470 E. HOME AVENUE FRESNO, CA 93727 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$29,062.18 |
| 3.265 | Nonpriority creditor's name and mailing address NEV'S INK 2500 WEST SUNSET DR. WAUKESHA, WI 53189 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,594.35 |
| 3.266 | Nonpriority creditor's name and mailing address NEWBY, LINDA 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.267 | Nonpriority creditor's name and mailing address NEWBY'S ECONOMY GLASS SERVICE INC 679 MAGNOLIA AVE. LEXINGTON, KY 40505 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$20.88 |
| 3.268 | Nonpriority creditor's name and mailing address NORFLEX, INC. 720 NORFLEX DRIVE HUDSON, WI 54016 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$43,852.00 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.269 | Nonpriority creditor's name and mailing address NORTHEAST HEMP CBG LIABILITY ATTN: MICHAEL SIMS 616 EXCHANGE STREET MIDDLEBURY, VT 05753 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,000,000.00 |
| 3.270 | Nonpriority creditor's name and mailing address NORTHERN KENTUCKY TOBACCO GREENHOUSE & SUPPLIES 1490 KY-35 SPARTA, KY 41086 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,876.50 |
| 3.271 | Nonpriority creditor's name and mailing address NUTRITIONAL HIGH INC 8800 W 116TH CIRCLE SUITE 7238 BROOMFIELD, CO 80021 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$20,000.00 |
| 3.272 | Nonpriority creditor's name and mailing address OHIO VALLEY SCIENTIFIC LLC 7966 STONEHOUSE RD MELBOURNE, KY 41059 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,960.52 |
| 3.273 | Nonpriority creditor's name and mailing address ORACLE NETSUITE 2955 CAMPUS DR. SUITE 100 SAN MATEO, CA 94403-2511 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$163,007.50 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.274 | Nonpriority creditor's name and mailing address OREGON PROCESSING SOLUTIONS LLC 30395 SE VETERNS BLVD ESTACADA, OR 97023 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$92,060.00 |
| 3.275 | Nonpriority creditor's name and mailing address O'REILLY AUTO PARTS O'REILLY FIRST CALL P.O. BOX 9464 SPRINGFIELD, MO 65801-9464 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,812.91 |
| 3.276 | Nonpriority creditor's name and mailing address ORPHANED STARFISH FOUNDATION 55 EXCHANGE PLACE SUITE 402 NEW YORK, NY 10005 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$25,000.00 |
| 3.277 | Nonpriority creditor's name and mailing address PACIFIC AGRICULTURAL LABORATORIES HOLDING INC PACIFIC AGRICULTURAL LABORATORY LLC 1061 FEEHANVILLE DRIVE MOUNT PROSPECT, IL 83-2055500 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$88,221.00 |
| 3.278 | Nonpriority creditor's name and mailing address PACKAGE ALL LLC 655 CHURCH ST. BAYPORT, NY 11705 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$8,077.16 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.279 | Nonpriority creditor's name and mailing address PAC-VAN INC. 75 REMITTANCE DRIVE SUITE 3300 CHICAGO, IL 60675-3300 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,957.11 |
| 3.280 | Nonpriority creditor's name and mailing address PADUCAH AREA CHAMBER OF COMMERCE PO BOX 810 PADUCAH, KY 42002-0810 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GOVERNMENT ENTITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,000.00 |
| 3.281 | Nonpriority creditor's name and mailing address PADUCAH POWER SYSTEM PO BOX 180 PADUCAH, KY 42002-0180 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,522.64 |
| 3.282 | Nonpriority creditor's name and mailing address PADUCAH WATER PO BOX 2477 PADUCAH, KY 42002-2477 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$260.68 |
| 3.283 | Nonpriority creditor's name and mailing address PAX LABS, INC. ACCOUNTS RECEIVABLE PAX LABS INC 660 ALABAMA ST. 2ND FLOOR SAN FRANCISCO, CA 94110 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$10,000.00 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.284 | Nonpriority creditor's name and mailing address PAY GOVERNANCE LLC 100 N. 18TH STREET, SUITE 821 TWO LOGAN SQUARE PHILADELPHIA, PA 19103 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$19,462.50 |
| 3.285 | Nonpriority creditor's name and mailing address PAYNTER WHOLESALE TIRE INC PAYNTER TIRE AND SERVICE CENTER 101 DAYTONA DRIVE ATTN: REGINA ASTER WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$54.95 |
| 3.286 | Nonpriority creditor's name and mailing address PDO OF KENTUCKY 230 INDUSTRIAL PKWY NICHOLASVILLE, KY 40356 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$53,982.47 |
| 3.287 | Nonpriority creditor's name and mailing address PEARSON SAFETY SERVICES 96 WEST UNIVERSITY PARKWAY, STE C JACKSON, TN 38305 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,130.00 |
| 3.288 | Nonpriority creditor's name and mailing address PENNSYLVANIA SCALE CO 73 COGWHEEL LANE SEYMOUR, CT 06483 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,145.68 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.289 | Nonpriority creditor's name and mailing address PERRY JOHNSON LABORATORY ACCREDITATION, INC. 755 W. BIG BEAVER STE. 1325 TROY, MI 48084 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,081.27 |
| 3.290 | Nonpriority creditor's name and mailing address PESINA, JOSE 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.291 | Nonpriority creditor's name and mailing address PHARMCO LABORATORIES INC. 3520 SOUTH ST. TITUSVILLE, FL 32780 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,000.00 |
| 3.292 | Nonpriority creditor's name and mailing address PHILIP WELLS PHILIP WELLS 4610 HAMILTON LANE LEXINGTON, KY 40511 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,338,506.34 |
| 3.293 | Nonpriority creditor's name and mailing address PHYTONYX LLC 240 EAST HERSEY STREET SUITE 1 ASHLAND, OR 97520 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,250,000.00 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.294 | Nonpriority creditor's name and mailing address PILLSBURY WINTHROP SHAW PITTMAN LLP PO BOX 30769 NEW YORK, NY 10087-0769 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,345,396.02 |
| 3.295 | Nonpriority creditor's name and mailing address PINNACLE AGRICULTURE 1880 FALL RIVER DRIVE SUIT 100 LOVELAND, CO 80538 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$159,991.05 |
| 3.296 | Nonpriority creditor's name and mailing address PINNACLE, INC. C/O DELCOTTO LAW GROUP ATTN: LAURA DELCOTTO 200 NORTH UPPER ST LEXINGTON, KY 40507 Date or dates debt was incurred Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.297 | Nonpriority creditor's name and mailing address PODS OF LEXINGTON 13535 FEATHER SOUND DRIVE CLEARWATER, FL 33762 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,183.42 |
| 3.298 | Nonpriority creditor's name and mailing address POLYMER PACKAGING 8333 NAVARRE ROAD SE MASSILLON, OH 44646 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$15,555.86 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.299 | Nonpriority creditor's name and mailing address POOLER JANITOR SUPPLY PO BOX 672 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,638.99 |
| 3.300 | Nonpriority creditor's name and mailing address POPE SCIENTIFIC INC. POPE SCIENTIFIC 351 NORTH DEKORA WOODS BLVD. PO BOX 80018 SAUKVILLE, WI 53080 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,000.00 |
| 3.301 | Nonpriority creditor's name and mailing address POWER EQUIPMENT COMPANY OF MEMPHIS POWER EQUIPMENT COMPANY PO BOX 22007 MEMPHIS, TN 38122 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$325,688.91 |
| 3.302 | Nonpriority creditor's name and mailing address PRECISION CALIBRATION SYSTEMS 117 EAST MAIN STREET MORRISTOWN, TN 37814 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$41.00 |
| 3.303 | Nonpriority creditor's name and mailing address PRECISION MANAGEMENT & CONSULTING (PMC) P.O. BOX 316 MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,010.00 |

Part 2: Additional Page

| | | | Amount of claim |
|-------|--|---|-----------------|
| 3.304 | Nonpriority creditor's name and mailing address PREMIUM HORTICULTURE SUPPLY CO. PO BOX 990 PERRYSBURG, OH 43552-0990 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,671.27 |
| 3.305 | Nonpriority creditor's name and mailing address PROVERDE LABORATORIES 420 FORTUNE BLVD. MILFORD, MA 01757 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$159,790.00 |
| 3.306 | Nonpriority creditor's name and mailing address PRYOR, DEJON L. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.307 | Nonpriority creditor's name and mailing address PURE GLOBAL INC. 500 CAPITOL MALL STE 2350 SACRAMENTO, CA 95814 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$69,400.00 |
| 3.308 | Nonpriority creditor's name and mailing address QC MATERIAL HANDLING EQUIPMENT 10921 REED HARTMAN HWY # 321 CINCINNATI, OH 45242 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$65,285.07 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.309 | Nonpriority creditor's name and mailing address QORPAK INTERNET 2300 SWEENEY DR. CLINTON, PA 15026 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,421.76 |
| 3.310 | Nonpriority creditor's name and mailing address QT CORPORATION 2700 FOREST HILLS LOOP WILSON, NC 27893 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,205.00 |
| 3.311 | Nonpriority creditor's name and mailing address R L CARRIERS PO BOX 10020 PORT WILLIAM, OH 45164-2000 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$49,755.31 |
| 3.312 | Nonpriority creditor's name and mailing address R&M R & M 840 YOSEMITE WAY MILPITAS, CA 95035 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,884.66 |
| 3.313 | Nonpriority creditor's name and mailing address RCM TECHNOLOGIES USA INC 20 WATERVIEW BLVD., 4TH FLOOR PARSIPPANY, NJ 07054 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,120.00 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.314 | Nonpriority creditor's name and mailing address REGUS MANAGEMENT GROUP LLC 2333 ALEXANDRIA DR LEXINGTON, KY 40504 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$8,977.85 |
| 3.315 | Nonpriority creditor's name and mailing address REPUBLICAN ATTORNEYS GENERAL ASSOCIATION 1747 PENNSYLVANIA AVENUE, NW SUITE 800 WASHINGTON, DC 20006 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$25,000.00 |
| 3.316 | Nonpriority creditor's name and mailing address RESTEK PO BOX 4276 LANCASTER, PA 17604 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$537.21 |
| 3.317 | Nonpriority creditor's name and mailing address REX LANGHAM REX LANGHAM 3905 DESTINY DR. SPRINGFIELD, IL 62712 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$688.62 |
| 3.318 | Nonpriority creditor's name and mailing address RFSMART INFORMATION & COMPUTING SERVICES, INC. PO BOX 638345 CINCINNATI, OH 45263-8345 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$50.00 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.319 | Nonpriority creditor's name and mailing address RHODUS GARBAGE SERVICE 5018 CARTERSVILLE RD BERE A, KY 40403 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$477.00 |
| 3.320 | Nonpriority creditor's name and mailing address RIVER LINK PO BOX 16799 AUSTIN, TX 78761-6799 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$184.00 |
| 3.321 | Nonpriority creditor's name and mailing address ROAD DOG LOGISTICS, LLC 201 E. EIGHTH ST. CINCINNATI, OH 45202 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,800.00 |
| 3.322 | Nonpriority creditor's name and mailing address ROBERT HALF 12400 COLLECTIONS CENTER DR CHICAGO, IL 60693 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,991.63 |
| 3.323 | Nonpriority creditor's name and mailing address ROBERT SORRELL 105 ELYTON DR BIRMINGHAM, AL 35242 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LOAN Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$275,000.00 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.324 | Nonpriority creditor's name and mailing address ROOF SERVICES, LLC 4475 ROCKWELL RD. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,260.00 |
| 3.325 | Nonpriority creditor's name and mailing address ROTEX GLOBAL, LLC 1230 KNOWLTON STREET CINCINNATI, OH 45223 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,435.00 |
| 3.326 | Nonpriority creditor's name and mailing address ROUND-2-IT PLUMBING 1026 SOMERSET LANE MT. STERLING, KY 40353 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.327 | Nonpriority creditor's name and mailing address ROYAL LABS NATURAL COSMETICS INC PAUL LIEBER ROYAL LABS NATURAL COSMETICS, INC. 2671 FORT TRENHOLM ROAD JOHNS ISLAND, SC 29455 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$73,902.83 |
| 3.328 | Nonpriority creditor's name and mailing address RR DONNELLEY LOGISTIC SERVICES WORLWIDE INC 35 W WACKER DRIVE CHICAGO, IL 60601 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,200.00 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.329 | Nonpriority creditor's name and mailing address RUMPKE OF KENTUCKY INC PO BOX 538710 CINCINNATI, OH 45253-8710 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$15,743.06 |
| 3.330 | Nonpriority creditor's name and mailing address RUNSWITCH PR RUNSWITCH PR 9300 SHELBYVILLE RD. SUITE 1005 LOUISVILLE, KY 40222 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$242,732.58 |
| 3.331 | Nonpriority creditor's name and mailing address SAFETY KLEEN SYSTEMS, INC. PO BOX 382066 PITTSBURGH, PA 15250-8066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,344.59 |
| 3.332 | Nonpriority creditor's name and mailing address SALESFORCE COM INC PO BOX 203141 DALLAS, TX 75320-3141 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$46,930.86 |
| 3.333 | Nonpriority creditor's name and mailing address SCANNAPIECO, ALEX 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.334 | Nonpriority creditor's name and mailing address SCHAEFFER'S 102 BARTON STREET ST. LOUIS, MO 63104 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,199.85 |
| 3.335 | Nonpriority creditor's name and mailing address SCHENCK PROCESS LLC PO BOX 19747 PALATINE, IL 60055-9747 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,666.32 |
| 3.336 | Nonpriority creditor's name and mailing address SCHROCK'S PRODUCE SUPPLY 2598 HWY 39 N CRAB ORCHARD, KY 40419 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,282.34 |
| 3.337 | Nonpriority creditor's name and mailing address SEAY OIL CO. P.O. BOX 1147 HOPKINSVILLE, KY 42241 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,641.36 |
| 3.338 | Nonpriority creditor's name and mailing address SENTRY AIR SYSTEMS INC 21221 FM 529 CYPRESS, TX 77433 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,532.40 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.339 | Nonpriority creditor's name and mailing address SHERWIN WILLIAMS 20 WINCHESTER PLAZA WINCHESTER, KY 40391-1143 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,910.53 |
| 3.340 | Nonpriority creditor's name and mailing address SIGNATURE SPECIAL EVENT SERVICES 1385 PRIDEMORE COURT LEXINGTON, KY 40505 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$166,210.06 |
| 3.341 | Nonpriority creditor's name and mailing address SILVERTRAC SOFTWARE LLC PO BOX 2040 PISMO BEACH, CA 93448 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$998.00 |
| 3.342 | Nonpriority creditor's name and mailing address SIMPSON, STEPHEN A. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.343 | Nonpriority creditor's name and mailing address SITEWORX SURVEY & DESIGN LLC 124 S 31ST ST PADUCAH, KY 42001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$500.00 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.344 | Nonpriority creditor's name and mailing address SKYLINE EXHIBITS UTAH 3355 DISCOVERY RD. EAGAN, MN 55121 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$191,896.42 |
| 3.345 | Nonpriority creditor's name and mailing address SLYKER, JILLIAN R. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.346 | Nonpriority creditor's name and mailing address SONIC PACKAGING INDUSTRIES INC 35 CHARLES STREET WESTWOOD, NJ 07675 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$456.84 |
| 3.347 | Nonpriority creditor's name and mailing address SONITROL OF LEXINGTON INC 3166 CUSTER DR. LEXINGTON, KY 40517 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$917.60 |
| 3.348 | Nonpriority creditor's name and mailing address SOSBY, RODNEY A. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.349 | Nonpriority creditor's name and mailing address SOUTH KENTUCKY PROPANE GAS PO BOX 3194 SOMERSET, KY 42564 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$16,624.96 |
| 3.350 | Nonpriority creditor's name and mailing address SOUTHERN STATES COOP 175 CORDIER LN STANFORD, KY 40484 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,510.00 |
| 3.351 | Nonpriority creditor's name and mailing address SOUTHLAND PRINTING INC 1079 MAJUAN DR. LEXINGTON, KY 40511 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$629.64 |
| 3.352 | Nonpriority creditor's name and mailing address SPARTAN CONSTRUCTION 307 CEDAR ST. LUXEMBURG, WI 54217 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$381.78 |
| 3.353 | Nonpriority creditor's name and mailing address SPECIALTY OIL EXTRACTORS 311 WASHINGTON ST DARLINGTON, SC 29532 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$183,058.36 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.354 | Nonpriority creditor's name and mailing address SPECTRUM TIME WARNER PO BOX 1060 CAROL STREAM, IL 60132-1060 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$8,610.69 |
| 3.355 | Nonpriority creditor's name and mailing address SPEEDPRO IMAGING 1022 NANDINO BLVD LEXINGTON, KY 40511 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,997.04 |
| 3.356 | Nonpriority creditor's name and mailing address SPRINGDOT INC 2611 COLERAIN AVE. CINCINNATI, OH 45214 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.357 | Nonpriority creditor's name and mailing address SQUEEGEE PRO WINDOW CLEANING AND RESTORATION 632 B DOE RUN DR. MOUNT STERLING, KY 40353 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$63.60 |
| 3.358 | Nonpriority creditor's name and mailing address SRM CONCRETE 1136 2ND AVE. NORTH NASHVILLE, TN 37208 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,126.60 |

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| | | | Amount of claim |
|-------|---|---|-----------------|
| 3.359 | Nonpriority creditor's name and mailing address STAPLES DEPT. 11 0007781271 PO BOX 9001036 LOUISVILLE, KY 40290 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$59.85 |
| 3.360 | Nonpriority creditor's name and mailing address STEGEMAN 13329 RIDGEMOOR DR PROSPECT, KY 40059 Date or dates debt was incurred Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LITIGATION Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.361 | Nonpriority creditor's name and mailing address STEWART, SETH A. 321 VENABLE RD. STE 2 WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: EMPLOYEE REIMBURSEMENT Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.362 | Nonpriority creditor's name and mailing address SUNBELT RENTALS INC PO BOX 409211 ATLANTA, GA 30384-9211 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$16,154.10 |
| 3.363 | Nonpriority creditor's name and mailing address SWAGELOK PO BOX 7096 DEPT 232 INDIANAPOLIS, IN 46207-7096 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,299.08 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.364 | Nonpriority creditor's name and mailing address TENNESSEE TRACTOR IRRIGATION 1318 S DUPREE ST. BROWNSVILLE, TN 38012 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,865.67 |
| 3.365 | Nonpriority creditor's name and mailing address TENNESSEE TRACTOR LLC 3676 HIGHWAY 641 SOUTH PARIS, TN 38242 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,001.31 |
| 3.366 | Nonpriority creditor's name and mailing address TERMINIX PO BOX 742592 CINCINNATI, OH 45274-2592 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,459.00 |
| 3.367 | Nonpriority creditor's name and mailing address THE CINCINNATI INSURANCE COMPANIES PO BOX 145620 CINCINNATI, OH 45250-5620 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | UNKNOWN |
| 3.368 | Nonpriority creditor's name and mailing address THE LEBERMUTH COMPANY INC 4004 TECHNOLOGY DR. SOUTH BEND, IN 46628 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,932.64 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.369 | Nonpriority creditor's name and mailing address THE UPS STORE 1619 BYPASS RD. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$172.38 |
| 3.370 | Nonpriority creditor's name and mailing address THERMAL EQUIPMENT 680 BIZZELL DR LEXINGTON, KY 40510 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$6,217.90 |
| 3.371 | Nonpriority creditor's name and mailing address THOMAS ARVIN & ADAMS PLLC 1209 SOUTH VIRGINIA ST PO BOX 675 HOPKINSVILLE, KY 42241 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$16,609.50 |
| 3.372 | Nonpriority creditor's name and mailing address THOMAS WONG 199/69 THE ALCOVE 10 SOI SUKHUMVIT 63, KHLONGTAN NUEA KHET WATTANA BANGKOK, THAILAND 10110 THAILAND Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$4,000.00 |
| 3.373 | Nonpriority creditor's name and mailing address TOYOTA INDUSTRIES COMMERCIAL FINANCE INC PO BOX 660926 DALLAS, TX 75266-0926 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,610.40 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.374 | Nonpriority creditor's name and mailing address TRIANGLE 3630 CAIRO ROAD PADUCAH, KY 42001 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$13,857.00 |
| 3.375 | Nonpriority creditor's name and mailing address TURNER ENVIROLOGIC 1140 S.W. 34TH AVENUE DEERFIELD BEACH, FL 33442 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$35,880.65 |
| 3.376 | Nonpriority creditor's name and mailing address UCKELE HEALTH AND NUTRITION 5600 SILBERHORN HWY BLISSFIELD, MI 49228 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,483.84 |
| 3.377 | Nonpriority creditor's name and mailing address UK CENTER FOR APPLIED ENERGY RESEARCH 2540 RESEARCH PARK DRIVE LEXINGTON, KY 40511-8479 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,750.00 |
| 3.378 | Nonpriority creditor's name and mailing address ULINE PO BOX 88741 CHICAGO, IL 60680-1741 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,111.14 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.379 | Nonpriority creditor's name and mailing address UNITED FULFILLMENT SOLUTIONS 423 BUSSEN UNDERGROUND ST LOUIS, MO 63129 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,135.98 |
| 3.380 | Nonpriority creditor's name and mailing address UNIVERSITY OF KENTUCKY RESEARCH FOUNDATION RESEARCH FOUNDATION C/O PNC BANK P.O. BOX 931113 CLEVELAND, OH 44193 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$9,970.00 |
| 3.381 | Nonpriority creditor's name and mailing address UPS PO BOX 809488 CHICAGO, IL 60680-9488 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,060.36 |
| 3.382 | Nonpriority creditor's name and mailing address UPS FREIGHT 28013 NETWORK PLACE CHICAGO, IL 60673-1280 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,839.47 |
| 3.383 | Nonpriority creditor's name and mailing address UPS SUPPLY CHAIN SOLUTIONS 28013 NETWORK PLACE CHICAGO, IL 60673 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,894.20 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.384 | Nonpriority creditor's name and mailing address US HEMP ROUNDTABLE C/O KATELYN WIARD 250 W MAIN ST, # 2800 LEXINGTON, KY 40507 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$37,500.00 |
| 3.385 | Nonpriority creditor's name and mailing address USA HALAL CHAMBER OF COMMERCE INC 12510 PROSPERITY DRIVE SILVER SPRING, MD 20904 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,900.00 |
| 3.386 | Nonpriority creditor's name and mailing address VACO LLC VACO 5501 VIRGINIA WAY SUITE 120 BRENTWOOD, TN 37027 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,476.40 |
| 3.387 | Nonpriority creditor's name and mailing address VALIDCARE LLC VAILDCARE LLC 558 CASTLE PINES PARKWAY CASTLE PINES, CO 80108 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$30,000.00 |
| 3.388 | Nonpriority creditor's name and mailing address VALIDUS VERIFICATION SERVICES DIVISION VALIDUS VERIFICATION SERVICES 202 SIXTH ST. SUITE 400 CASTLE ROCK, CO 80104 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$11,580.67 |

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| | | | Amount of claim |
|-------|--|--|-----------------|
| 3.389 | Nonpriority creditor's name and mailing address VERIZON WIRELESS PO BOX 25505 LEHIGH VALLEY, PA 18002-5505 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$17,696.01 |
| 3.390 | Nonpriority creditor's name and mailing address VWR RADNOR CORPORATE CENTER CORPORATE HEADQUARTERS BUILDING ONE, SUITE 200 100 MATSONFORD ROAD RADNOR, PA 19087-8660 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$3,282.69 |
| 3.391 | Nonpriority creditor's name and mailing address WALLACE ELECTRICAL SYSTEMS, LLC 2853 KEN GRAY BOULEVARD SUITE 4 WEST FRANKFORT, IL 62896 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$796,342.36 |
| 3.392 | Nonpriority creditor's name and mailing address WALMART SUPERCENTER 702 SW 8TH STREET BENTONVILLE, AR 72716 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5.60 |
| 3.393 | Nonpriority creditor's name and mailing address WATERS AGRICULTURAL LABORATORIES INC 257 NEWTON HWY CAMILLA, GA 31730 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$36,906.67 |

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| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.394 | Nonpriority creditor's name and mailing address WATERS TECHNOLOGIES CORPORATION DEPT CH 14373 PALATINE, IL 60055-4373 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,925.00 |
| 3.395 | Nonpriority creditor's name and mailing address WEST KENTUCKY RURAL ELECTRIC P.O. BOX 589 MAYFIELD, KY 42066-0032 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$7,795.15 |
| 3.396 | Nonpriority creditor's name and mailing address WHAYNE SUPPLY COMPANY DEPARTMENT 8326 CAROL STREAM, IL 60122-8326 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$12,619.88 |
| 3.397 | Nonpriority creditor's name and mailing address WILLIAM T OWENS 8606 NELL INGRAM RD. RED LEVEL, AL 36474 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$36,718.75 |
| 3.398 | Nonpriority creditor's name and mailing address WILLIAMS SCOTSMAN, INC. 6010 FERN VALLEY ROAD LOUISVILLE, KY 40228 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$43,375.38 |

Part 2: Additional Page

| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.399 | Nonpriority creditor's name and mailing address WINCHESTER CLARK COUNTY CHAMBER 2 S MAPLE ST. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: GOVERNMENT ENTITY Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,000.00 |
| 3.400 | Nonpriority creditor's name and mailing address WINCHESTER MUNICIPAL UTILITIES PO BOX 4177 WINCHESTER, KY 40392-4177 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$990.86 |
| 3.401 | Nonpriority creditor's name and mailing address WINCHESTER WAREHOUSE CO LLC 1465 WEST LEXINGTON AVE. WINCHESTER, KY 40391 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$15,000.00 |
| 3.402 | Nonpriority creditor's name and mailing address WINE INDUSTRY NETWORK, LLC 155 FOSS CREEK CIRCLE HEALDSBURG, CA 95448 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$5,000.00 |
| 3.403 | Nonpriority creditor's name and mailing address WINFREY MILLER CONSTRUCTION 349 FINK RD. MAYFIELD, KY 42066 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$2,500.00 |

Part 2: Additional Page

| | | | Amount of claim |
|-------|---|--|-----------------|
| 3.404 | Nonpriority creditor's name and mailing address WOLF CREEK COMPANY INC. PO BOX 442 MID, OH 45042-0442 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$8,310.45 |
| 3.405 | Nonpriority creditor's name and mailing address WOLNSKI WOLNSKI SCHEDULING SERVICES, INC. 1720 SHADES VIEW LANE VESTAVIA HILLS, AL 35216 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$695.00 |
| 3.406 | Nonpriority creditor's name and mailing address WORLDPOINT 1326 SOUTH WOLF ROAD WHEELING, IL 60090 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$59.50 |
| 3.407 | Nonpriority creditor's name and mailing address WYATT BOYD 125 DELBERT BALL RD. LANCASTER, KY 40444 Date or dates debt was incurred VARIOUS Last 4 digits of account number: | As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE PAYABLE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes | \$1,600.00 |

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. <u>\$854,804.47</u> |
| 5b. | Total claims from Part 2 | 5b. + <u>\$79,930,791.18</u> |
| 5c. | Total of Parts 1 and 2 Lines 5a + 5b = 5c. | 5c. <u>\$80,785,595.65</u> |

Fill in this information to identify the case:

Debtor GenCanna Global USA, Inc.

United States Bankruptcy Court for the: Eastern District of Kentucky

Case number 20-50133
(if known)

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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

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

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

2. List all contracts and unexpired leases

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

| | | |
|-----|--|---|
| 2.1 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>FINANCE AGREEMENT OPERATING AGREEMENT</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>101 ENTERPRISES LLC 4274 COLBY RD WINCHESTER, KY 40391</p> |
| 2.2 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>FINANCE AGREEMENT SECURED COMMERCIAL PROMISSORY NOTE</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>3 DELTA</p> |
| 2.3 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>FINANCE AGREEMENT PROMISSORY NOTE DTD 6/22/2015</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>4274 COLBY LLC 4274 COLBY RD WINCHESTER, KY 40391</p> |
| 2.4 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>FINANCE AGREEMENT MORTGAGE DTD 6/22/2015</p> <p>State the term remaining 6/22/2035</p> <p>List the contract number of any government contract</p> | <p>4274 COLBY LLC ATTN STEVE BEVAN 4274 COLBY RD WINCHESTER, KY 40391</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 |
|---|--|--|
| 2.5 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>FINANCE AGREEMENT RECOGNITION AGREEMENT</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p> | <p>4274 COLBY LLC ATTN WILLIAM R HILLIARD JR 1265 HUGHES LN LEXINGTON, KY 40511</p> |
| 2.6 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>FINANCE AGREEMENT RECOGNITION AGREEMENT</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>4274 COLBY LLC ATTN WILLIAM R HILLIARD JR 1265 HUGHES LN LEXINGTON, KY 40511</p> |
| 2.7 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>LEASE: BUILDING & LAND SHORT FORM OF LEASE AGREEMENT</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>4274 COLBY LLC ATTN WILLIAM R HILLIARD JR 1265 HUGHES LN LEXINGTON, KY 40511</p> |
| 2.8 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>FINANCE AGREEMENT MORTGAGE DTD 6/22/2015</p> <p>State the term remaining 6/19/2035</p> <p>List the contract number of any government contract</p> | <p>4274 COLBY LLC ATTN WILLIAM R HILLIARD, JR, MEMBER 4274 COLBY RD WINCHESTER, KY 40391</p> |
| 2.9 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>LEASE: BUILDING & LAND SHORT FORM OF LEASE AGREEMENT</p> <p>State the term remaining 6/30/2026</p> <p>List the contract number of any government contract</p> | <p>4274 COLBY LLC C/O ATALO HOLDINGS ATTN WILLIAM R HILLIARD JR 5855 ROCKWELL RD WINCHESTER, KY 40391</p> |
| 2.10 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SECURITIES/STOCK PURCHASE AGREEMENT ELECTION AND AGREEMENT</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>8821372 CANADA LTD 12 HAZEL CR KEENE, ON K9J 6X7</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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>State the term remaining 4/15/2020</p> <p>List the contract number of any government contract</p> | <p>ADAMS, JEFF D/B/A BLUE ASH FARM 5045 VAN METER RD WINCHESTER, KY 40391</p> |
| 2.12 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>THIRD PARTY SERVICE AGREEMENT DIRECT PLACEMENT AGREEMENT FOR HIRING CANDIDATES FOR JOB OPENINGS</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>AEROTEK CE 7301 PARKWAY DR HANOVER, MD 21076</p> |
| 2.13 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>EMPLOYMENT AGREEMENT CONVERSION AGREEMENT DTD 11/21/2018</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>AEROTEK INC 7301 PARKWAY DR HANOVER, MD 21076</p> |
| 2.14 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT CUSTOMER SERVICE AGREEMENT DTD 8/5/2019</p> <p>State the term remaining 8/31/2024</p> <p>List the contract number of any government contract</p> | <p>AIR TECHNOLOGIES 1302 N ENGLISH STATION RD LOUISVILLE, KY 40223</p> |
| 2.15 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT INDOOR FARMING & BIOMASS EXTRACTION PRODUCT SALE AGREEMENT</p> <p>State the term remaining 8/29/2026</p> <p>List the contract number of any government contract</p> | <p>AIRGAS USA LLC 500 CODELL DR LEXINGTON, KY 40509</p> |
| 2.16 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>LEASE: EQUIPMENT EQUIPMENT LEASE AGREEMENT</p> <p>State the term remaining 3/20/2020</p> <p>List the contract number of any government contract</p> | <p>AIRKROME 4274 COLBY RD WINCHESTER, KY 40391</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>SERVICE AGREEMENT AMENDMENT TO ASSIGNMENT ASSUMPTION AND AMENDMENT AGREEMENT</p> <p>CURRENT</p> | <p>ALDEN BOTANICA LLC ATTN DR JOHN PRICE 35 W MAIN ST, STE B-208 VENTURA, CA 93001</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>SERVICE AGREEMENT EXTRACTION AGREEMENT</p> <p>CURRENT</p> | <p>ALDEN BOTANICA LLC ATTN DR JOHN PRICE, PRESIDENT 35 W MAIN ST, STE B-208 VENTURA, CA 93001</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>SERVICE AGREEMENT REPAYMENT AGREEMENT</p> <p>CURRENT</p> | <p>ALDEN BOTANICA LLC ATTN JOHN PIERCE 35 W MAIN ST, B-208 VENTURA, CA 923001</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>SERVICE AGREEMENT AMENDMENT TO ASSIGNMENT ASSUMPTION AND AMENDMENT AGREEMENT</p> <p>CURRENT</p> | <p>ALDEN WELLNESS LLC ATTN DR JOHN PRICE 35 W MAIN ST, STE B-208 VENTURA, CA 93001</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>SERVICE AGREEMENT EXTRACTION AGREEMENT</p> <p>CURRENT</p> | <p>ALDEN WELLNESS LLC ATTN DR JOHN PRICE, PRESIDENT 35 W MAIN ST, STE B-208 VENTURA, CA 93001</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>PURCHASE/SALES AGREEMENT PURCHASE AND SALE AGREEMENT</p> <p>CURRENT</p> | <p>AMERISOURCEBERGEN DRUG CORPORATION ATTN VICE PRESIDENT OF REAL ESTATE 1300 MORRIS DR CHESTERBROOK, PA 19087</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>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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>2/26/2022</p> | <p>ANDERSON, KENNETH 6675 VAN METER RD WINCHESTER, KY 40391</p> |
| 2.24 | <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>LEASE: EQUIPMENT ARBORETUM PROPOSAL DTD 4/22/2019</p> <p>CURRENT</p> | <p>ARBORETUM INVESTMENT ADVISORS LLC 11115 HOUSE RD, STE 150 ROSWELL, GA 30076</p> |
| 2.25 | <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>PURCHASE/SALES AGREEMENT SALES CONTRACT DTD 5/3/2019</p> <p>CURRENT</p> | <p>ARBORETUM INVESTMENT ADVISORS LLC ATTN MR KEVIN CHASE 100 ARBORETUM DR, STE 105 PORTSMOUTH, NH 03801</p> |
| 2.26 | <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>FINANCE AGREEMENT FORBEARANCE AGREEMENT</p> <p>6/30/2020</p> | <p>ARBORETUM SILVERLEAF INCOME FUND LP F/K/A SQN ASSET INCOME FUND V LP 100 ARBORETUM DR, STE 105 PORTSMOUTH, NH 03801</p> |
| 2.27 | <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>LEASE: BUILDING & LAND ESCROW AGREEMENT DTD 2/25/2019</p> <p>CURRENT</p> | <p>ARROW FARMS LLC 8255 OLD LOVELACEVILLE RD PADUCAH, KY 42001</p> |
| 2.28 | <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>LEASE: BUILDING & LAND TILLABLE ACREAGE SUBLEASE AGREEMENT DTD 1/1/2019</p> <p>12/31/2023</p> | <p>ARROW FARMS LLC ATTN CHRIS PETTY 8255 OLD LOVELACEVILLE RD PADUCAH, KY 42001</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 |
|---|--|---|--|
| 2.29 | <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>PURCHASE/SALES AGREEMENT OPTION CONTRACT TO PURCHASE REAL ESTATE</p> <p>1/1/2024</p> | <p>ARROW FARMS LLC ATTN GEORGE C PETTY 8255 OLD LOVELACEVILLE RD PADUCAH, KY 42001</p> |
| 2.30 | <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>SERVICE AGREEMENT HARVESTING & SERVICES AGREEMENT</p> <p>5/31/2020</p> | <p>ARROW FARMS LLC ATTN GEORGE C PETTY 8255 OLD LOVELACEVILLE RD PADUCAH, KY 42001</p> |
| 2.31 | <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>FINANCE AGREEMENT 7.5% SECURED CONVERTIBLE PROMISSORY NOTE DTD 11/26/2018</p> <p>CURRENT</p> | <p>ATALO HOLDINGS INC ATTN WILLIAM HILLIARD 4274 COLBY RD WINCHESTER, KY 40391</p> |
| 2.32 | <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>SECURITIES/STOCK PURCHASE AGREEMENT RE: CAPITAL STOCK ACQUISITION PROPOSAL DTD 11/27/2018</p> <p>CURRENT</p> | <p>ATALO HOLIDNGS INC ATTN WILLIAM HILLIARD 4274 COLBY RD WINCHESTER, KY 40391</p> |
| 2.33 | <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>SERVICE AGREEMENT LARGE VOLUME NATURAL GAS SERVICE AGREEMENT DTD 4/24/2019</p> <p>8/1/2024</p> | <p>ATMOS ENERGY CORP ATTN CONTACT ADMINISTRATION 5430 LBJ FWY, STE 160 DALLAS, TX 75240-2601</p> |
| 2.34 | <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>LEASE: BUILDING & LAND AMENDMENT NO 1 DTD 8/9/2019</p> <p>CURRENT</p> | <p>AVT-KENTUCKY LP ATTN JORDAN K GREENWELL, CCO 6995 UNION PARK CTR, STE 400 COTTONWOOD HEIGHTS, UT 84047</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 |
|---|--|--|--|
| 2.35 | <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>FINANCE AGREEMENT DEPOSIT ACCOUNT CONTROL AGREEMENT DTD 6/24/2019</p> <p>CURRENT</p> | <p>BANK OF THE BLUEGRASS & TRUST CO ATTN CHRIS BOAZ 101 E HIGH ST LEXINGTON, KY 40507</p> |
| 2.36 | <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>PURCHASE/SALES AGREEMENT REAL ESTATE OPTION AGREEMENT</p> <p>CURRENT</p> | <p>BARBARA J HOLLAND DECLARATION OF TRUST C/O BARBARA HOLLAND, TRUSTEE ATTN TIM BECK 1104 PARIS RD MAYFIELD, KY 42066</p> |
| 2.37 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>BDH LLC ATTN BRAD WIGGINS 417 ST. RT. 83 MAYFIELD, KY 42066</p> |
| 2.38 | <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>FINANCE AGREEMENT DEBENTURES RIGHTS AGREEMENT DTD 11/7/2018</p> <p>CURRENT</p> | <p>BEVAN, STEVE</p> |
| 2.39 | <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>LEASE: BUILDING & LAND EXCLUSIVE MARKETING AGREEMENT FOR THE SALE OF REAL PROPERTY</p> <p>7/31/2020</p> | <p>BLOCK + LOT REAL ESTATE LLC 113 W SHORT ST LEXINGTON, KY 40507</p> |
| 2.40 | <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>LEASE: BUILDING & LAND LEASE AGREEMENT DTD 2/7/2019</p> <p>2/28/2020</p> | <p>BLUEGRASS SOTHEBY'S LEASING & PROPERTY MANAGEMENT ATTN NIKI WILEY 1999 RICHMOND RD, STE 400 LEXINGTON, KY 40502</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 |
|---|--|--|--|
| 2.41 | <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>SERVICE AGREEMENT ORDER FORM</p> <p>CURRENT</p> | <p>BOOMI INC ATTN CHRISTOPHER PORT 1400 LIBERTY RIDGE DR CHESTERBROOK, PA 19087</p> |
| 2.42 | <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>SERVICE AGREEMENT SERVICES ORDER FORM</p> <p>CURRENT</p> | <p>BOOMI INC ATTN ELISE CHRIPCZUK 1400 LIBERTY RIDGE DR CHESTERBROOK, PA 19087</p> |
| 2.43 | <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>SERVICE AGREEMENT SERVICES ORDER FORM</p> <p>CURRENT</p> | <p>BOOMI INC ATTN TARA SAPP/ELISE CHRIPCZUK 1400 LIBERTY RIDGE DR CHESTERBROOK, PA 19087</p> |
| 2.44 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/20/2022</p> | <p>BOWEN, JOHN PO BOX 174 STANTON, KY 40380</p> |
| 2.45 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>BRAGG FARMS & CO 1180 GRIMWOOD RD TONEY, AL 35773</p> |
| 2.46 | <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>SERVICE AGREEMENT SECOND PROPOSED AMENDMENT TO INDUSTRIAL HEMP CULTIVATION AGREEMENT</p> <p>CURRENT</p> | <p>BRAGG, DENNIS 1180 GRIMWOOD RD TONEY, AL 35773</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 |
|---|---|--|
| 2.47 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>State the term remaining 7/9/2022</p> <p>List the contract number of any government contract</p> | <p>BRANNON FARMS ATTN JONAH BRANNON 12500 HWY 641N PURYEAR, TN 38261</p> |
| 2.48 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>LEASE: BUILDING & LAND SHARED SPACE AGREEMENT</p> <p>State the term remaining 2/1/2021</p> <p>List the contract number of any government contract</p> | <p>CALL CENTER SYSTEMS LLC</p> |
| 2.49 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT MEMORANDUM OF UNDERSTANDING DTD 8/14/2019</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>CANNASOL TECHNOLOGIES LLC ATTN JOSHUA DETZEL, MANAGING MEMBER 343 W BAGLEY RD BEREA, OH 44017</p> |
| 2.50 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT SETTLEMENT AGREEMENT AND RELEASE</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>CARSO AGRICULTURE LLC</p> |
| 2.51 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT AMENDMENT #1 RE: CRITICAL ASSET TRACKING SOLUTION</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>CELLCO PARTNERSHIP D/B/A VERIZON WIRELESS</p> |
| 2.52 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>FINANCE AGREEMENT COMMERCIAL NOTE</p> <p>State the term remaining 12/28/2021</p> <p>List the contract number of any government contract</p> | <p>CENTRAL BANK & TRUST CO ATTN TIM DUNCAN, SVP 300 W VINE ST LEXINGTON, KY 40507</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 |
|---|--|---|--|
| 2.53 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining 5/16/2022</p> <p>List the contract number of any government contract</p> | SERVICE AGREEMENT LICENSING AGREEMENT | CH TECHNOLOGIES LLC |
| 2.54 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining 3/19/2020</p> <p>List the contract number of any government contract</p> | SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT | CHERRY, DAVID JOSHUA 14605 STATE RT 303 FULTON, KY 42041 |
| 2.55 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | SERVICE AGREEMENT SECOND PROPOSED AMENDMENT TO INDUSTRIAL HEMP CULTIVATION AGREEMENT | CHERRY, JOSH 14605 STATE RT 303 FULTON, KY 42041 |
| 2.56 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | SERVICE AGREEMENT STANDARD RENTAL SERVICE AGREEMENT DTD 6/22/2018 | CINTAS CORPORATION |
| 2.57 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | SERVICE AGREEMENT REVIVER VIEW SERVICE AGREEMENT DTD 2/15/2019 | CINTAS CORPORATION NO 2 D/B/A CINTAS FIRST AID & SAFETY |
| 2.58 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | SERVICE AGREEMENT ALARM MONITORING SERVICE AGREEMENT | CINTAS FIRE PROTECTION 101 23RD ST, STE 200 CORBIN, KY 40701 |

| 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 | |
|---|--|--|--|
| 2.59 | <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>SERVICE AGREEMENT FIRE ALARM SYSTEM AGREEMENT DTD 10/24/2018</p> <p>CURRENT</p> | <p>CINTAS FIRE PROTECTION 2909 CRESCENTVILLE RD WEST CHESTER, OH 45069</p> |
| 2.60 | <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>LEASE: EQUIPMENT EQUIPMENT LEASE AGREEMENT</p> <p>3/1/2021</p> | <p>CIRCA COLINGA LLC 1951 MERCANTILE LN COALINGA, CA 93210</p> |
| 2.61 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>CLARK, CHARLES JAMES 3528 WHITE LICK RD PAINT LICK, KY 40461</p> |
| 2.62 | <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>SERVICE AGREEMENT SECOND PROPOSED AMENDMENT TO INDUSTRIAL HEMP CULTIVATION AGREEMENT</p> <p>CURRENT</p> | <p>CLARK, CHARLEY 3528 WHITE LICK RD PAINT LICK, KY 40461</p> |
| 2.63 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>2/19/2022</p> | <p>CLARK, JUSTIN 5470 OLD US 45 SOUTH PADUCAH, KY 42003</p> |
| 2.64 | <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>SERVICE AGREEMENT SECOND PROPOSED AMENDMENT TO INDUSTRIAL HEMP CULTIVATION AGREEMENT</p> <p>CURRENT</p> | <p>CLARK, LARRY 106 CLARK-HOUK RD GREENBURG, KY 42743</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 |
|---|--|---|---|
| 2.65 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>4/17/2020</p> | <p>CLARK, LARRY 106 CLARK-HOUK RD GREENSBURG, KY 42731</p> |
| 2.66 | <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 AGREEMENT FACILITIES BETTERMENT AGREEMENT DTD 6/27/2019</p> <p>CURRENT</p> | <p>COLUMBIA GAS OF KY INC 2001 MERCER RD LEXINGTON, KY 40511</p> |
| 2.67 | <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>GOVERNMENTAL CERTIFICATE OF REGISTRATION</p> <p>CURRENT</p> | <p>COMMONWEALTH OF KENTUCKY C/O KENTUCKY DEPARTMENT OF ENVIRONMENTAL PROTECTION ATTN DIVISION OF WASTE MANAGEMENT</p> |
| 2.68 | <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>FINANCE AGREEMENT CONSTRUCTION MORTGAGE DTD 5/6/2019</p> <p>11/1/2020</p> | <p>COMMUNITY FINANCIAL SERVICES BANK 100 DICK CASTLEMAN BYPASS MAYFIELD, KY 42066</p> |
| 2.69 | <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>FINANCE AGREEMENT PROMISSORY NOTE DTD 11/13/2018</p> <p>11/13/2021</p> | <p>COMMUNITY FINANCIAL SERVICES BANK GRAVES COUNTY BANKING CTR 100 DICK CASTLEMAN BYPASS MAYFIELD, KY 42066</p> |
| 2.70 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>2/19/2022</p> | <p>CONYEA HEMP FARMS LLC ATTN RONALD CONYEA 3030 STATE RT 1241 HICKORY, KY 42051</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 | |
|---|--|--|---|
| 2.71 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>CONYEA, RON 3030 STATE RT 1241 HICKORY, KY 42051</p> |
| 2.72 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>4/16/2020</p> | <p>COWDEN, ERIC & JEN 4160 LEXINGTON RD HORRODSBURY, KY 40356</p> |
| 2.73 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>COWDEN, ERIC 4160 LEXINGTON RD HARRODSBURG, KY 40330</p> |
| 2.74 | <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>SERVICE AGREEMENT STATEMENT OF WORK</p> <p>CURRENT</p> | <p>CROWDSTRIKE SERVICES INC 150 MATHILDA PLACE, STE 300 SUNNYVALE, CA 94086</p> |
| 2.75 | <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>PURCHASE/SALES AGREEMENT SUPPLY AGREEMENT</p> <p>12/31/2020</p> | <p>CURA WELLNESS LLC ATTN CAMERON FORNI, PRESIDENT 115 SE YAMHILL ST PORTLAND, OR 97214</p> |
| 2.76 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/14/2022</p> | <p>CURTIS, JOSH 1402 KY-1940 CYNTHIANA, KY 41031</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 |
|---|--|---|--|
| 2.77 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>CURTIS, JOSH 2803 CARPENTER RD CARLISLE, KY 40311</p> |
| 2.78 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>DAY, JOHNATHAN CR-1150 PAINT LICK, KY 40461</p> |
| 2.79 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>5/10/2020</p> | <p>DAY, JONATHAN 773 HALCOMB LN PAINT LICK, KY 40461</p> |
| 2.80 | <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>SERVICE AGREEMENT AMENDMENT LETTER DTD 12/19/2018</p> <p>CURRENT</p> | <p>DE LAGE LANDEN FINANCIAL SERVICES INC ATTN LINDA HERBERT 1111 OLD EAGLE SCHOOL RD WAYNE, PA 19087</p> |
| 2.81 | <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>PURCHASE/SALES AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/21/2020</p> | <p>DE MARCUS, DAVID, II 3333 ROYSTER RD LEXINGTON, KY 40516</p> |
| 2.82 | <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>SERVICE AGREEMENT RE: SPECIAL DISCOUNT OFFER</p> <p>CURRENT</p> | <p>DHL EXPRESS (USA) INC</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 |
|---|--|---|--|
| 2.83 | <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>SERVICE AGREEMENT TERM SHEET ORGANIC INDUSTRIAL HEMP PRODUCTION VENTURE</p> <p>CURRENT</p> | DMG HOLDINGS LLC |
| 2.84 | <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>FINANCE AGREEMENT PURCHASE ORDER DTD 12/12/2018</p> <p>CURRENT</p> | DON FRANKLIN AUTO MALL ATTN TY COBB 3390 RICHMOND RD LEXINGTON, KY 40509 |
| 2.85 | <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>FINANCE AGREEMENT DEALER WARRANTY DISCLAIMER</p> <p>CURRENT</p> | DON FRANKLIN LEXINGTON INC 3380 RICHMOND RD LEXINGTON, KY 40509 |
| 2.86 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/19/2020</p> | DONALDSON, JARED 1343 NANCE RD HICKORY, KY 42051 |
| 2.87 | <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>FINANCE AGREEMENT DEBENTURES RIGHTS AGREEMENT DTD 11/7/2018</p> <p>CURRENT</p> | DRENNEN, RICHARD |
| 2.88 | <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>LEASE: BUILDING & LAND NOTICE AND ACKNOWLEDGMENT OF ASSIGNMENT DTD 8/9/2020</p> <p>CURRENT</p> | DT2019-2 C/O LORD SECURITIES CORPORATION 48 WALL ST, 27 FL NEW YORK, NY 10005 |

| 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 |
|---|--|---|--|
| 2.89 | <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>LEASE: EQUIPMENT LEASE AGREEMENT DTD 1/5/2019</p> <p>2/12/2023</p> | <p>DUPLICATOR SALES & SERVICE INC 831 E BROADWAY LOUISVILLE, KY 40204</p> |
| 2.90 | <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>FINANCE AGREEMENT PURCHASE ORDER DTD 9/24/2018</p> <p>CURRENT</p> | <p>DUTCH'S CHEVY FORD ATTN JEN DEHART ON THE BY PASS MT STERLING, KY 40353</p> |
| 2.91 | <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>FINANCE AGREEMENT PURCHASE ORDER DTD 10/26/2018</p> <p>CURRENT</p> | <p>DUTCH'S CHEVY FORD ATTN JENNETH R DEHART ON THE BY PASS MT STERLING, KY 40353</p> |
| 2.92 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/19/2020</p> | <p>DWG FARMS LLC ATTN JILL G COFFEY 3105 ST RT 125 HICKMAN, KY 42050</p> |
| 2.93 | <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>LEASE: BUILDING & LAND COMMERCIAL LEASE AGREEMENT</p> <p>1/31/2023</p> | <p>EASLEY AND FAUST PROPERTIES LLC 2692 RICHMOND RD, STE 202 LEXINGTON, KY 40509</p> |
| 2.94 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>EDWARDS, JUSTIN 9998 US 68 BENTON, KY 42025</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 |
|---|---|--|
| 2.95 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2020</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>ELLISON, ROBERT 2048 STATE RT 97 MAYFIELD, KY 42066</p> |
| 2.96 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>State the term remaining 3/19/2020</p> <p>List the contract number of any government contract</p> | <p>ELLISON, ROBERT 2048 STATE RT 97 MAYFIELD, KY 42066</p> |
| 2.97 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>INSURANCE POLICIES LIABILITY INSURANCE POLICY</p> <p>State the term remaining 9/1/2020</p> <p>List the contract number of any government contract</p> | <p>ENDURANCE AMERICAN INSURANCE CO 1221 AVENUE OF THE AMERICAS NEW YORK, NY 10020</p> |
| 2.98 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>LEASE: AUTO RENTAL AGREEMENT</p> <p>State the term remaining 2/18/2020</p> <p>List the contract number of any government contract</p> | <p>ENTERPRISE C/O LEXINGTON TRUCK RENTAL 1140 WINCHESTER RD LEXINGTON, KY 40505-4042</p> |
| 2.99 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT SPECIFIC SERVICE AGREEMENT DTD 7/3/2019</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>ENVIRONMENTAL MANAGEMENT CONSULTANTS ATTN MARK E PHILLIPS, LPG REGIONAL DIR 427 MAIN ST EVANVILLE, IN 47708</p> |
| 2.100 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>INSURANCE POLICIES INSURANCE POLICY</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>EVANSTON INSURANCE CO 10 PARKWAY N DEERFIELD, IL 60015</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 |
|---|--|--|--|
| 2.101 | <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>SERVICE AGREEMENT SALESFORCE CONSULTING PROPOSAL DTD 11/1/2019</p> <p>CURRENT</p> | FAST SLOW MOTION LLC |
| 2.102 | <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>CONFIDENTIALITY/NDAS/INDEMNIFICATION INDEMNITY AGREEMENT DTD 3/2/2018</p> <p>CURRENT</p> | GOLD COAST INGREDIENTS INC 2429 YATES AVE COMMERCE, CA 90040 |
| 2.103 | <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>EMPLOYMENT AGREEMENT INDEPENDENT CONTRACTOR ELECTION AND AGREEMENT</p> <p>CURRENT</p> | GOLDMAN, BRETT |
| 2.104 | <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>FINANCE AGREEMENT AFFIDAVIT OF AMENDMENT OF MORTGAGES</p> <p>CURRENT</p> | GOLNS, JACK MARTIN |
| 2.105 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2021</p> <p>CURRENT</p> | GOUGH, GENE 6540 VAUGHN RD KEVIL, KY 42053 |
| 2.106 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | GOUGH, GENE 6540 VAUGHN RD KEVIL, KY 42053 |

| 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 |
|---|--|--|--|
| 2.107 | <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>LEASE: EQUIPMENT LEASE AGREEMENT DTD 9/1/2019</p> <p>9/30/2024</p> | <p>GRAVES COUNTY ECONOMIC DEVELOPMENT INC 201 E COLLEGE ST MAYFIELD, KY 42066</p> |
| 2.108 | <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>FINANCE AGREEMENT FIFTH AMENDED & RESTATED OPERATING AGREEMENT</p> <p>CURRENT</p> | <p>HARDIN, HOWARD SCOTT</p> |
| 2.109 | <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>SERVICE AGREEMENT SUBSCRIPTION AGREEMENT</p> <p>CURRENT</p> | <p>HARDIN, SCOTT</p> |
| 2.110 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>2/15/2021</p> | <p>HARPER, JANICE 21 N MAIN ST WINCHESTER, KY 40391</p> |
| 2.111 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2023</p> <p>CURRENT</p> | <p>HAYDEN, SHAUN 2114 CR 1015 BARDWELL, KY 42035</p> |
| 2.112 | <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>GUARANTEES AMENDED AND RESTATED GUARANTY OF PAYMENT DTD 3/13/2018</p> <p>CURRENT</p> | <p>HEMP KENTUCKY GROWERS LLC ATTN RONALD W STOCKS 2101 CAPSTONE DR, STE 110 LEXINGTON, KY 40391</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 |
|---|--|--|--|
| 2.113 | <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>PURCHASE/SALES AGREEMENT SECOND AMENDMENT TO REDEMPTION AGREEMENT</p> <p>CURRENT</p> | <p>HEMP KENTUCKY GROWERS LLC ATTN RONALD W STOCKS 2101 CAPSTONE DR, STE 110 LEXINGTON, KY 40391</p> |
| 2.114 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/31/2020</p> | <p>HENDERSON, ELISHA 2304 OLD RAILROAD GRADE RD PAINT LICK, KY</p> |
| 2.115 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>HENSLEY, GREG 1197 BALLARD RD LANCASTER, KY 40444</p> |
| 2.116 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>4/29/2020</p> | <p>HOLCOMB, DEWAYNE 2363 FALL LICK RD LANCASTER, KY 40444</p> |
| 2.117 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>2/19/2022</p> | <p>HOLLAWAY, JERRY 274 STATE ROUTE 339 E MAYFIELD, KY 42066</p> |
| 2.118 | <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>PURCHASE/SALES AGREEMENT GROUP SALES CANCELLATION AGREEMENT DTD 11/19/2019</p> <p>CURRENT</p> | <p>HOMEWOOD SUITES BY HILTON - LEXINGTON/HAMBURG 2033 BRYANT RD LEXINGTON, KY 40509</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 |
|---|--|--|--|
| 2.119 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>HOPEWELL, BARRY 820 MILLER DEAN RD SALVISA, KY 40372</p> |
| 2.120 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>4/1/2020</p> | <p>HOPEWELL, ERIC 820 MILLER DEAN RD SALVISA, KY 40372</p> |
| 2.121 | <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>LICENSING AGREEMENT END USER LICENSE AGREEMENT</p> <p>CURRENT</p> | <p>ILOBBY CORP 3605 WESTON RD NORTH YORK, ON MPL 1V7 CANADA</p> |
| 2.122 | <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>FINANCE AGREEMENT CONSTRUCTION MORTGAGE DTD 5/6/2019</p> <p>11/1/2020</p> | <p>INDUSTRIAL AUTHORITY OF MAYFIELD-GRAVES COUNTY, THE 201 E COLLEGE ST MAYFIELD, KY 42066-2728</p> |
| 2.123 | <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>SERVICE AGREEMENT ON-LINE SERVICES AGREEMENT RF-SMART FOR NETSUITE</p> <p>3/13/2022</p> | <p>INFORMATION & COMPUTING SERVICES INC 1650 PRUDENTIAL DR, STE 300 JACKSONVILLE, FL 32207</p> |
| 2.124 | <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>EMPLOYMENT AGREEMENT CONTINGENCY BASED SEARCH AGREEMENT</p> <p>CURRENT</p> | <p>INFORMATION TECHNOLOGY DIVISION OF LUCAS GROUP</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 |
|---|--|--|--|
| 2.125 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining 4/8/2020</p> <p>List the contract number of any government contract</p> | SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT | ISHMAEL, NEIL 1120 ROBINSON RENAKER RD BERRY, KY 41003 |
| 2.126 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining 4/10/2020</p> <p>List the contract number of any government contract</p> | SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT | ISON, ZACK 1225 LEXINGTON RD HARRODSBURG, KY 40330 |
| 2.127 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining 3/19/2020</p> <p>List the contract number of any government contract</p> | SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT | J E SERVICES LLC ATTN JUSTIN EDWARDS PO BOX 388 CALVERT CITY, KY 42029 |
| 2.128 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | SERVICE AGREEMENT ENROLLMENT SERVICES AGREEMENT | J SMITH LANIER & CO, A MARSH & MCLENNAN AGENCY LLC 300 W 10TH ST PO BOX 70 WEST POINT, GA 31833 |
| 2.129 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | PURCHASE/SALES AGREEMENT HEMP SEED SUPPLY AGREEMENT DTD 3/28/2018 | JACK HEMPICINE LLC 3977 NW TILICUM PL CORVALLIS, OR 97330 |
| 2.130 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining 6/30/2020</p> <p>List the contract number of any government contract</p> | FINANCE AGREEMENT MARKETING AGREEMENT DTD 4/24/2019 | JMIS KENTUCKY LLC ATTN KIM RAMSAY 546 E MAIN ST, 1ST FL LEXINGTON, KY 40508 |

| 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 |
|---|--|---|--|
| 2.131 | <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>PURCHASE/SALES AGREEMENT SETTLEMENT AGREEMENT</p> <p>CURRENT</p> | JONES, BARRY |
| 2.132 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | JORDAN, MCCORD 2175 KIDDEVILLE RD WINCHESTER, KY 40391 |
| 2.133 | <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>FINANCE AGREEMENT DEPOSIT ACCOUNT CONTROL AGREEMENT DTD 6/24/2019</p> <p>CURRENT</p> | KENTUCKY BANK ATTN DEPOSIT OPERATIONS 339 MAIN ST PO BOX 157 PARIS, KY 40362 |
| 2.134 | <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>FINANCE AGREEMENT MORTGAGE DTD 6/22/2015</p> <p>6/22/2035</p> | KENTUCKY BANK PO BOX 157 PARIS, KY 40361 |
| 2.135 | <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>FINANCE AGREEMENT PROMISSORY NOTE DTD 6/22/2015</p> <p>CURRENT</p> | KENTUCKY BANK WINCHESTER MAIN BRANCH 339 MAIN ST PO BOX 157 PARIS, KY 40361 |
| 2.136 | <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>SERVICE AGREEMENT MEMORANDUM OF AGREEMENT (EXHIBIT A)</p> <p>CURRENT</p> | KENTUCKY ECONOMIC DEVELOPMENT FINANCE AUTHORITY |

| 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 |
|---|--|---|--|
| 2.137 | <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>SERVICE AGREEMENT KENTUCKY KOSHER AGREEMENT DTD 1/1/2020</p> <p>12/31/2020</p> | <p>KENTUCKY KOSHER INTERNATIONAL 1622 ALMARA CIRCLE LOUISVILLE, KY 40205</p> |
| 2.138 | <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>GUARANTEES SECURED PROMMISSORY NOTE DTD 5/25/2019</p> <p>CURRENT</p> | <p>KY BIOSCIENCE INTL LLC 632 N 12TH ST, STE 277 MURRAY, KY 42071</p> |
| 2.139 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP CULTIVATION AGREEMENT</p> <p>5/24/2021</p> | <p>KY BIOSCIENCE INTL LLC 632 N 12TH ST, STE 277 MURRAY, KY 42071</p> |
| 2.140 | <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>LEASE: BUILDING & LAND LAND LEASE AGREEMENTS</p> <p>2/29/2024</p> | <p>LANDLORD 270 ATTN HIANG K & JEAN W THE 201 GENTRY RD LEXINGTON, KY 40509</p> |
| 2.141 | <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>LEASE: BUILDING & LAND LAND LEASE AGREEMENTS</p> <p>2/29/2024</p> | <p>LANDLORD 276 ATTN HIANG K & JEAN W THE 201 GENTRY RD LEXINGTON, KY 40509</p> |
| 2.142 | <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>FINANCE AGREEMENT NON-CIRCUMVENTION AGREEMENT</p> <p>CURRENT</p> | <p>LEAF VERTICAL INC 805 KIRKMAN RD, UNIT 202 ORLANDO, FL 32811</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 |
|---|--|--|--|
| 2.143 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>LEAGUE, BRADLEY 510 RAY WAY LANCASTER, KY 40444</p> |
| 2.144 | <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>PURCHASE/SALES AGREEMENT OFFER AND AGREEMENT TO PURCHASE REAL ESTATE DTD 10/26/2018</p> <p>10/28/2021</p> | <p>LET PROPERTIES LLC 18 B W LEXINGTON AVE WINCHESTER, KY 40391</p> |
| 2.145 | <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>LEASE: BUILDING & LAND KY ADDICTION CTRS COMMERCIAL LEASE AGREEMENT</p> <p>CURRENT</p> | <p>LIFE POINT RECOVERY CARE OF KY LLC 625 TECH DR WINCHESTER, KY 40391</p> |
| 2.146 | <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>SERVICE AGREEMENT HOSTED SERVICES AGREEMENT</p> <p>CURRENT</p> | <p>LIVESAFE INC 1400 KEY BLVD, STE 100 ARLINGTON, VA 22209</p> |
| 2.147 | <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>PURCHASE/SALES AGREEMENT SALES CONTRACT DTD 5/3/2019</p> <p>CURRENT</p> | <p>LOUISVILLE DRYER COMPANY 1100 INDUSTRIAL BLVD LOUISVILLE, KY 40219</p> |
| 2.148 | <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>LEASE: BUILDING & LAND RENT AND LATE FEES LEASE ADDENDUM DTD 1/27/2020</p> <p>CURRENT</p> | <p>LUXE PROPERTIES LLC 401 BROADWAY PADUCAH, KY 42001</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 |
|---|--|--|--|
| 2.149 | <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>FINANCE AGREEMENT DEBENTURES RIGHTS AGREEMENT DTD 11/7/2018</p> <p>CURRENT</p> | MANGONE, MATTY |
| 2.150 | <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>PURCHASE/SALES AGREEMENT SECOND AMENDMENT TO REDEMPTION AGREEMENT</p> <p>CURRENT</p> | MANGONE-MIRANDA, MATTY ATTN RONALD W STOCKS 2101 CAPSTONE DR, STE 110 LEXINGTON, KY 40391 |
| 2.151 | <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>SERVICE AGREEMENT SETTLEMENT AGREEMENT AND RELEASE</p> <p>CURRENT</p> | MANGONE-MIRANDA, MATTY ATTN RONALD W STOCKS 2101 CAPSTONE DR, STE 110 LEXINGTON, KY 40391 |
| 2.152 | <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>PURCHASE/SALES AGREEMENT SEED PURCHASE AGREEMENT</p> <p>8/5/2020</p> | MARIMED HEMP INC 10 OCEANA WAY NORWOOD, MA 02062 |
| 2.153 | <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>SERVICE AGREEMENT TERMS AND CONDITIONS OF INDUSTRIAL HEMP PRODUCTION DTD 10/3/2019</p> <p>CURRENT</p> | MARIMED HEMP INC 10 OCEANA WAY, FL 2 NORWOOD, MA 02062 |
| 2.154 | <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>FINANCE AGREEMENT SUBORDINATED SECURED CONVERTIBLE DEBENTURE DTD 9/10/2018</p> <p>CURRENT</p> | MARIMED INC ATTN JON R LEVINE 10 OCEANA WAY NORWOOD, MA 02062 |

| 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 | |
|---|--|--|--|
| 2.155 | <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>PURCHASE/SALES AGREEMENT PURCHASE ORDER AMENDED & RESTATED</p> <p>CURRENT</p> | <p>MARIMED INC ATTN JON R LEVINE 10 OCEANA WAY NORWOOD, MA 02062</p> |
| 2.156 | <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>INSURANCE POLICIES MANAGEMENT LIABILITY COVERAGE BINDER DTD 9/4/2019</p> <p>9/1/2020</p> | <p>MARKEL SERVICE INC 310 HWY 35 S RED BANK, NJ 07701</p> |
| 2.157 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>MATHIS, BRAD 330 CRESTON RD MELBER, KY 42069</p> |
| 2.158 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/19/2020</p> | <p>MATHIS, RAY KEITH 780 DOYLE RD HICKORY, KY 42051</p> |
| 2.159 | <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>SERVICE AGREEMENT FARMING AGREEMENT</p> <p>CURRENT</p> | <p>MATT COLLEY FARMS 9378 ST RT 564 FARMINGTON, KY 42040</p> |
| 2.160 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/28/2020</p> | <p>MAYER, MARK 2490 VAN METER RD WINCHESTER, KY 40391</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 |
|---|--|--|--|
| 2.161 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2031</p> <p>CURRENT</p> | <p>MAYER, MARK 2985 VAN METER RD WINCHESTER, KY 40391</p> |
| 2.162 | <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>FINANCE AGREEMENT FIFTH AMENDED & RESTATED OPERATING AGREEMENT</p> <p>CURRENT</p> | <p>MCCARTHY, PATRICK</p> |
| 2.163 | <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>SERVICE AGREEMENT BUSINESS ASSOCIATE AGREEMENT</p> <p>CURRENT</p> | <p>MCGREGOR & ASSOCIATES INC 997 GOVERNORS LN, STE 175 LEXINGTON, KY 40513</p> |
| 2.164 | <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>THIRD PARTY SERVICE AGREEMENT HEALTH SAVINGS ACCOUNT SERVICES AGREEMENT</p> <p>1/1/2021</p> | <p>MCGREGOR & ASSOCIATES INC 997 GOVERNORS LN, STE 175 LEXINGTON, KY 40513</p> |
| 2.165 | <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>PURCHASE/SALES AGREEMENT PREFERRED FARMING & SUPPLY AGREEMENT</p> <p>5/31/2021</p> | <p>MEDTERRA CBD LLC 22981 MILL CREEK DR, UNIT A LAGUNA HILLS, CA 92653</p> |
| 2.166 | <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>FINANCE AGREEMENT FINANCING AGREEMENT DTD 6/24/2019</p> <p>CURRENT</p> | <p>MGG (BVI) LIMITED ATTN MUSTAFA TAYEB & MIER WANG ONE PENN PLAZA, 53RD FL NEW YORK, NY 10119</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 |
|---|--|---|---|
| 2.167 | <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>FINANCE AGREEMENT FINANCING AGREEMENT DTD 6/24/2019</p> <p>CURRENT</p> | <p>MGG CANADA FUND LP ATTN MUSTAFA TAYEB & MIER WANG ONE PENN PLAZA, 53RD FL NEW YORK, NY 10119</p> |
| 2.168 | <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>FINANCE AGREEMENT FINANCING AGREEMENT DTD 6/24/2019</p> <p>CURRENT</p> | <p>MGG INSURANCE FUND SERIES INTERESTS OF THE SALI MULTI-SERIES FUND LP ATTN MUSTAFA TAYEB & MIER WANG ONE PENN PLAZA, 53RD FL NEW YORK, NY 10119</p> |
| 2.169 | <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>VENDOR AGREEMENTS ASSIGNMENT FOR SECURITY-PATENTS</p> <p>CURRENT</p> | <p>MGG INVESTMENT GROUP LP ATTN MUSTAFA TAYEB & MIER WANG ONE PENN PLAZA, 53RD FL NEW YORK, NY 10119</p> |
| 2.170 | <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>FINANCE AGREEMENT FEE LETTER DTD 6/24/2019</p> <p>CURRENT</p> | <p>MGG INVESTMENT GROUP LP, AS ADMINISTRATIVE AGENT AND COLLATERAL AGENT ATTN KEVIN F GRIFFIN, CEO ONE PENN PLAZA, 53 FL NEW YORK, NY 10119</p> |
| 2.171 | <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>FINANCE AGREEMENT FINANCING AGREEMENT DTD 6/24/2019</p> <p>CURRENT</p> | <p>MGG SF DRAWDOWN UNLEVERED FUND II LP ATTN MUSTAFA TAYEB & MIER WANG ONE PENN PLAZA, 53RD FL NEW YORK, NY 10119</p> |
| 2.172 | <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>FINANCE AGREEMENT FINANCING AGREEMENT DTD 6/24/2019</p> <p>CURRENT</p> | <p>MGG SF EVERGREEN FUND LP ATTN MUSTAFA TAYEB & MIER WANG ONE PENN PLAZA, 53RD FL NEW YORK, NY 10119</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 |
|---|--|---|---|
| 2.173 | <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>FINANCE AGREEMENT DISBURSEMENT AGREEMENT</p> <p>CURRENT</p> | <p>MGG SF EVERGREEN UNLEVERED FUND LP ATTN MUSTAFA TAYEB & MIER WANG ONE PENN PLAZA, 53RD FL NEW YORK, NY 10119</p> |
| 2.174 | <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>FINANCE AGREEMENT FINANCING AGREEMENT DTD 6/24/2019</p> <p>CURRENT</p> | <p>MGG SPECIALTY FINANCE FUND II LP ATTN MUSTAFA TAYEB & MIER WANG ONE PENN PLAZA, 53RD FL NEW YORK, NY 10119</p> |
| 2.175 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>MIDDAUGH, GARTH 1013 CAVE HILL RD LAFAYETTE, TN 37083</p> |
| 2.176 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/27/2020</p> | <p>MIDDAUGH, GARTH 1013 CAVE HILL RD LAFAYETTE, TN 37083</p> |
| 2.177 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>MILLER, DANNY 1160 BETHLEHEM RD PARIS, KY 40361</p> |
| 2.178 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>4/19/2020</p> | <p>MILLER, RALPH DANIEL 6851 LEANN LN LEXINGTON, KY 40515</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 |
|---|--|---|--|
| 2.179 | <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>PURCHASE/SALES AGREEMENT MISSION LAGO FARM 2018 HEMP PURCHASE AGREEMENT</p> <p>CURRENT</p> | <p>ML1 LLC 2982 TAYLOR RD CENTRAL POINT, OR 97502</p> |
| 2.180 | <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>LEASE: BUILDING & LAND ADDENDUM TO LEASE AND INDEMNIFICATION AGREEMENT DTD 2/7/19</p> <p>CURRENT</p> | <p>MOREAU, CHARLIE AND CHRISTA</p> |
| 2.181 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>MORGUSON, BRANDON 2441 FRANKS WAY LEXINGTON, KY 40509</p> |
| 2.182 | <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>GUARANTEES AMENDED AND RESTATED GUARANTY OF PAYMENT DTD 3/13/2018</p> <p>CURRENT</p> | <p>MORROW, LEROY ATTN RONALD W STOCKS 2101 CAPSTONE DR, STE 110 LEXINGTON, KY 40391</p> |
| 2.183 | <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>PURCHASE/SALES AGREEMENT SECOND AMENDMENT TO REDEMPTION AGREEMENT</p> <p>CURRENT</p> | <p>MORROW, LEROY ATTN RONALD W STOCKS 2101 CAPSTONE DR, STE 110 LEXINGTON, KY 40391</p> |
| 2.184 | <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>SERVICE AGREEMENT SALES ORDER DTD 3/7/2019</p> <p>CURRENT</p> | <p>NAVISITE LLC ATTN SHAWN P KELLY 400 MINUTEMAN RD ANDOVER, MA 01810</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 |
|---|--|--|--|
| 2.185 | <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>LEASE: BUILDING & LAND ESCROW AGREEMENT DTD 2/25/2019</p> <p>CURRENT</p> | <p>NEELY BRIEN WILSON & TOOMBS PLLC 238 N 7TH ST MAYFIELD, KY 42066</p> |
| 2.186 | <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>SERVICE AGREEMENT TERMS OF SERVICE AGREEMENT</p> <p>CURRENT</p> | <p>NEWTON SOFTWARE 4811 MONTGOMERY RD CINCINNATI, OH 45212</p> |
| 2.187 | <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>PURCHASE/SALES AGREEMENT AMENDED & RESTATED NOTE DTD 8/12/2019</p> <p>CURRENT</p> | <p>NG GROWERS INC D/B/A NANTICOKE GARDENS 1543 UNION CENTER MAINE HWY, RTE 26 ENDICOTT, NY 13760</p> |
| 2.188 | <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>SERVICE AGREEMENT TERMS AND CONDITIONS OF INDUSTRIAL HEMP PRODUCTION DTD 10/3/2019</p> <p>CURRENT</p> | <p>NORTHEAST HEMP COMMODITIES LLC 3776 WHIPPLE HOLLOW FLORENCE, VT 05744</p> |
| 2.189 | <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>FINANCE AGREEMENT FIFTH AMENDED & RESTATED OPERATING AGREEMENT</p> <p>CURRENT</p> | <p>NUSS, RODNEY</p> |
| 2.190 | <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>LEASE: EQUIPMENT EQUIPMENT LEASE AGREEMENT</p> <p>3/20/2020</p> | <p>NUTRITIONAL HIGH 9780 FRUITRIDGE RD SACRAMENTO, CA</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 |
|---|---|---|--|
| 2.191 | State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract | INSURANCE POLICIES LOAN POLICY OF TITLE INSURANCE POLICY CURRENT | OLD REPUBLIC NATIONAL TITLE INSURANCE COMPANY 400 SECOND AVE SOUTH MINNEAPOLIS, MN 55401-2499 |
| 2.192 | State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract | SERVICE AGREEMENT ORACLE DATA PROCESSING AGREEMENT DTD 4/3/2019 CURRENT | ORACLE AMERICA INC 500 ORACLE PKWY REDWOOD SHORES, CA 94065 |
| 2.193 | State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract | PURCHASE/SALES AGREEMENT ORACLE DATA PROCESSING AGREEMENT DTD 5/1/2019 CURRENT | ORACLE AMERICA INC 500 ORACLE PWKY REDWOOD SHORES, CA 94065 |
| 2.194 | State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract | LEASE: EQUIPMENT RENTAL AGREEMENT #SFQ-489158 MONTH TO MONTH | PAC VAN INC ATTN JAMIE BLOOM, SALES CONSULTANT 3553 W LEXINGTON RD WINCHESTER, KY 40391 |
| 2.195 | State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract | LEASE: EQUIPMENT RENTAL AGREEMENT #SFQ-496122 MONTH TO MONTH | PAC VAN INC ATTN JAMIE BLOOM, SALES CONSULTANT 3553 W LEXINGTON RD WINCHESTER, KY 40391 |
| 2.196 | State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract | LEASE: EQUIPMENT RENTAL AGREEMENT #SFQ-498056 MONTH TO MONTH | PAC VAN INC ATTN JAMIE BLOOM, SALES CONSULTANT 3553 W LEXINGTON RD WINCHESTER, KY 40391 |

| 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 |
|---|--|---|--|
| 2.197 | <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>LEASE: EQUIPMENT RENTAL AGREEMENT #SFQ-521672</p> <p>MONTH TO MONTH</p> | <p>PAC VAN INC ATTN JAMIE BLOOM, SALES CONSULTANT 3553 W LEXINGTON RD WINCHESTER, KY 40391</p> |
| 2.198 | <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>LEASE: EQUIPMENT RENTAL AGREEMENT #SFQ-489750</p> <p>MONTH TO MONTH</p> | <p>PAC VAN INC ATTN JAMIE BLOOM, SALES CONSULTANT 3553 W LEXINGTON RD WINCHESTER, KY 40391</p> |
| 2.199 | <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>LEASE: EQUIPMENT RENTAL AGREEMENT #SFQ-489158</p> <p>MONTH TO MONTH</p> | <p>PAC VAN INC ATTN JAMIE BLOOM, SALES CONSULTANT 3553 W LEXINGTON RD WINCHESTER, KY 40391</p> |
| 2.200 | <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>LEASE: EQUIPMENT RENTAL AGREEMENT</p> <p>CURRENT</p> | <p>PAC VAN INC ATTN JAMIE BLOOM, SALES CONSULTANT 4025 CLARCK'S RIVER RD PADUCAH, KY 42003</p> |
| 2.201 | <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>FINANCE AGREEMENT PROPOSED AMENDMENT DTD 11/29/2019</p> <p>CURRENT</p> | <p>PAVONI, JUSTIN 187 PEACOCK FARMS LN FLEMINGSBURG, KY 41041</p> |
| 2.202 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>4/9/2020</p> | <p>PAVONI, JUSTIN 187 PEACOCK FARMS LN FLEMINGSBURG, KY 41041</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 | |
|---|--|--|--|
| 2.203 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>PURCHASE/SALES AGREEMENT CBD PROCESSOR SUPPLY AGGREEMENT</p> <p>State the term remaining 5/10/2022</p> <p>List the contract number of any government contract</p> | <p>PAX LABS INC 660 ALABAMA ST, 2ND FL SAN FRANCISCO, CA 94110</p> | |
| 2.204 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT CLIENT SERVICES AGREEMENT DTD 8/10/2018</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>PAYCOR INC 4811 MONTGOMERY RD CINCINNATI, OH 45212</p> | |
| 2.205 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>THIRD PARTY SERVICE AGREEMENT ORDER FOR PAYROLL IMPLEMENTATION AND PROCESSING SERVICES</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>PAYCOR INC 4811 MONTGOMERY RD CINCINNATI, OH 45212</p> | |
| 2.206 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT STANDARD FORM AGREEMENT DTD 12/14/2018</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>PINNACLE INC ATTN DENNIS W SMITH, PRESIDENT 305 POPLAR ST BENTON, KY 42025</p> | |
| 2.207 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>PURCHASE/SALES AGREEMENT SUPPLY AGREEMENT TOPICALS SOFT GELS & OIL DROPS</p> <p>State the term remaining 5/15/2020</p> <p>List the contract number of any government contract</p> | <p>PNP HOLDINGS LLC ATTN SAM CONLEY OR CODY ALT 7167 E RANCHO VISTA DR, #3014 SCOTTSDALE, AZ 85251</p> | |
| 2.208 | <p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SERVICE AGREEMENT PROJECT PROPOSAL ABOUT CRYSTALLINE CANNABIDOL</p> <p>State the term remaining CURRENT</p> <p>List the contract number of any government contract</p> | <p>PRODUCT SAFETY LABS ATTN ASHISH TALATI 100 S WACKER DR, STE 2000 CHICAGO, IL 60606</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 |
|---|--|---|--|
| 2.209 | <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>FINANCE AGREEMENT PURCHASE ORDER DTD 11/29/2018</p> <p>CURRENT</p> | <p>PURCHASE FORD LINCOLN ATTN JOSEPH BRADFORD BELC 1E52 HWY 45 PO BOX 1033 MAYFIELD, KY 42066</p> |
| 2.210 | <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>SERVICE AGREEMENT SERVICES AGREEMENT</p> <p>12/19/2021</p> | <p>QEMP INC 2901 W BLUEGRASS BLVD LEHI, UT 84043</p> |
| 2.211 | <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>FINANCE AGREEMENT PROPOSED AMENDMENT DTD 11/29/2019</p> <p>CURRENT</p> | <p>RABEN, JOE 20885 ANGUS RD OMAHA, IL 62871</p> |
| 2.212 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP CULTIVATION AGREEMENT</p> <p>7/21/2022</p> | <p>RABEN, JOSEPH R 20855 ANGUS RD OMAHA, IL 62971</p> |
| 2.213 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>4/29/2020</p> | <p>RAMSEY, JAENETTA 452 BROWNINGS CORNER RD FALMOUTH, KY 41040</p> |
| 2.214 | <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>LICENSING AGREEMENT AUTHORIZED ACCESS AGREEMENT</p> <p>CURRENT</p> | <p>RAMSEY, TOM 476 LOCUST FORK RD STAMPING GROUND, KY 40379</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 |
|---|--|---|--|
| 2.215 | <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>SERVICE AGREEMENT SETTLEMENT AGREEMENT AND RELEASE</p> <p>CURRENT</p> | <p>RAMSEY, TOM 476 LOCUST FORK RD STAMPING GROUND, KY 40379</p> |
| 2.216 | <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>EMPLOYMENT AGREEMENT MASTER SERVICE AGREEMENT DTD 12/5/2019</p> <p>CURRENT</p> | <p>RCM TECHNOLOGIES INC ATTN CATHY EVANS 20 WATERVIEW BLVD PARSIPPANY, NJ 07054</p> |
| 2.217 | <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>SECURITIES/STOCK PURCHASE AGREEMENT ELECTION AND AGREEMENT</p> <p>CURRENT</p> | <p>REDEMPTION VENTURES LLC ATTN RICHARD A DRENNEN 462 W THIRD ST LEXINGTON, KY 40508</p> |
| 2.218 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>RILEY, GARY 1363 STATE RT 1710 MAYFIELD, KY 42066</p> |
| 2.219 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/19/2020</p> | <p>RILEY, GARY 1363 STATE RT 1710 MAYFIELD, KY 42066</p> |
| 2.220 | <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>CONFIDENTIALITY/NDAS/INDEMNIFICATI ON CONFIDENTIALITY AGREEMENT</p> <p>7/19/2022</p> | <p>RLI INSURANCE COMPANY 620 8TH AVE NEW YORK, NY 10018</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 |
|---|--|---|--|
| 2.221 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>ROARK, DAVID 7245 SCOTTSVILLE RD LAFAYETTE, TN 37083</p> |
| 2.222 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>ROARK, MARK</p> |
| 2.223 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/15/2022</p> | <p>ROBINSON, ADAM 4193 COPPERCREEK RD BERCA, KY 40403</p> |
| 2.224 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>ROBINSON, NICHOLAS 233 BEAR KAT LN LAFAYETTE, TN 37083</p> |
| 2.225 | <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>SERVICE AGREEMENT SUBSCRIPTION AGREEMENT</p> <p>CURRENT</p> | <p>ROD NUSS</p> |
| 2.226 | <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>SERVICE AGREEMENT CUSTOMER SERVICE AGREEMENT</p> <p>CURRENT</p> | <p>RUMPKE OF KENTUCKY INC</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 |
|---|--|---|--|
| 2.227 | <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>CONFIDENTIALITY/NDAS/INDEMNIFICATION ON MUTUAL CONFIDENTIALITY AGREEMENT</p> <p>12/31/2024</p> | <p>SAFETY-KLEEN JEDAIAH LANE 550 BLUE SKY PKWY LEXINGTON, KY 40509</p> |
| 2.228 | <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>SERVICE AGREEMENT DOT HAZARDOUS MATERIALS AWARENESS TRAINING AGREEMENT DTD 5/15/2019</p> <p>CURRENT</p> | <p>SAFETY-KLEEN JEDAIAH LANE 550 BLUE SKY PKWY LEXINGTON, KY 40509</p> |
| 2.229 | <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>SERVICE AGREEMENT ORDER FORM RE: LIGHTNING SALES CLOUD ENTERPRISE EDITION DTD 1/31/2018</p> <p>CURRENT</p> | <p>SALESFORCE.COM INC 415 MISSION ST, 3RD FL SAN FRANCISCO, CA 94105</p> |
| 2.230 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>SCHLABACH, JEREMY 3575 PLAINVIEW CHURCH RD AUBURN, KY 42206</p> |
| 2.231 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>4/5/2020</p> | <p>SCHLABACH, JEREMY 380 LOCKHART LN AUBURN, KY 42206</p> |
| 2.232 | <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>LEASE: BUILDING & LAND OFFICE LEASE ADDENDUM DTD 4/23/2018</p> <p>CURRENT</p> | <p>SCOTT INTERESTS LP 103 WIND HAVEN DR, STE 201 NICHOLASVILLE, KY 40356</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 |
|---|--|---|--|
| 2.233 | <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>PURCHASE/SALES AGREEMENT TERMS OF SUPPLY AND PURCHASE</p> <p>7/23/2020</p> | <p>SENTIA WELLNESS INC ATTN LEGAL 1419 NW 14TH AVE PORTLAND, OR 97209</p> |
| 2.234 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>SHACKELFORD, BETSY ARBUCKLE 321 KIRKSVILLE RD RICHMOND, KY 40475</p> |
| 2.235 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>SHACKELFORD, BETSY 321 KIRKSVILLE RD RICHMOND, KY 40475</p> |
| 2.236 | <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>LEASE: BUILDING & LAND OCCUPANCY AGREEMENT DTD 12/11/2019</p> <p>CURRENT</p> | <p>SHELL, GARY 3011 FALL LICK RD LANCASTER, KY 40444</p> |
| 2.237 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>SHULTZ, BRENT 3451 STATE RT 97 MAYFIELD, KY 42066</p> |
| 2.238 | <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>THIRD PARTY SERVICE AGREEMENT TRADESHOW AND PAYMENT AGREEMENT</p> <p>CURRENT</p> | <p>SKYLINE RETAIL SALES LLC D/B/A SKYLINE EXHIBITS UTAH</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 |
|---|--|--|--|
| 2.239 | <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>LEASE: BUILDING & LAND LAND MUTUAL BENEFIT EASEMENT DTD 4/5/2019</p> <p>CURRENT</p> | <p>SOUTHERLAND, WILLIAM OTHA JR & CINDY LOU PRICE 1891 CLINTONVILLE RD PARIS, KY 40361</p> |
| 2.240 | <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>LEASE: BUILDING & LAND GREENHOUSE GROWER AGREEMENT DTD 4/5/2019</p> <p>CURRENT</p> | <p>SOUTHERLAND'S GREENHOUSES INC 1895 CLINTONVILLE RD PARIS, KY 40361</p> |
| 2.241 | <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>SERVICE AGREEMENT RELEASE RE: DISPUTES RELATING TO EQUIPMENT PURCHASES</p> <p>CURRENT</p> | <p>SOUTHERN STATES CLARK COOPERATIVE INC</p> |
| 2.242 | <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>FINANCE AGREEMENT PROMISSORY GRID NOTE DTD 9/17/2018</p> <p>CURRENT</p> | <p>SOUTHERN TIER HEMP LLC ATTN MCHAEAL P FALCONE, MANAGER 333 W WASHINGTON ST, STE 600 SYRACUSE, NY 13202</p> |
| 2.243 | <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>FINANCE AGREEMENT COLLATERAL ACCESS AGREEMENT DTD 12/20/2019</p> <p>CURRENT</p> | <p>SPECIALTY OIL EXTRACTORS MANUFACTURER LLC ATTN GENERAL MANAGER 311 WASHINGTON ST DARLINGTON, SC 29532</p> |
| 2.244 | <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>VENDOR AGREEMENTS BINDING LETTER OF INTENT DTD 10/13/2019</p> <p>10/31/2026</p> | <p>SPECIALTY OIL EXTRACTORS MANUFACTURER LLC ATTN GENERAL MANAGER 311 WASHINGTON ST DARLINGTON, SC 29532</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 |
|---|--|--|--|
| 2.245 | <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>SERVICE AGREEMENT SPECTRUM ENTERPRISE SERVICE AGREEMENT</p> <p>CURRENT</p> | <p>SPECTRUM ENTERPRISE 12405 POWERS COURT DR SAINT LOUIS, MO 63131</p> |
| 2.246 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>SPILLMAN, BRYAN 2330 GARDENSVILLE RD CRITTENDEN, KY</p> |
| 2.247 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/18/2020</p> | <p>SPOOKHOUSE FARMS LLC ATTN SHAUN HAYDEN 2441 COUNTRY RD 1015 BARDWELL, KY 42023</p> |
| 2.248 | <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>LEASE: EQUIPMENT MASTER LEASE</p> <p>CURRENT</p> | <p>SQN ASSET INCOME FUND V LP 100 ARBORETUM DR, STE 105 PORTSMOUTH, NH 03801</p> |
| 2.249 | <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>FINANCE AGREEMENT SETTLEMENT STATEMENT</p> <p>CURRENT</p> | <p>STARKER SERVICES INC 20 SOUTH SANTA CRUZ AVE, STE 304 LOS GATOS, CA 95030</p> |
| 2.250 | <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>INSURANCE POLICIES MANAGEMENT & PROFESSIONAL LIABILITY FOLLOW FORM DTD 9/1/2019</p> <p>9/1/2020</p> | <p>STARSTONE SPECIALTY INSURANCE CO 185 HUDSON ST, STE 2600 JERSEY CITY, NJ 07311</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 |
|---|--|---|--|
| 2.251 | <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>PURCHASE/SALES AGREEMENT SUPPLY AGREEMENT CBD ISOLATE & FULL SPECTRUM OIL</p> <p>CURRENT</p> | <p>STAUBER PERFORMANCE INGREDIENTS INC ATTN LEGAL DEPT 4120 N PALM ST FULLERTON, CA 92835</p> |
| 2.252 | <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>GUARANTEES AMENDED AND RESTATED GUARANTY OF PAYMENT DTD 3/13/2018</p> <p>CURRENT</p> | <p>STOCKS, RONALD W ATTN RONALD W STOCKS 2101 CAPSTONE DR, STE 110 LEXINGTON, KY 40391</p> |
| 2.253 | <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>INSURANCE POLICIES INCORPORATION PROVISION POLICY RIDER</p> <p>CURRENT</p> | <p>SYMETRA LIFE INSURANCE COMPANY ATTN MARGARET MEISTER</p> |
| 2.254 | <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>PURCHASE/SALES AGREEMENT PURCHASE TERMS AND CONDITIONS</p> <p>CURRENT</p> | <p>TATE & LYLE AMERICAS LLC ATTN LEGAL DEPT 5450 PRAIRIE STONE PARKWAY HOFFMAN ESTATES, IL 60192</p> |
| 2.255 | <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>LEASE: BUILDING & LAND MANOR HOUSE RESIDENTIAL LEASE DTD 7/1/2015</p> <p>CURRENT</p> | <p>TAYLOR MANOR LLC ATTN CLAUDIA PUCKETT 2527 BECKNERVILLE RD WINCHESTER, KY 40391</p> |
| 2.256 | <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>SERVICE AGREEMENT PEST CONTROL PLAN DTD 9/12/2019</p> <p>CURRENT</p> | <p>TERMINIX COMMERCIAL PEST CONTROL</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 |
|---|--|--|--|
| 2.257 | <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>SERVICE AGREEMENT PRODUCT PURCHASE AGREEMENT</p> <p>CURRENT</p> | <p>TERMINIX ATTN ALEX JOHNSON 22 REILLY RD, STE 700 FRANKFORT, KY 40601-1145</p> |
| 2.258 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/19/2022</p> | <p>THOMAS, IAN 630 BALDEN RD HARRODSBURG, KY 40330</p> |
| 2.259 | <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>LEASE: BUILDING & LAND STORAGE LEASE DTD 8/21/2019</p> <p>3/1/2020</p> | <p>TIERNEY STORAGE LLC 255 TIERNEY WAY WINCHESTER, KY 40391</p> |
| 2.260 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/18/2020</p> | <p>TOON, BOBBY 9620 STATE RT 408 FANCY FARM, KY 42039</p> |
| 2.261 | <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>LEASE: EQUIPMENT EQUIPMENT LEASE AGREEMENT</p> <p>CURRENT</p> | <p>TOYOTA MATERIAL HANDLING MIDWEST INC</p> |
| 2.262 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>TUDOR, AUSTIN KEITH 9032 RICHMOND RD PAINT LICK, KY 44046</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 |
|---|--|--|---|
| 2.263 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>4/1/2020</p> | <p>TUDOR, JIMMY KEITH 9032 RICHMOND RD PAINT LICK, KY 40461</p> |
| 2.264 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>TUDOR, JIMMY 1530 698 OLD RICHMOND RD PAINT LICK, KY 40461</p> |
| 2.265 | <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>SERVICE AGREEMENT MASTER SERVICE AGREEMENT</p> <p>6/13/2022</p> | <p>UNITED FULFILLMENT SOLUTIONS PARTNERS, LLC ATTN MIKE GREENBLATT 1715 DEER TRACKS TRL, STE 110 TOWN & COUNTRY, MO 63131</p> |
| 2.266 | <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>SERVICE AGREEMENT CARRIER AGREEMENT</p> <p>CURRENT</p> | <p>UNITED PARCEL SERVICE INC 5315 SUMMIT PKWY SAN ANTONIO, TX 78228</p> |
| 2.267 | <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>EMPLOYMENT AGREEMENT CLIENT SERVICES AGREEMENT</p> <p>CURRENT</p> | <p>VACO LOUISVILLE LLC ATTN CONTRACTS MANAGER 5501 VIRGINIA WAY, STE 120 BRENTWOOD, TN 37027</p> |
| 2.268 | <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>THIRD PARTY SERVICE AGREEMENT AMENDMENT TO SUPPLIER USER AGREEMENT</p> <p>CURRENT</p> | <p>VALIDCARE LLC 558 CASTLE PINES PKWY, STE B-345 CASTLE PINES, CO 80108</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 |
|---|--|--|--|
| 2.269 | <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>FINANCE AGREEMENT FIFTH AMENDED & RESTATED OPERATING AGREEMENT</p> <p>CURRENT</p> | <p>VALIDCARE 558 CASTLE PINES PKWY, STE B-345 CASTLE PINES, CO 80108</p> |
| 2.270 | <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>SERVICE AGREEMENT SUBSCRIPTION AGREEMENT</p> <p>CURRENT</p> | <p>VALIDCARE 558 CASTLE PINES PKWY, STE B-345 CASTLE PINES, CO 80108</p> |
| 2.271 | <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>CONFIDENTIALITY/NDAS/INDEMNIFICATION NON-DISCLOSURE AGREEMENT</p> <p>CURRENT</p> | <p>VALIDUS SPECIALTY UNDERWRITING SERVICES INC 4 WORLD TRADE CENTER 150 GREENWICH ST, FL 47 NEW YORK, NY 10007</p> |
| 2.272 | <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>PURCHASE/SALES AGREEMENT SUPPLY AGREEMENT PRIVATE LABEL CBD PRODUCTS</p> <p>7/26/2020</p> | <p>WAREHOUSE GOODS LLC D/B/A GREENLANE ATTN DOUGLAS FISCHER 1095 BROKEN SOUND PKWY NW, #300 BOCA RATON, FL 33487</p> |
| 2.273 | <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>LEASE: BUILDING & LAND APARTMENT LEASE CONTRACT DTD 3/21/2019</p> <p>4/29/2020</p> | <p>WATERSTONE AT HAMBURG PLACE LLC 2785 POLO CLUB BLVD LEXINGTON, KY 40509</p> |
| 2.274 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>WEBB, BENNY 4140 COMBS FERRY RD WINCHESTER, KY 40391</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 |
|---|--|---|--|
| 2.275 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/11/2022</p> | <p>WEBB, JEFF 7064 BYBEC RD WINCHESTER, KY 40391</p> |
| 2.276 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>WEBB, ZACK AND CHASE 603 ARDERY RD PARIS, KY 40361</p> |
| 2.277 | <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>FINANCE AGREEMENT SECOND PROPOSED AMENDMENT DTD 12/3/2019</p> <p>CURRENT</p> | <p>WIGGINS, BRAD 417 ST RT 83 MAYFIELD, KY 42066</p> |
| 2.278 | <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>LEASE: EQUIPMENT LEASE AGREEMENT 1072481 DTD 5/28/2019</p> <p>CURRENT</p> | <p>WILLIAMS SCOTSMAN INC ATTN MCKENNA CLARK 6010 FERN VALLEY RD LOUISVILLE, KY 40228</p> |
| 2.279 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>3/14/2022</p> | <p>WILMOT, JUSTIN 5187 BUCKEYE RD LANDCASTER, KY 40444</p> |
| 2.280 | <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>LEASE: BUILDING & LAND LEASE AGREEMENT DTD 4/9/2019</p> <p>4/9/2020</p> | <p>WINCHESTER PLAZA LLC C/O DAVID HOCKER & ASSOCIATES INC 620 PARK PLAZA DR OWENSBORO, KY 42301-4818</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 |
|---|--|---|--|
| 2.281 | <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>LEASE: BUILDING & LAND COMMERCIAL LEASE AGREEMENT</p> <p>9/30/2020</p> | <p>WINCHESTER WAREHOUSE CO LLC ATTN MATT BEALERT, OPERATIONS MANAGER 1465 W LEXINGTON AVE WINCHESTER, KY 40391</p> |
| 2.282 | <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>SERVICE AGREEMENT INDUSTRIAL HEMP PRODUCTION AGREEMENT</p> <p>CURRENT</p> | <p>WISEMAN, SHANE 1296 MORRIS RD WINCHESTER, KY 40391</p> |
| 2.283 | <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>PURCHASE/SALES AGREEMENT AGREEMENT</p> <p>CURRENT</p> | <p>YANKEE INVESTMENT GROUP LLC</p> |
| 2.284 | <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>SERVICE AGREEMENT EXTRACTION AGREEMENT</p> <p>CURRENT</p> | <p>YANKEE INVESTMENT GROUP LLC</p> |
| 2.285 | <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>SERVICE AGREEMENT SETTLEMENT AGREEMENT AND RELEASE</p> <p>CURRENT</p> | <p>YANKEE INVESTMENT GROUP LLC</p> |
| 2.286 | <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>PURCHASE/SALES AGREEMENT SUBSCRIPTION ORDER DTD 2/19/2019</p> <p>CURRENT</p> | <p>ZEROFOX INC 1834 S CHARLES ST BALTIMORE, MD 21230</p> |

Fill in this information to identify the case:

Debtor GenCanna Global USA, Inc.

United States Bankruptcy Court for the: Eastern District of Kentucky

Case number 20-50133
(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 | |
|--------------------|-----------------------|---|-----------------------|---|
| | Name | Mailing Address | Name | Check all schedules that apply |
| 2.1 | GENCANNA GLOBAL, INC. | 321 VENABLE ROAD SUITE 2 WINCHESTER, KY 40391 | HEMP KENTUCKY GROWERS | <input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.2 | GENCANNA GLOBAL, INC. | 321 VENABLE ROAD SUITE 2 WINCHESTER, KY 40391 | MGG CONSOLIDATED | <input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G |
| 2.3 | HEMP KENTUCKY, LLC. | 321 VENABLE ROAD SUITE 2 WINCHESTER, KY 40391 | HEMP KENTUCKY GROWERS | <input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G |

Debtor GenCanna Global USA, Inc.United States Bankruptcy Court for the: Eastern District of KentuckyCase number 20-50133
(if known)

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 3/1/2020
MM / DD / YYYY

✕

/s/ James Alt

Signature of individual signing on behalf of debtor

James Alt

Printed name

Chief Transformation Officer

Position or relationship to debtor