

Fill in this information to identify the case:

Debtor Solectrac, Inc.

United States Bankruptcy Court for the: District of Delaware

Case number 24-12731
(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*

NOT APPLICABLE

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*

\$10,926,932.50

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

Copy line 92 from *Schedule A/B*

\$10,926,932.50

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*

\$28,766,129.16

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 5a of *Schedule E/F*

\$123,780.94

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

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*

+ \$5,537,547.30

4. **Total liabilities**

Lines 2 + 3a + 3b

\$34,427,457.40

Fill in this information to identify the case:

Debtor Solectrac, Inc.

United States Bankruptcy Court for the: District of Delaware

Case number (if known) 24-12731

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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	<p>Priority creditor's name and mailing address CALIFORNIA DEPARTMENT OF TAX & FEE ADMINISTRATION 651 BANNON ST STE 100 SACRAMENTO, CA 958110356</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$56,319.00	\$56,319.00
2.2	<p>Priority creditor's name and mailing address EMPLOYMENT DEVELOPMENT DEPARTMENT PO BOX 989061 WEST SACRAMENTO, CA 95798-9061</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TAXES AND FEES</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$865.97	\$865.97
2.3	<p>Priority creditor's name and mailing address FIDELITY PSW 900 SALEM ST SMITHFIELD, RI 02917</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: EMPLOYEE BENEFIT</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$36,062.54	\$36,062.54

(Name)

Part 1: Additional Page

		Total claim	Priority amount	
2.4	<p>Priority creditor's name and mailing address GEORGIA DEPARTMENT OF REVENUE TAXPAYER SERVICES DIVISION ATLANTA, GA 30374</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TAXES AND FEES</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$171.30	\$171.30
2.5	<p>Priority creditor's name and mailing address INTERNAL REVENUE SERVICE P.O. BOX 7346 PHILADELPHIA, PA 19101-7346</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TAXES AND FEES</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,655.49	\$6,655.49
2.6	<p>Priority creditor's name and mailing address MISSOURI DEPARTMENT OF LABOR AND INDUSTRIAL ATTN ANNA HUI, DIRECTOR 421 E DUNKLIN ST PO BOX 504 JEFFERSON CITY, MS 65102-0504</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TAXES AND FEES</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$200.00	\$200.00
2.7	<p>Priority creditor's name and mailing address OREGON DEPARTMENT OF REVENUE PO BOX 14730 SALEM, OR 97309</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TAXES AND FEES</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$161.98	\$161.98
2.8	<p>Priority creditor's name and mailing address SONOMA COUNTY RESOURCE RECOVERY, LLC 1050 ANDERSEN DR SAN RAFAEL, CA 94901-5316</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TAXES AND FEES</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$7,426.66	\$7,426.66

(Name)

Part 1: Additional Page

			Total claim	Priority amount
2.9	Priority creditor's name and mailing address SONOMA COUNTY TAX COLLECTOR 585 FISCAL DRIVE SUITE 100 SANTA ROSA, CA 95403 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TAXES AND FEES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,958.54	\$14,958.54
2.10	Priority creditor's name and mailing address SOUTH CAROLINA DEPARTMENT OF REVENUE 300A OUTLET POINTE BLVD COLUMBIA, SC 29210 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TAXES AND FEES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$859.46	\$859.46
2.11	Priority creditor's name and mailing address STATE FUND 5880 OWENS DR PLEASANTON, CA 94588 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100.00	\$100.00

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

Do any creditors have nonpriority unsecured claims? (See 11 U.S.C. § 507).

- No.
 Yes.

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 1145 KITTYHAWK BLVD., LLC 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LANDLORD Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$181,342.74

(Name)

Part 2: Additional Page

			Amount of claim
3.2	<p>Nonpriority creditor's name and mailing address ACCENT PRINTING AND DESIGN, INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,640.35
3.3	<p>Nonpriority creditor's name and mailing address ACCURATE FORKLIFT, INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$54.33
3.4	<p>Nonpriority creditor's name and mailing address ACRES USA</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,160.00
3.5	<p>Nonpriority creditor's name and mailing address AEROTEK, INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$49,715.83
3.6	<p>Nonpriority creditor's name and mailing address AG-BUSINESS GROUP</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,500.00

Part 2: Additional Page

			Amount of claim
3.7	<p>Nonpriority creditor's name and mailing address ALTIA ACQUISITION CORPORATION DBA. ALTIA, INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$181,225.00
3.8	<p>Nonpriority creditor's name and mailing address AMAZON</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$79.73
3.9	<p>Nonpriority creditor's name and mailing address AMAZON BUSINESS PRIME</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$118.03
3.10	<p>Nonpriority creditor's name and mailing address AMERICAN STORAGE</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,340.00
3.11	<p>Nonpriority creditor's name and mailing address APEXTREMES LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,838.66

Part 2: Additional Page

			Amount of claim
3.12	<p>Nonpriority creditor's name and mailing address ARI NETWORK SERVICES, INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,000.00
3.13	<p>Nonpriority creditor's name and mailing address AT&T</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$173.08
AMENDED			
3.14	<p>Nonpriority creditor's name and mailing address AVALOS ORTIZ, LUIS R. 1438 SPRUCE WAY HEALDSBURG, CA 95448</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$5,384.41
3.15	<p>Nonpriority creditor's name and mailing address B LAB</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,000.00
3.16	<p>Nonpriority creditor's name and mailing address BACK COUNTRY RV & TRACTOR MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,864.85

(Name)

Part 2: Additional Page

			Amount of claim
3.17	<p>Nonpriority creditor's name and mailing address BACON UNIVERSAL CO., INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,552.41
AMENDED			
3.18	<p>Nonpriority creditor's name and mailing address BACON, MICHAEL J. 442 PASEO REYES DR ST AUGUSTINE, FL 320958558</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$14,493.23
AMENDED			
3.19	<p>Nonpriority creditor's name and mailing address BAKER, MORREL 4931 GRAPEVINE LANE MANVEL, TX 77578</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,819.61
3.20	<p>Nonpriority creditor's name and mailing address BANGOR TRACTOR & EQUIPMENT MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,257.15
AMENDED			
3.21	<p>Nonpriority creditor's name and mailing address BARKER, MICHAEL 1207 NEVA LANE WINSTON SALEM, NC 27107</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$20,381.36

(Name)

Part 2: Additional Page

			Amount of claim
3.22	<p>Nonpriority creditor's name and mailing address BEELER TRACTOR CO MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,822.25
AMENDED			
3.23	<p>Nonpriority creditor's name and mailing address BERNT III, RAGNVALD 453 E STRAWBERRY DR MILL VALLEY, CA 94941-3262</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$3,446.98
AMENDED			
3.24	<p>Nonpriority creditor's name and mailing address BERNT, NICO N. 923 BUSH STREET SANTA ROSA, CA 95404</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$17,750.17
AMENDED			
3.25	<p>Nonpriority creditor's name and mailing address BETTIS, BOB A. 5154 LINDA LN SANTA ROSA, CA 95404</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,932.13
AMENDED			
3.26	<p>Nonpriority creditor's name and mailing address BIBB, TREVOR J. 3305 CR 7530 LUBBOCK, TX 79423</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,331.56

(Name)

Part 2: Additional Page

			Amount of claim
3.27	<p>Nonpriority creditor's name and mailing address BIG BOYS TOYS MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$11,283.14
3.28	<p>Nonpriority creditor's name and mailing address BILL'S TRACTOR & MORE,LP</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,542.22
3.29	<p>Nonpriority creditor's name and mailing address BOOT BARN INC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$450.00
3.30	<p>Nonpriority creditor's name and mailing address BOSWICK ENTERPRISES LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,886.00
3.31	<p>Nonpriority creditor's name and mailing address BRAYDEN J SECHSER</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$500.00

(Name)

Part 2: Additional Page

			Amount of claim
3.32	<p>Nonpriority creditor's name and mailing address BRIAN ALAMO</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,000.00
3.33	<p>Nonpriority creditor's name and mailing address BRIM TACTOR - MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$78,231.81
3.34	<p>Nonpriority creditor's name and mailing address C.A. WIGGINS LUX METALS, INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$90.00
AMENDED			
3.35	<p>Nonpriority creditor's name and mailing address CAMPBELL, JERRY L. 28311 TOMAHAWK DRIVE CANTON, MS 63435</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$12,668.18
AMENDED			
3.36	<p>Nonpriority creditor's name and mailing address CARR, SCOTT P. 3364 PARKER HILL RD SANTA ROSA, CA 95404</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$21,534.55

(Name)

Part 2: Additional Page

			Amount of claim
3.37	<p>Nonpriority creditor's name and mailing address CARRARO SPA - DIVISIONE AGRITALIA</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$429,611.60
AMENDED			
3.38	<p>Nonpriority creditor's name and mailing address CASH, JAMES C. 444 OLD MOUNTAIN RD. LEXINGTON, NC 27292</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,096.11
3.39	<p>Nonpriority creditor's name and mailing address CBIZ MARKS PANETH PO BOX 411222 BOSTON, MA 02241-1222</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$12,800.00
3.40	<p>Nonpriority creditor's name and mailing address CENDROWSKI DESIGN, LLC 391 JONATHAN DRIVE ROCHESTER HILLS, MI 48307</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$16,990.00
3.41	<p>Nonpriority creditor's name and mailing address CERES INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$5,000.00

Part 2: Additional Page

			Amount of claim
3.42	<p>Nonpriority creditor's name and mailing address CHECKR INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,377.07
3.43	<p>Nonpriority creditor's name and mailing address CHESAPEAKE GENERAL LIABILITY INSURANCE</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: INSURANCE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$130.00
3.44	<p>Nonpriority creditor's name and mailing address CHONGQING YUXIN PINGRUI ELECTRONIC CO., LTD.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$520.78
3.45	<p>Nonpriority creditor's name and mailing address CHRIS DAHARSH</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: DEPOSIT</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,000.00
3.46	<p>Nonpriority creditor's name and mailing address CIGNA - LIFE INSURANCE COMPANY OF NORTH AMERICA</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,646.40

(Name)

Part 2: Additional Page

			Amount of claim
3.47	<p>Nonpriority creditor's name and mailing address CINTAS P.O. BOX 631025 CINCINNATI, OH 45263</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$39.28
3.48	<p>Nonpriority creditor's name and mailing address CLARK PEST CONTROL</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$645.00
3.49	<p>Nonpriority creditor's name and mailing address CLEMSON UNIVERSITY</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,500.00
3.50	<p>Nonpriority creditor's name and mailing address CNY FARM SUPPLY</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$11,089.00
3.51	<p>Nonpriority creditor's name and mailing address COLUMBIANA TRACTOR LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$13,147.98

Part 2: Additional Page

			Amount of claim
3.52	<p>Nonpriority creditor's name and mailing address COMCAST XFINITY</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$124.30
3.53	<p>Nonpriority creditor's name and mailing address COMPLETE WELDER'S SUPPLY</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$23.11
3.54	<p>Nonpriority creditor's name and mailing address CONCENTRIC INTERNATIONAL</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$7,558.38
3.55	<p>Nonpriority creditor's name and mailing address CONTAINER CITY (MJM LOGISITICS)</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$25,579.88
3.56	<p>Nonpriority creditor's name and mailing address COULOMB SOLUTIONS INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$44,643.30

Part 2: Additional Page

			Amount of claim
3.57	<p>Nonpriority creditor's name and mailing address COX TRACTOR CO MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,242.20
AMENDED			
3.58	<p>Nonpriority creditor's name and mailing address CRANAGE, PAULA. 13313 CUTTEN RD APT 3210 HOUSTON, TX 77069</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$16,798.06
3.59	<p>Nonpriority creditor's name and mailing address CRANE STATION, INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,399.61
3.60	<p>Nonpriority creditor's name and mailing address CREATIVE CONSUMER RESEARCH , LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$5,000.00
3.61	<p>Nonpriority creditor's name and mailing address CREDIT CARD - DIVVY</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: CREDIT CARD</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$108,092.09

(Name)

Part 2: Additional Page

			Amount of claim
3.62	Nonpriority creditor's name and mailing address CREDIT CARD - RAMP 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: CREDIT CARD Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$79,595.61
3.63	Nonpriority creditor's name and mailing address CRP MECCANICA S.R.L. 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,479.67
3.64	Nonpriority creditor's name and mailing address CULLIGAN WATER OF SONOMA COUNTY 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$583.41
AMENDED			
3.65	Nonpriority creditor's name and mailing address DALE, STEVEN 417 FELDSPAR LN SANTA ROSA, CA 95407-5406 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,003.05
3.66	Nonpriority creditor's name and mailing address DEALER SPIKE 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,375.00

Part 2: Additional Page

			Amount of claim
3.67	<p>Nonpriority creditor's name and mailing address DERRICK BRADLEY</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$500.00
3.68	<p>Nonpriority creditor's name and mailing address DESIGNIT GLOBAL, LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,075.40
3.69	<p>Nonpriority creditor's name and mailing address DHL EXPRESS</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,654.90
3.70	<p>Nonpriority creditor's name and mailing address DIGI-KEY ELECTRONICS</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$16.40
3.71	<p>Nonpriority creditor's name and mailing address DMV RENEWAL</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$448.00

(Name)

Part 2: Additional Page

			Amount of claim
3.72	Nonpriority creditor's name and mailing address EBERHARD EQUIPMENT MASTER V 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,900.81
3.73	Nonpriority creditor's name and mailing address ECAPITAL FREIGHT FACTORING CORP. 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,067.00
3.74	Nonpriority creditor's name and mailing address ECO FARM 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.75	Nonpriority creditor's name and mailing address EG MEDIA INVESTMENTS, LLC 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
3.76	Nonpriority creditor's name and mailing address ELITE LIFT TRUCK 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$782.56

(Name)

Part 2: Additional Page

Amount of claim

AMENDED

3.77	<p>Nonpriority creditor's name and mailing address ELLIOT, JULIE R. 141 LAKEVILLE CIR 141 PETALUMA, CA 94954</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$3,624.90
3.78	<p>Nonpriority creditor's name and mailing address ENVIRO HEATING & AIR CONDITIONING</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$699.00
3.79	<p>Nonpriority creditor's name and mailing address EQUINITI TRUST COMPANY, LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,916.44
3.80	<p>Nonpriority creditor's name and mailing address EQUIP EXPOSITION - OPEI EXPO LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$8,000.00
3.81	<p>Nonpriority creditor's name and mailing address ESCORTS LTD</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: Check all that apply.</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,321.00

Part 2: Additional Page

Amount of claim

AMENDED

<p>3.82</p> <p>Nonpriority creditor's name and mailing address EZELL, GLEN G. 851 MOCKINGBIRD LN SUMMERVILLE, GA 30747</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$14,923.34</p>
<p>3.83</p> <p>Nonpriority creditor's name and mailing address FASTENAL</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$781.19</p>
<p>3.84</p> <p>Nonpriority creditor's name and mailing address FEDEX PO BOX 7221 PASADENA, CA 91109-7321</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$21,635.10</p>
<p>3.85</p> <p>Nonpriority creditor's name and mailing address FEED WORLD TRAILER MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$82.95</p>
<p>3.86</p> <p>Nonpriority creditor's name and mailing address FIRE SAFETY SUPPLY, INC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$205.53</p>

Part 2: Additional Page

Amount of claim

AMENDED

3.87 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$7,306.31
 FLUHRER, JASON *Check all that apply.*
 147 REDWING DR Contingent
 SANTA ROSA, CA 95409 Unliquidated
Date or dates debt was incurred Disputed
Last 4 digits of account number: **Basis for the claim:**
 WAGE
Is the claim subject to offset?
 No
 Yes

AMENDED

3.88 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$3,691.21
 FRISCH, KEENAN L. *Check all that apply.*
 9525 BIGGS WAY Contingent
 WINDSOR, CA, CA 95492 Unliquidated
Date or dates debt was incurred Disputed
Last 4 digits of account number: **Basis for the claim:**
 WAGE
Is the claim subject to offset?
 No
 Yes

3.89 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$33,628.79
 FROSCH - PSR ASSOCIATES INC. *Check all that apply.*
Date or dates debt was incurred Contingent
 Unliquidated
 Disputed
Last 4 digits of account number: **Basis for the claim:**
 TRADE
Is the claim subject to offset?
 No
 Yes

3.90 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$33,690.20
 FUZE LOGISTICS SERVICES INC. *Check all that apply.*
Date or dates debt was incurred Contingent
 Unliquidated
 Disputed
Last 4 digits of account number: **Basis for the claim:**
 TRADE
Is the claim subject to offset?
 No
 Yes

3.91 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$1,089.63
 GEORGIA DEPARTMENT OF LABOR *Check all that apply.*
Date or dates debt was incurred Contingent
 Unliquidated
 Disputed
Last 4 digits of account number: **Basis for the claim:**
 TRADE
Is the claim subject to offset?
 No
 Yes

(Name)

Part 2: Additional Page

			Amount of claim
3.92	<p>Nonpriority creditor's name and mailing address GET RESOURCE INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$32,950.00
AMENDED			
3.93	<p>Nonpriority creditor's name and mailing address GILES, MICHAEL C. 15714 OAK MOUNTAIN DR HOUSTON, TX 77095</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,362.81
AMENDED			
3.94	<p>Nonpriority creditor's name and mailing address GILLAND, STEPHEN E. 114 TRACEWAY DRIVE NATCHEZ, MI 39120</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,615.21
3.95	<p>Nonpriority creditor's name and mailing address GOOGLE 1600 AMPHITHEATRE PKWY MOUNTAIN VIEW, CA 94043</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,385.73
AMENDED			
3.96	<p>Nonpriority creditor's name and mailing address GREENSPAN, DAVID 8360 MONTECITO POINTE DRIVE APT 1014 LAS VEGAS, NV 89149</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,538.22

(Name)

Part 2: Additional Page

Amount of claim

AMENDED

3.97 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$38,833.88
 GROOMS JR, JOHN E.
 404 W. ALPINE RD. 12
 12
 AUSTIN, TX 78704
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Date or dates debt was incurred **Basis for the claim:**
 WAGE
Last 4 digits of account number: **Is the claim subject to offset?**
 No
 Yes

AMENDED

3.98 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$5,618.78
 HAMILTON, MARK W.
 672 BAMBI LANE
 SANTA ROSA, CA 95409
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Date or dates debt was incurred **Basis for the claim:**
 WAGE
Last 4 digits of account number: **Is the claim subject to offset?**
 No
 Yes

3.99 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$10,000.00
 HAN SANTOS, PLLC
 500 UNION STREET, SUITE 800
 SEATTLE, WA 98101
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Date or dates debt was incurred **Basis for the claim:**
 TRADE
Last 4 digits of account number: **Is the claim subject to offset?**
 No
 Yes

3.100 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$8,912.70
 HANEY EQUIPMENT MASTER V
Date or dates debt was incurred *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
Last 4 digits of account number: **Basis for the claim:**
 TRADE
Is the claim subject to offset?
 No
 Yes

3.101 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$800.00
 HEATHER CRAIG
Date or dates debt was incurred *Check all that apply.*
 Contingent
 Unliquidated
 Disputed
Last 4 digits of account number: **Basis for the claim:**
 TRADE
Is the claim subject to offset?
 No
 Yes

(Name)

Part 2: Additional Page

			Amount of claim
3.102	<p>Nonpriority creditor's name and mailing address HEATHER PAULSEN CONSULTING</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$12,262.50
AMENDED			
3.103	<p>Nonpriority creditor's name and mailing address HEBRARD, NATHALIE Y. 1730 VALLEJO STREET SANTA ROSA, CA 95404</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$7,716.66
AMENDED			
3.104	<p>Nonpriority creditor's name and mailing address HECKEROTH, STEPHEN 1945 PINER ROAD, SPACE 23 SANTA ROSA, CA 95403</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$10,768.83
3.105	<p>Nonpriority creditor's name and mailing address HLAVINKA EQUIPMENT COMPANY MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$287.76
3.106	<p>Nonpriority creditor's name and mailing address HOLMAN FLEET LEASING 4001 LEADENHALL RD MOUNT LAUREL, NJ 08054-4611</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: LEASES</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$462,230.97

(Name)

Part 2: Additional Page

			Amount of claim
3.107	Nonpriority creditor's name and mailing address IES INDOOR ENVIRONMENTAL SERVICES 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$416.25
3.108	Nonpriority creditor's name and mailing address ILLINOIS TOLLWAY 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67.10
3.109	Nonpriority creditor's name and mailing address IMA SALT LAKE CITY 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: INSURANCE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,119.37
3.110	Nonpriority creditor's name and mailing address INDEPTH ENGINEERING SOLUTIONS, LLC 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,120.00
3.111	Nonpriority creditor's name and mailing address INFORMA MEDIA INC. 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,850.00

Part 2: Additional Page

			Amount of claim
3.112	<p>Nonpriority creditor's name and mailing address INTEGRITY SHRED LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$240.00
3.113	<p>Nonpriority creditor's name and mailing address INTERSTATE ALL BATTERY CENTER - URBANDALE, IL</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$5,130.19
3.114	<p>Nonpriority creditor's name and mailing address IRON CITY POLARIS</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$3,632.10
AMENDED			
3.115	<p>Nonpriority creditor's name and mailing address IYER, MANI 17606 GLORY ROSE CT CYPRESS, TX 77429</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$86,522.39
3.116	<p>Nonpriority creditor's name and mailing address IYER, MANI 17606 GLORY ROSE CT CYPRESS, TX 77429-3786</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: OTHER</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$26,816.59

(Name)

Part 2: Additional Page

			Amount of claim
3.117	Nonpriority creditor's name and mailing address J.D. POWER 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,000.00
AMENDED			
3.118	Nonpriority creditor's name and mailing address JACKSON, JOHN A. 138 ROCHESTER ROAD NORTHWOOD, NH 03261 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,348.31
AMENDED			
3.119	Nonpriority creditor's name and mailing address JENSEN, MARK E. 15616 SE WALDEN WAY MILWAUKIE, OR 97267 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,759.35
3.120	Nonpriority creditor's name and mailing address JERRY F. SMYTH TRUST AND BARBARA R. SMYTH TRUST 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LANDLORD Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,758.06
3.121	Nonpriority creditor's name and mailing address JUAN GUTIERREZ 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00

(Name)

Part 2:

Additional Page

			Amount of claim
3.122	Nonpriority creditor's name and mailing address K&M MASTER V 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,682.85
3.123	Nonpriority creditor's name and mailing address KAISER PERMANENTE 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72,167.97
3.124	Nonpriority creditor's name and mailing address KENTUCKY EXPOSITION CENTER 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$624.50
3.125	Nonpriority creditor's name and mailing address KEVIN KITAGAWA 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.126	Nonpriority creditor's name and mailing address KMW LTD. 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$199,821.74

(Name)

Part 2: Additional Page

			Amount of claim
3.127	Nonpriority creditor's name and mailing address KONECRANES INC 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$135,594.84
3.128	Nonpriority creditor's name and mailing address KURZ-KASCH, INC 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,200.00
3.129	Nonpriority creditor's name and mailing address KUUSOFT SOFTWARE CORP 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$168.78
AMENDED			
3.130	Nonpriority creditor's name and mailing address LENNON, MICHAEL 3414 FIR DR SANTA ROSA, CA 95405-7518 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,930.47
3.131	Nonpriority creditor's name and mailing address LESSITER MEDIA 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,581.00

Part 2: Additional Page

			Amount of claim
3.132	<p>Nonpriority creditor's name and mailing address LORMAN EDUCATION SERVICES</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$99.00
3.133	<p>Nonpriority creditor's name and mailing address LOVE POWER EQUIPMENT MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$21,529.56
3.134	<p>Nonpriority creditor's name and mailing address MACHINERY PETE, LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$39,099.98
3.135	<p>Nonpriority creditor's name and mailing address MAGNOM CORPORATION LTD</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$127.00
3.136	<p>Nonpriority creditor's name and mailing address MANUFACTURERS SOLUTIONS TEAM</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,667.00

(Name)

Part 2: Additional Page

			Amount of claim
3.137	<p>Nonpriority creditor's name and mailing address MARINSECT LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: DEPOSIT</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$30,240.58
3.138	<p>Nonpriority creditor's name and mailing address MARK MOORE</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: DEPOSIT</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,000.00
AMENDED			
3.139	<p>Nonpriority creditor's name and mailing address MARLIN, JOE M. 1021 TO THE FERRY RD WYALUSING, PA 18853</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$8,987.98
AMENDED			
3.140	<p>Nonpriority creditor's name and mailing address MARTINEZ TORRES, FABIAN 515 UNIVERSITY STREET HEALDSBURG, CA 95448</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$10,868.73
AMENDED			
3.141	<p>Nonpriority creditor's name and mailing address MCCLURE II, JAMES H. 585 LASALLE ST HARRISBURG, OR 97446</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,949.81

(Name)

Part 2:

Additional Page

			Amount of claim
3.142	Nonpriority creditor's name and mailing address MCN 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14.95
3.143	Nonpriority creditor's name and mailing address MEDIAWORKS MARKETING, INC. 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$268,379.86
3.144	Nonpriority creditor's name and mailing address MESHCOMM ENGINEERING 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,614.03
3.145	Nonpriority creditor's name and mailing address MIDWEST SHOWS, INC. 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,370.00
3.146	Nonpriority creditor's name and mailing address MINUTEMAN PRESS 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,183.32

(Name)

Part 2: Additional Page

			Amount of claim
3.147	<p>Nonpriority creditor's name and mailing address MIZE, INC. Date or dates debt was incurred Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$376,390.00
AMENDED			
3.148	<p>Nonpriority creditor's name and mailing address MORRISON, ROBERT A. 14477 CHERRY STREET GUERNEVILLE, CA 95446 Date or dates debt was incurred Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$19,832.41
3.149	<p>Nonpriority creditor's name and mailing address MOTION & FLOW CONTROL PRODUCTS INC Date or dates debt was incurred Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,564.47
3.150	<p>Nonpriority creditor's name and mailing address MOUSER ELECTRONICS, INC. Date or dates debt was incurred Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$178.29
3.151	<p>Nonpriority creditor's name and mailing address MUTUAL OF OMAHA PAYMENT PROCESSING CENTER OMAHA, NE 68103-2147 Date or dates debt was incurred Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$39,378.60

(Name)

Part 2: Additional Page

			Amount of claim
3.152	<p>Nonpriority creditor's name and mailing address MYERS-HOLUM, INC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,244.38
AMENDED			
3.153	<p>Nonpriority creditor's name and mailing address NAJJAR, JOE T. 414 POLARIS DRIVE INDIANAPOLIS, IN 46241</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$4,672.90
3.154	<p>Nonpriority creditor's name and mailing address NATDA</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$650.00
3.155	<p>Nonpriority creditor's name and mailing address NELSON STAFFING</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$79,310.04
3.156	<p>Nonpriority creditor's name and mailing address NEW EAGLE LLC</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$29,290.00

(Name)

Part 2: Additional Page

			Amount of claim
3.157	Nonpriority creditor's name and mailing address NEWARK CORPORATION 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,576.23
3.158	Nonpriority creditor's name and mailing address NICHOLAS CROLL 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,000.00
3.159	Nonpriority creditor's name and mailing address NOLAN MANUFACTURING, LLC 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95,039.54
3.160	Nonpriority creditor's name and mailing address NORTH BAY COLOR - GOLDEN GATE NORTH 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54.96
AMENDED			
3.161	Nonpriority creditor's name and mailing address OIEN PEREZ, KELLEY 305 MONTE VISTA AVENUE HEALDSBURG, CA 95448 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,083.25

(Name)

Part 2: Additional Page

			Amount of claim
3.162	Nonpriority creditor's name and mailing address ONWARD TECHNOLOGIES LIMITED 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72,194.00
3.163	Nonpriority creditor's name and mailing address OPE OF AMERICA, INC. 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28,050.65
3.164	Nonpriority creditor's name and mailing address O'REILLY AUTO 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$356.20
3.165	Nonpriority creditor's name and mailing address OSMAN TOLEDO 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.166	Nonpriority creditor's name and mailing address PACIFIC GAS & ELECTRIC, PG&E 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,066.32

(Name)

Part 2: Additional Page

			Amount of claim
3.167	<p>Nonpriority creditor's name and mailing address PAYLOCITY BILLING</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$447.59
3.168	<p>Nonpriority creditor's name and mailing address PGL LOGISTICS</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$55,750.72
AMENDED			
3.169	<p>Nonpriority creditor's name and mailing address PITTSO, TYLER T. 3663 S. RAINTREE DR NAMPA, ID 83686</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$10,526.03
3.170	<p>Nonpriority creditor's name and mailing address POWER BUSINESS TECHNOLOGY</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$352.47
3.171	<p>Nonpriority creditor's name and mailing address POWERPRO EQUIPMENT MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$7,329.02

(Name)

Part 2: Additional Page

			Amount of claim
3.172	Nonpriority creditor's name and mailing address PSR ASSOCIATES INC DBA GLOBAL AIR TRAVEL 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$344.26
3.173	Nonpriority creditor's name and mailing address QNARY LLC 132 WEST 31ST STREET NEW YORK, NY 10001 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: PROFESSIONALS Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$55,250.00
3.174	Nonpriority creditor's name and mailing address QNARY LLC 132 WEST 31ST STREET NEW YORK, NY 10001 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,400.00
AMENDED			
3.175	Nonpriority creditor's name and mailing address QUIROZ, ALEKSANDER R. 651 MONTCLAIR DRIVE SANTA ROSA, CA 95409 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,985.41
3.176	Nonpriority creditor's name and mailing address RABBIT HOLE POST 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$254.51

(Name)

Part 2: Additional Page

			Amount of claim
3.177	<p>Nonpriority creditor's name and mailing address REACH STRATEGIES</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,500.00
3.178	<p>Nonpriority creditor's name and mailing address RECOLOGY</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,713.05
3.179	<p>Nonpriority creditor's name and mailing address REID'S TRIPLE T</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$5,235.00
3.180	<p>Nonpriority creditor's name and mailing address REINKE'S FARM AND CITY SERVICES</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,435.00
3.181	<p>Nonpriority creditor's name and mailing address ROADRUNNER TRACTORS AND EQUIPMENT</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$3,614.00

(Name)

Part 2: Additional Page

			Amount of claim
3.182	Nonpriority creditor's name and mailing address SAFETY-KLEEN SYSTEMS, INC. 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,642.22
3.183	Nonpriority creditor's name and mailing address SALESFORCE 415 MISSION STREET, 3RD FLOOR SAN FRANCISCO, CA 94105 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,239.20
3.184	Nonpriority creditor's name and mailing address SAVINGS BANK 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: BANK Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,914.05
AMENDED			
3.185	Nonpriority creditor's name and mailing address SAWANT, GIRISH 11601 KATY FWY STE 101 HOUSTON, TX 77079 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47,896.98
3.186	Nonpriority creditor's name and mailing address SCAN GLOBAL SERVICES PRIVATE LIMITED 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,649.50

Part 2: Additional Page

			Amount of claim
3.187	<p>Nonpriority creditor's name and mailing address SCHOW'S TRUCK AND EQUIPMENT MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$9,570.01
3.188	<p>Nonpriority creditor's name and mailing address SCOTT'S LANDSCAPING</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,308.12
AMENDED			
3.189	<p>Nonpriority creditor's name and mailing address SCROBONIA, MICHAEL P. 961 CHIQUITA ROAD HEALDSBURG, CA 95448</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$10,209.74
3.190	<p>Nonpriority creditor's name and mailing address SENSING BIRD LLP</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$153.91
3.191	<p>Nonpriority creditor's name and mailing address SETTIMA USA, INC.</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$15,788.00

(Name)

Part 2: Additional Page

			Amount of claim
3.192	Nonpriority creditor's name and mailing address SHILOH VALLEY EQUIPMENT 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,609.96
3.193	Nonpriority creditor's name and mailing address SIDNEY D VAN DYKE 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.194	Nonpriority creditor's name and mailing address SOCIAL ENTERPRISES, INC. 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,400.00
3.195	Nonpriority creditor's name and mailing address SONIC 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,607.38
3.196	Nonpriority creditor's name and mailing address SONOMA COUNTY FARM BUREAU 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,140.11

Part 2: Additional Page

			Amount of claim
3.197	<p>Nonpriority creditor's name and mailing address SPATIAL TEQ</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$2,500.00
3.198	<p>Nonpriority creditor's name and mailing address SPECIALTY TRACTORS MASTER V</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$11,476.99
3.199	<p>Nonpriority creditor's name and mailing address STEPHEN HECKEROTH NOTE 30151 NAVARO RIDGE RD ALBION, CA 95410</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: OTHER</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$548,098.95
3.200	<p>Nonpriority creditor's name and mailing address STOREPOINT</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: TRADE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$98.00
AMENDED			
3.201	<p>Nonpriority creditor's name and mailing address SUAREZ, GABRIEL 1115 LOMBARDI LN SANTA ROSA, CA 95407-6774</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number:</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: WAGE</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$15,468.14

(Name)

Part 2: Additional Page

			Amount of claim
3.202	Nonpriority creditor's name and mailing address SUNBELT AG EXPO 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,180.00
3.203	Nonpriority creditor's name and mailing address TANGELO - INTEGRATED CREATIVE ENTERPRISES, INC. 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,248.00
3.204	Nonpriority creditor's name and mailing address TEKTITE MANUFACTURING INC 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,400.00
3.205	Nonpriority creditor's name and mailing address TFORCE FREIGHT, INC 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$645.11
3.206	Nonpriority creditor's name and mailing address THE RIPPLES GROUP 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$35,000.00

(Name)

Part 2: Additional Page

Amount of claim

AMENDED

3.207 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$18,275.48
 TOOMEY, NICK M.
 4627 CALAIS CIR
 EVANS, GA 30809
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Date or dates debt was incurred
Basis for the claim:
 WAGE
Last 4 digits of account number:
Is the claim subject to offset?
 No
 Yes

AMENDED

3.208 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$15,871.45
 TORRES MONTES, MARGARITA
 1814 SHERWOOD CIRCLE
 SANTA ROSA, CA 95405
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Date or dates debt was incurred
Basis for the claim:
 WAGE
Last 4 digits of account number:
Is the claim subject to offset?
 No
 Yes

3.209 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$309.88
 TOWN OF WINDSOR
Date or dates debt was incurred
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Last 4 digits of account number:
Basis for the claim:
 TRADE
Is the claim subject to offset?
 No
 Yes

3.210 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$11,760.73
 TRUCK TOPS USA
Date or dates debt was incurred
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Last 4 digits of account number:
Basis for the claim:
 TRADE
Is the claim subject to offset?
 No
 Yes

3.211 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$148.12
 TTI, INC.
Date or dates debt was incurred
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Last 4 digits of account number:
Basis for the claim:
 TRADE
Is the claim subject to offset?
 No
 Yes

(Name)

Part 2: Additional Page

			Amount of claim
3.212	Nonpriority creditor's name and mailing address U.S. BANK EQUIPMENT FINANCE 800 NICOLLET MALL MINNEAPOLIS, MN 55402 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LEASES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,639.34
3.213	Nonpriority creditor's name and mailing address UNICARRIERS CAPITAL-DE LAGE LANDEN FINANCIAL SERVICES 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,259.73
3.214	Nonpriority creditor's name and mailing address US POST OFFICE 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$66.75
3.215	Nonpriority creditor's name and mailing address VERIZON WIRELESS PO BOX 16810 NEWARK, NJ 07101-6810 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,161.42
AMENDED			
3.216	Nonpriority creditor's name and mailing address VISWANATHAN, HARIHARAN 4027 OAK HAVEN DRIVE LABELLE, FL 33935-5454 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$43,425.80

(Name)

Part 2: Additional Page

			Amount of claim
3.217	Nonpriority creditor's name and mailing address WADE TRACTPR & EQUIPMENT INC MASTER V 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$88.07
3.218	Nonpriority creditor's name and mailing address WAYNE RANDY BYRD 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: TRADE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.219	Nonpriority creditor's name and mailing address WELLS FARGO EQUIPMENT FINANCE INC PO BOX 858178 MINNEAPOLIS, MN 55485-8178 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LEASES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,712.46
3.220	Nonpriority creditor's name and mailing address WELLS FARGO FINANCING PO BOX 858178 MINNEAPOLIS, MN 55485-8178 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: LEASES Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$182,409.00
AMENDED			
3.221	Nonpriority creditor's name and mailing address WILLIAMS, MATTHEW R. 3442 DARMOUTH DR SANTA ROSA, CA 95405 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 type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: WAGE Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,746.77

(Name)

Part 2: Additional Page

Amount of claim

AMENDED

3.222 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$16,353.04
 WILSON, SHARON A.
 1902 PALEN COURT
 PETALUMA, CA 94954
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Date or dates debt was incurred
Basis for the claim:
 WAGE
Last 4 digits of account number:
Is the claim subject to offset?
 No
 Yes

AMENDED

3.223 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$8,134.30
 WINNICK, TAYLOR L.
 621 NASON STREET
 SANTA ROSA, CA 95404
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Date or dates debt was incurred
Basis for the claim:
 WAGE
Last 4 digits of account number:
Is the claim subject to offset?
 No
 Yes

3.224 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$5,699.48
 WIRELESS IRRIGATION TECHNOLOGIES (SHOEMAKER)
Date or dates debt was incurred
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Last 4 digits of account number:
Basis for the claim:
 TRADE
Is the claim subject to offset?
 No
 Yes

AMENDED

3.225 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$7,672.78
 WOLFMEIER, TODD P.
 14 HAMPTON WOODS LANE
 OFALLON, MS 63368
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Date or dates debt was incurred
Basis for the claim:
 WAGE
Last 4 digits of account number:
Is the claim subject to offset?
 No
 Yes

3.226 **Nonpriority creditor's name and mailing address** **As of the petition filing date, the claim is:** \$4,990.00
 WORLD AG EXPO
Date or dates debt was incurred
Check all that apply.
 Contingent
 Unliquidated
 Disputed
Last 4 digits of account number:
Basis for the claim:
 TRADE
Is the claim subject to offset?
 No
 Yes

(Name)

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.	\$123,780.94
5b. Total claims from Part 2	5b. +	\$5,537,547.30
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$5,661,328.24

Fill in this information to identify the case:

Debtor Solectrac, Inc.

United States Bankruptcy Court for the: District of Delaware

Case number 24-12731
(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 01/10/2024
MM / DD / YYYY

x /s/ Alfred Poor
Signature of individual signing on behalf of debtor

Alfred Poor
Printed name

CEO
Position or relationship to debtor