

UNITED STATES BANKRUPTCY COURT
DISTRICT OF DELAWARE

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<i>In re</i>	:	Chapter 11
	:	
TECT AEROSPACE GROUP HOLDINGS,	:	Case No. 21-10670 (KBO)
INC., <i>et al.</i> ,	:	
	:	Jointly Administered
Debtors. ¹	:	
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**NOTICE OF FILING OF AMENDED SCHEDULES OF ASSETS AND LIABILITIES
FOR TECT AEROSPACE, LLC, CASE NO. 21-10674 (KBO)**

PLEASE TAKE NOTICE that, on May 3, 2021, TECT Aerospace, LLC (“TECT Aerospace”), one of the debtors and debtors in possession in the above-captioned chapter 11 cases, filed its *Schedules of Assets and Liabilities* [Docket No. 102] (the “**Schedules**”) with the United States Bankruptcy Court for the District of Delaware.

PLEASE TAKE FURTHER NOTICE that TECT Aerospace is hereby filing an amendment to Schedule E/F (Creditors Who Have Unsecured Claims) (the “**Schedule Amendment**”) to correct the amount of the nonpriority unsecured claim of Utica Realty Kent LLC (the “**Corrected Claim**”).

PLEASE TAKE FURTHER NOTICE that a copy of the Schedule Amendment is attached hereto as **Exhibit A**. The Schedule Amendment fully replaces the previously filed Schedule F and does not amend or replace the previously filed Schedule E. For the avoidance of doubt, the Schedule Amendment only affects the Corrected Claim and does not affect any other claimants or claims identified on Schedule E/F (filed on May 3, 2021). The Schedule

¹ The Debtors in these cases, along with the last four digits of each Debtor’s federal tax identification number, are: TECT Aerospace Group Holdings, Inc. (9338); TECT Aerospace Kansas Holdings, LLC (4241); TECT Aerospace Holdings, LLC (9112); TECT Aerospace Wellington Inc. (4768); TECT Aerospace, LLC (8650); TECT Hypervelocity, Inc. (8103); and Sun Country Holdings, LLC (6079). The Debtors’ mailing address is 300 W. Douglas, Suite 100, Wichita, KS 67202.



Amendment is hereby incorporated into, and comprises an integral part of, the Schedules. TECT Aerospace reserves its right to further amend the Schedules, from time to time as may be necessary or appropriate.

Dated: May 12, 2021
Wilmington, Delaware

/s/ Christopher M. De Lillo
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Attorneys for the Debtors and Debtors in Possession

EXHIBIT A

**UNITED STATES BANKRUPTCY COURT
DISTRICT OF DELAWARE**

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<i>In re</i>	:	Chapter 11
	:	
TECT AEROSPACE GROUP HOLDINGS,	:	Case No. 21-10670 (KBO)
INC., <i>et al.</i> ,	:	
	:	
Debtors. ¹	:	Jointly Administered
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**AMENDED SCHEDULES OF ASSETS AND LIABILITIES FOR
TECT AEROSPACE, LLC, CASE NO. 21-10674 (KBO)**

¹ The Debtors in these cases, along with the last four digits of each Debtor's federal tax identification number, are: TECT Aerospace Group Holdings, Inc. (9338); TECT Aerospace Kansas Holdings, LLC (4241); TECT Aerospace Holdings, LLC (9112); TECT Aerospace Wellington Inc. (4768); TECT Aerospace, LLC (8650); TECT Hypervelocity, Inc. (8103); and Sun Country Holdings, LLC (6079). The Debtors' mailing address is 300 W. Douglas, Suite 100, Wichita, KS 67202.

Fill in this information to identify the case:

Debtor Name: In re : TECT Aerospace, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 21-10674 (KBO)

☒ 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*

\$ 0.00

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

\$ 9,468,318.35

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

\$ 9,468,318.35

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*

\$ 43,173,391.84

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*

\$ 3,109,373.49

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*

32,913,373.12

+ \$ 32,873,372.82

Total Updated**4. Total liabilities**

Lines 2 + 3a + 3b

79,196,138.45

\$ 79,156,138.15

Total Amount Updated

Fill in this information to identify the case:

Debtor Name: In re : TECT Aerospace, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 21-10674 (KBO)

☒ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

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

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

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

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

Total claim	Priority amount
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2.1 Priority creditor's name and mailing address

Al Naiema, Asaad

Creditor Name

Creditor's Notice name

Address on File

Address

City

State

ZIP Code

Country

Date or dates debt was incurred

4/5/2021

Last 4 digits of account number 5554

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

As of the petition filing date, the claim is: \$

4,725.10

\$ 4,725.10

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Wages, Benefits, PTO, and Charitable Deductions

Is the claim subject to offset?

- ☐ No
- ☐ Yes

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.2	Priority creditor's name and address ALLEN, PHILIP ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1479 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$38,228.35</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.3	Priority creditor's name and address ANDERSON, DAVID ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 3016 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$5,150.56</u>	<u>\$5,150.56</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.4	Priority creditor's name and address ANDERSON, DOUGLAS ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5337 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$17,620.12</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.5	Priority creditor's name and address ANTHONY, DON ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 4066 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$2,721.38</u>	<u>\$2,721.38</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.6	Priority creditor's name and address AUSTIN, JANE ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2625 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$34,825.08</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

		Total Claim	Priority Amount
2.7	Priority creditor's name and address BAH, MUHAMMED ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5410 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$9,416.85</u>	<u>\$9,416.85</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.8	Priority creditor's name and address BAKER, ETHAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5519 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$5,123.59</u>	<u>\$5,123.59</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.9	Priority creditor's name and address BALLINGER, CHRISTY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5320 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$12,675.17</u>	<u>\$12,675.17</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.10	Priority creditor's name and address BAUER, EMILY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5944 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$19,217.41</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.11	Priority creditor's name and address BENJAMIN, JOHN H ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 7089 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$15,980.19</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.12	Priority creditor's name and address BLANKENSHIP, CHARLES ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1463 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$5,904.77	\$5,904.77
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.13	Priority creditor's name and address BOHAN, LORI ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5755 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$13,920.03	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.14	Priority creditor's name and address BONDOC, ELIZABETH ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5669 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$6,908.90	\$6,908.90
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.15	Priority creditor's name and address BUCKINGHAM, SINA ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5706 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$11,813.69	\$11,813.69
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.16	Priority creditor's name and address CARVO, TERRY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1733 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$17,666.12	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Total Claim

Priority Amount

2.17	Priority creditor's name and address CHALENOR, JOHN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5718 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7,800.63</u>	<u>\$7,800.63</u>
2.18	Priority creditor's name and address CHEN, PAUL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 406 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$9,724.57</u>	<u>\$9,724.57</u>
2.19	Priority creditor's name and address CHOWNING, DARRYL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 4012 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7,108.78</u>	<u>\$7,108.78</u>
2.20	Priority creditor's name and address CIENEGA, GERMAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2759 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$9,371.23</u>	<u>\$9,371.23</u>
2.21	Priority creditor's name and address COCHRAN, SAMUEL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 4226 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$19,423.98</u>	<u>\$13,650.00</u>

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.22	Priority creditor's name and address COCKING, LESLIE ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2231 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$8,061.08</u> <u>\$8,061.08</u>
2.23	Priority creditor's name and address COLEMAN, LINDA L ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5169 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$36,960.25</u> <u>\$13,650.00</u>
2.24	Priority creditor's name and address DANIELS, RICHARD ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1067 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,467.80</u> <u>\$1,467.80</u>
2.25	Priority creditor's name and address DAVIS, NOLAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 3085 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$14,849.27</u> <u>\$13,650.00</u>
2.26	Priority creditor's name and address DAWSON, JOHN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 9155 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$10,040.83</u> <u>\$10,040.83</u>

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Priority Amount

2.31	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral	<u>\$611.50</u>	<u>\$611.50</u>
	Date or dates debt was incurred: 12/23/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.32	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 11/27/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$9,456.43	\$9,456.43
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.33	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 11/12/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$10,269.54	\$10,269.54
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.34	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 12/14/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$10,332.57	\$10,332.57
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.35	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 7/14/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$10,802.16	\$10,802.16
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.36	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 10/29/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$11,351.89	\$11,351.89
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.37	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 7/16/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$11,438.98	\$11,438.98
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.38	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 10/14/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$12,283.07	\$12,283.07
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.39	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 9/29/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$12,650.87	\$12,650.87
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.40	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 9/14/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$13,116.11	\$13,116.11
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.41	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 8/28/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$13,680.25	\$13,680.25
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.42	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 5/14/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,313.60 \$14,313.60
2.43	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 6/29/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,874.69 \$14,874.69
2.44	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 5/28/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,550.86 \$15,550.86
2.45	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 4/29/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,797.38 \$15,797.38
2.46	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 6/12/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,834.61 \$15,834.61

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.47	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 5/7/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$17,857.11	\$17,857.11
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.48	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 4/14/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$17,864.03	\$17,864.03
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.49	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 5/21/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$18,897.03	\$18,897.03
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.50	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 7/2/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$20,287.91	\$20,287.91
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.51	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 6/18/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$21,193.34	\$21,193.34
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.52	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 6/4/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$21,298.53	\$21,298.53
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.53	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 4/23/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$21,545.94	\$21,545.94
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.54	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 8/27/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$24,135.78	\$24,135.78
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.55	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 9/10/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$25,263.40	\$25,263.40
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.56	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 9/24/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$26,805.04	\$26,805.04
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.57	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 11/19/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$27,131.21</u> <u>\$27,131.21</u>
2.58	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 10/8/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$27,235.59</u> <u>\$27,235.59</u>
2.59	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 12/17/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$27,380.83</u> <u>\$27,380.83</u>
2.60	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 12/3/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$27,646.92</u> <u>\$27,646.92</u>
2.61	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 10/22/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$27,670.43</u> <u>\$27,670.43</u>

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.62	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 11/5/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$28,463.59	\$28,463.59
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.63	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 4/9/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$31,239.35	\$31,239.35
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.64	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 8/13/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$38,820.92	\$38,820.92
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.65	Priority creditor's name and address DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE OGDEN, UT 84201-0005 Date or dates debt was incurred: 7/30/20 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$41,881.93	\$41,881.93
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: CARES ACT Payroll Tax Deferral Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.66	Priority creditor's name and address DOPH, DAMON ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5667 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$2,158.50	\$2,158.50
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.67	Priority creditor's name and address DOZARK, PAYTON ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5574 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$5,228.90</u>	<u>\$5,228.90</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.68	Priority creditor's name and address ELDERS, AARON ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 4049 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$26,743.19</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.69	Priority creditor's name and address EM, LIM ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5648 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$4,897.94</u>	<u>\$4,897.94</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.70	Priority creditor's name and address ERICKSON, EDWARD J ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 7016 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$12,486.09</u>	<u>\$12,486.09</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.71	Priority creditor's name and address ERICKSON, JUDITH ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 8559 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$7,571.14</u>	<u>\$7,571.14</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.72	Priority creditor's name and address ESPINOSA, GERWIN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5369 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$6,513.22	\$6,513.22
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.73	Priority creditor's name and address FALLIGAN, TERRENCE ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5550 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$5,472.29	\$5,472.29
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.74	Priority creditor's name and address FAYLONA, RAFAEL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5655 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$6,864.72	\$6,864.72
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.75	Priority creditor's name and address FEDERAL UNEMPLOYMENT TAX LIABILITY U.S. DEPARTMENT OF LABOR 200 CONSTITUTION AVE NW WASHINGTON, DC 20210 Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$53.35	\$53.35
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Unemployment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.76	Priority creditor's name and address FENIN, DENNIS ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5442 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$7,149.02	\$7,149.02
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.82	Priority creditor's name and address GRIFFITHS, JOHN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5338 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$3,801.09	\$3,801.09
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.83	Priority creditor's name and address GROOTHUIS, KORBYN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5652 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$3,181.77	\$3,181.77
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.84	Priority creditor's name and address GUERREIRO, JACQUES ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2719 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$7,431.83	\$7,431.83
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.85	Priority creditor's name and address GUSS, EARL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2605 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$7,876.15	\$7,876.15
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.86	Priority creditor's name and address HAMMOND, LANCE ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2981 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$6,442.33	\$6,442.33
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.87	Priority creditor's name and address HANSON, TERALD ADDRESS ON FILE <div style="display: flex; justify-content: space-between;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5608 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$3,923.17	\$3,923.17
2.88	Priority creditor's name and address HAVEN, WILLIAM ADDRESS ON FILE <div style="display: flex; justify-content: space-between;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5715 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$3,123.22	\$3,123.22
2.89	Priority creditor's name and address HEIN, MIKE ADDRESS ON FILE <div style="display: flex; justify-content: space-between;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1603 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$40,623.66	\$13,650.00
2.90	Priority creditor's name and address HENRIKSEN, MARTIN ADDRESS ON FILE <div style="display: flex; justify-content: space-between;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2162 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$10,093.66	\$10,093.66
2.91	Priority creditor's name and address HERNANDEZ, JORGE ADDRESS ON FILE <div style="display: flex; justify-content: space-between;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2638 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$8,395.61	\$8,395.61

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.92	Priority creditor's name and address HERRICK, KATHY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5526 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$12,928.36</u>	<u>\$12,928.36</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.93	Priority creditor's name and address HIGGINS, BRUCE ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 3960 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$12,915.58</u>	<u>\$12,915.58</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.94	Priority creditor's name and address HINDERMAN, MATTHEW ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 4036 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$13,260.20</u>	<u>\$13,260.20</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.95	Priority creditor's name and address HINES, CURTIS ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 892 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$8,487.37</u>	<u>\$8,487.37</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.96	Priority creditor's name and address HOANG, COSIMO ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5533 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$3,106.93</u>	<u>\$3,106.93</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.97	Priority creditor's name and address HODGES, BILL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5705 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$11,758.99</u>	<u>\$11,758.99</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.98	Priority creditor's name and address HOLLOWAY, BRIAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5611 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$2,890.62</u>	<u>\$2,890.62</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.99	Priority creditor's name and address HOLTER, RODNEY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 6200 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$84,789.37</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.100	Priority creditor's name and address HUBBARD, STEPHEN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5690 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$31,383.44</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.101	Priority creditor's name and address HUCKABAY, GLENN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5372 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$5,889.96</u>	<u>\$5,889.96</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.102	Priority creditor's name and address HUNT, DONOVAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5528 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$3,388.28	\$3,388.28
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.103	Priority creditor's name and address HUNT, KENNETH ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2509 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$9,610.71	\$9,610.71
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.104	Priority creditor's name and address HYER, MARK ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 416 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$10,061.74	\$10,061.74
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.105	Priority creditor's name and address IMRIE, RACHEAL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5737 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$4,709.39	\$4,709.39
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.106	Priority creditor's name and address JAHNKE, JENNIFER ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 6250 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$3,520.85	\$3,520.85
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.107	Priority creditor's name and address JANKOWSKI, RICHARD ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2622 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$10,418.09</u>	<u>\$10,418.09</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.108	Priority creditor's name and address JENSEN, MICHAEL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1940 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$5,043.77</u>	<u>\$5,043.77</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.109	Priority creditor's name and address JOHANSEN, ROBERT ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 7026 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$15,201.75</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.110	Priority creditor's name and address JONES, ALEXANDER ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5656 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$27,803.54</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.111	Priority creditor's name and address JOVEN, REYNALDO ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2066 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$10,909.38</u>	<u>\$10,909.38</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.112	Priority creditor's name and address KAGAN, MIKHAIL B ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2496 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$11,249.83</u>	<u>\$11,249.83</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.113	Priority creditor's name and address KAUR, SURINDER ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5559 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$7,636.91</u>	<u>\$7,636.91</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.114	Priority creditor's name and address KELLY, RICHARD ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5569 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$3,751.47</u>	<u>\$3,751.47</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.115	Priority creditor's name and address KING, DAVID ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5183 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$21,005.53</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.116	Priority creditor's name and address KLEIN, KEVIN T ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2353 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$8,790.85</u>	<u>\$8,790.85</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.117	Priority creditor's name and address KON, MICHAEL ADDRESS ON FILE <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5186 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$3,031.25	\$3,031.25
2.118	Priority creditor's name and address KUZUYBERDIN, RUSLAN ADDRESS ON FILE <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5405 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$3,314.62	\$3,314.62
2.119	Priority creditor's name and address LARSEN, MARK ADDRESS ON FILE <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5445 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$7,389.18	\$7,389.18
2.120	Priority creditor's name and address LARSON, KEVIN ADDRESS ON FILE <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5306 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$35,474.63	\$13,650.00
2.121	Priority creditor's name and address LEONARD, DANIEL ADDRESS ON FILE <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5713 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$10,885.24	\$10,885.24

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.122	Priority creditor's name and address LEPESHA, NIKOLAY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5631 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$5,389.68	\$5,389.68
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.123	Priority creditor's name and address LESLIE, DAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2003 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$6,669.17	\$6,669.17
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.124	Priority creditor's name and address LEWIS, GARY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1411 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$18,725.31	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.125	Priority creditor's name and address LIBERTY, BRIAN T ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 420302 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$34,107.46	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.126	Priority creditor's name and address LYMAN, ROBERT ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 365 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$8,957.91	\$8,957.91
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.127	Priority creditor's name and address MA, LAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5605 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$46,811.65</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.128	Priority creditor's name and address MADISON, TIM ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1406 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$23,763.40</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.129	Priority creditor's name and address MCCLELLAND, KENNETH ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2952 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$7,457.24</u>	<u>\$7,457.24</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.130	Priority creditor's name and address MCGILLIVRAY, GARY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 7032 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$5,722.02</u>	<u>\$5,722.02</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.131	Priority creditor's name and address MCKINNEY, NATHAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5534 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$4,672.56</u>	<u>\$4,672.56</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.132	Priority creditor's name and address MEDALIA, MARCO ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5703 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$5,563.44	\$5,563.44
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.133	Priority creditor's name and address MEDICARE TAX LIABILITY MEDICARE CONTACT CENTER OPERATIONS PO BOX 1270 LAWRENCE, KS 66044 Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$29,664.92	\$29,664.92
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Medicare Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.134	Priority creditor's name and address MERRIAM, TROY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5336 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$14,758.88	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.135	Priority creditor's name and address MEYER, ROBERT L ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 932 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$37,817.99	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.136	Priority creditor's name and address MEYRING, TAYLOR ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5416 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$6,021.38	\$6,021.38
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.137	Priority creditor's name and address MILIAN, GUSTAVO ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5716 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$10,663.80</u>	<u>\$10,663.80</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.138	Priority creditor's name and address MILLER, CHARLES M ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5187 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$8,147.32</u>	<u>\$8,147.32</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.139	Priority creditor's name and address MOCHAN, GARY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2896 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$1,258.40</u>	<u>\$1,258.40</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.140	Priority creditor's name and address MOEN, JUSTIN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5427 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$8,031.94</u>	<u>\$8,031.94</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.141	Priority creditor's name and address MOREHOUSE, BRENDAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 483 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$38,357.52</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
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2.146	Priority creditor's name and address NELSON, WILLIAM A ADDRESS ON FILE	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions	<u>\$12,930.46</u>	<u>\$12,930.46</u>
	Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5182 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes		

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.147	Priority creditor's name and address NGUYEN, QUANG N ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 529740 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$9,060.25	\$9,060.25
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.148	Priority creditor's name and address NGUYEN, Y ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5532 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$6,761.88	\$6,761.88
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.149	Priority creditor's name and address NORN, VANDA ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5340 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$4,692.36	\$4,692.36
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.150	Priority creditor's name and address NORTON, NORMAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5435 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$3,858.05	\$3,858.05
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.151	Priority creditor's name and address OLATUNJI, CHRISTINE ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2506 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$10,194.53	\$10,194.53
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

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Priority Amount

2.156	Priority creditor's name and address POOR, DAVID ADDRESS ON FILE	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$5,379.43</u> <u>\$5,379.43</u>
	Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2803	Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)		

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.157	Priority creditor's name and address RAPANAN, ARNOLD ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5494 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$8,152.95	\$8,152.95
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.158	Priority creditor's name and address READ, REBECCA ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 6246 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$8,502.98	\$8,502.98
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.159	Priority creditor's name and address RILEY, DAVID A ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1421 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$9,248.90	\$9,248.90
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.160	Priority creditor's name and address ROCHON, KAITLYN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5750 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$15,433.04	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.161	Priority creditor's name and address ROGERS, DANNY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5177 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$9,532.89	\$9,532.89
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.162	Priority creditor's name and address ROGERS, JOHN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5531 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$4,817.50	\$4,817.50
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.163	Priority creditor's name and address ROSENJACK, RICHARD ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5912 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$73,421.15	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.164	Priority creditor's name and address RUDISILL, KENNETH ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 234 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$20,780.07	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.165	Priority creditor's name and address SAID, SULTAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2920 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$24,562.56	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.166	Priority creditor's name and address SAIYAN, SHANE ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5572 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$6,357.96	\$6,357.96
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.167	Priority creditor's name and address SANCHEZ, JOSUE ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5579 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$4,281.28	\$4,281.28
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.168	Priority creditor's name and address SANDERS, MICHAEL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 6212 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$16,763.36	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.169	Priority creditor's name and address SCHIEFELBEIN, AARON ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5580 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$1,626.20	\$1,626.20
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.170	Priority creditor's name and address SCHILLING, CRAIG ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5679 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$14,566.54	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.171	Priority creditor's name and address SCHMELZER, TRAVIS ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5455 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$5,322.39	\$5,322.39
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.172	Priority creditor's name and address SCOTT, DANIEL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5696 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$1,250.00	\$1,250.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.173	Priority creditor's name and address SEAGRAVES, CHARLES ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5757 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$5,470.46	\$5,470.46
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.174	Priority creditor's name and address SERWOLD, ROBERT J ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 231 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$35,614.84	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.175	Priority creditor's name and address SEYOUM, MILLION ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2832 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$12,247.50	\$12,247.50
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.176	Priority creditor's name and address SHAW, SAMUEL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2665 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$13,600.02	\$13,600.02
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.177	Priority creditor's name and address SILVESTRE, MICHAEL ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5645 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$4,064.98	\$4,064.98
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.178	Priority creditor's name and address SMITH, COREY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5660 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$3,081.96	\$3,081.96
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.179	Priority creditor's name and address SOCIAL SECURITY TAX LIABILITY SOCIAL SECURITY ADMINISTRATION 1100 WEST HIGH RISE 6401 SECURITY BLVD. BALTIMORE, MD 21235 Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 8650 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$126,843.10	\$126,843.10
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Social Security Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.180	Priority creditor's name and address SREY, VISITH ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5565 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$5,634.42	\$5,634.42
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.181	Priority creditor's name and address STEELE, JOSH ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5362 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$16,593.07	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.182	Priority creditor's name and address STRAIN, COLIN D ADDRESS ON FILE <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1680 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$17,743.17	\$13,650.00
2.183	Priority creditor's name and address STULLER, MICHAEL E ADDRESS ON FILE <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1330 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$17,004.74	\$13,650.00
2.184	Priority creditor's name and address SYLTE, JUSTIN ADDRESS ON FILE <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5628 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$3,297.41	\$3,297.41
2.185	Priority creditor's name and address TADEO, BERNABE ADDRESS ON FILE <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2507 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$14,917.37	\$13,650.00
2.186	Priority creditor's name and address TALIK, LISA ADDRESS ON FILE <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div> Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5707 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4) </div> <div> As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes </div> </div>	\$824.00	\$824.00

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.187	Priority creditor's name and address TAYLOR, TROY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5709 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$16,558.96	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.188	Priority creditor's name and address TERENCE, ALEXANDER ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2773 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$33,902.73	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.189	Priority creditor's name and address THAVIXAY, RICKY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5181 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$9,181.80	\$9,181.80
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.190	Priority creditor's name and address THOMAS, LANCE G ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2504 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$10,150.60	\$10,150.60
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.191	Priority creditor's name and address THWAITS, STEVEN D ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 157 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$47,655.99	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.				Total Claim	Priority Amount
2.192	Priority creditor's name and address			\$8,102.31	\$8,102.31
	TO, TUNG ADDRESS ON FILE		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions		
	Date or dates debt was incurred:	4/5/21	Is the claim subject to offset?		
	Last 4 digits of account number:	2788	<input type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of Priority unsecured claim:	11 U.S.C. § 507(a)(4)			
2.193	Priority creditor's name and address			\$13,330.31	\$13,330.31
	TRAN, THUAN ADDRESS ON FILE		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions		
	Date or dates debt was incurred:	4/5/21	Is the claim subject to offset?		
	Last 4 digits of account number:	2543	<input type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of Priority unsecured claim:	11 U.S.C. § 507(a)(4)			
2.194	Priority creditor's name and address			\$5,511.61	\$5,511.61
	TRAN, TRI ADDRESS ON FILE		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions		
	Date or dates debt was incurred:	4/5/21	Is the claim subject to offset?		
	Last 4 digits of account number:	5521	<input type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of Priority unsecured claim:	11 U.S.C. § 507(a)(4)			
2.195	Priority creditor's name and address			\$6,894.60	\$6,894.60
	TYNAN, GREGG ADDRESS ON FILE		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions		
	Date or dates debt was incurred:	4/5/21	Is the claim subject to offset?		
	Last 4 digits of account number:	2869	<input type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of Priority unsecured claim:	11 U.S.C. § 507(a)(4)			
2.196	Priority creditor's name and address			\$250.80	\$250.80
	UNEMPLOYMENT KANSAS TAX LIABILITY KANSAS UNEMPLOYMENT CONTACT CENTER P.O. BOX 3539 TOPEKA, KS 66601		As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Unemployment		
	Date or dates debt was incurred:	4/5/21	Is the claim subject to offset?		
	Last 4 digits of account number:	3106	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of Priority unsecured claim:	11 U.S.C. § 507(a)(8)			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.197	Priority creditor's name and address UNEMPLOYMENT WASHINGTON TAX LIABILITY AGENCY RECORDS CENTER P.O. BOX 9555 OLYMPIA, WA 98507 Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 6945 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$15,117.23	\$15,117.23
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Unemployment Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.198	Priority creditor's name and address WAGGONER, SHANE ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5856 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$16,007.77	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.199	Priority creditor's name and address WALLEN, WILLIAM H ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 191 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$31,319.88	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.200	Priority creditor's name and address WALSH, ANITA L ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1297 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$7,527.53	\$7,527.53
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.201	Priority creditor's name and address WANGNER, GARY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5343 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$3,582.28	\$3,582.28
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.202	Priority creditor's name and address WARD, KENNETH ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 1196 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$9,806.48	\$9,806.48
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.203	Priority creditor's name and address WASHINGTON PAID FAMILY MEDICAL LEAVE LIABILITY AGENCY RECORDS CENTER P.O. BOX 9555 OLYMPIA, WA 98507 Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 6945 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(8)	\$2,528.34	\$2,528.34
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Medical Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.204	Priority creditor's name and address WHITE, BRIAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 2630 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$8,036.49	\$8,036.49
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.205	Priority creditor's name and address WHITE, STERLING ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5593 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$57,606.27	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.206	Priority creditor's name and address WHITTAKER, MARK ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 93032 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	\$21,895.57	\$13,650.00
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.207	Priority creditor's name and address WIGGINS, JAMES ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 93039 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$25,642.37</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.208	Priority creditor's name and address WILDE, BRIAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 3019 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$6,046.51</u>	<u>\$6,046.51</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.209	Priority creditor's name and address WOLFORD, SUSAN ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5292 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$21,009.33</u>	<u>\$13,650.00</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.210	Priority creditor's name and address WOOD, KYLE ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5624 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$3,102.34</u>	<u>\$3,102.34</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			
2.211	Priority creditor's name and address YALUNG, ROY ADDRESS ON FILE Date or dates debt was incurred: 4/5/21 Last 4 digits of account number: 5644 Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)	<u>\$5,003.46</u>	<u>\$5,003.46</u>
As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes			

Part 1:

Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.		Total Claim	Priority Amount
2.212	<div>Priority creditor's name and address</div> <div>YOST, JAMES</div> <div>ADDRESS ON FILE</div> <div> <div>Date or dates debt was incurred: 4/5/21</div> <div>Last 4 digits of account number: 7068</div> <div>Specify Code subsection of Priority unsecured claim: 11 U.S.C. § 507(a)(4)</div> </div>	<u>\$8,785.55</u>	<u>\$8,785.55</u>
<div>As of the petition filing date, the claim is:</div> <div>Check all that apply.</div> <div> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </div> <div>Basis for the Claim: Wages, Benefits, PTO, and Charitable Deductions</div> <div>Is the claim subject to offset?</div> <div> <input type="checkbox"/> No <input type="checkbox"/> Yes </div>			

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

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

			Amount of claim
3.1 Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is: \$ 5,697.33
ABSOLUTE DIMENSIONS LLC			Check all that apply.
Creditor Name			<input type="checkbox"/> Contingent
Creditor's Notice name			<input type="checkbox"/> Unliquidated
3838 W MAY STREET			<input type="checkbox"/> Disputed
Address			Basis for the claim:
			Trade
WICHITA	KS	67213	
City	State	ZIP Code	
Country			
Date or dates debt was incurred			Is the claim subject to offset?
Various			<input checked="" type="checkbox"/> No
Last 4 digits of account number			<input type="checkbox"/> Yes
3.2 Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is: \$ 2,914.71
ACCURATE BUSHING COMPANY			Check all that apply.
Creditor Name			<input type="checkbox"/> Contingent
Creditor's Notice name			<input type="checkbox"/> Unliquidated
443 NORTH AVE			<input type="checkbox"/> Disputed
Address			Basis for the claim:
			Trade
GARWOOD	NJ	07027-1097	
City	State	ZIP Code	
Country			
Date or dates debt was incurred			Is the claim subject to offset?
4/2/2021			<input checked="" type="checkbox"/> No
Last 4 digits of account number			<input type="checkbox"/> Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.3 Nonpriority creditor's name and mailing address

ADEPT FASTENERS

Creditor Name

Creditor's Notice name

PO BOX 579

Address

SANTA CLARITA CA 91310

City State ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 6,980.75

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.4 Nonpriority creditor's name and mailing address

AERO METAL FINISHING

Creditor Name

Creditor's Notice name

2150 NORTH LARK INDUSTRIAL DRIVE

Address

FENTON MO 63026

City State ZIP Code

Country

Date or dates debt was incurred

3/6/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 1,560.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.5 Nonpriority creditor's name and mailing address

AERO-MAC INC

Creditor Name

Creditor's Notice name

4602 CHENNAULT BCH RD

Address

BLDG D UNIT 1

MUKILTEO

WA

98275

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 353.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.6 Nonpriority creditor's name and mailing address

AEROMET INTERNATIONAL PLC

Creditor Name

Creditor's Notice name

COSGROVE CLOSE

Address

BLACKPOLE

WORCESTER

WR3 8UA

City

State

ZIP Code

UNITED KINGDOM

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 36,721.34

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.7 Nonpriority creditor's name and mailing address

AETNA

Creditor Name

Creditor's Notice name

Wire payment

Address

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 18,882.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.8 Nonpriority creditor's name and mailing address

AIRGAS DRY ICE

Creditor Name

Creditor's Notice name

P.O. BOX 951873

Address

DALLAS

TX

75395-1873

City

State

ZIP Code

Country

Date or dates debt was incurred

3/15/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 103.44

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.9 Nonpriority creditor's name and mailing address

AIRGAS USA LLC

Creditor Name

Creditor's Notice name

PO BOX 7423

Address

PASADENA

CA

91109-7423

City

State

ZIP Code

Country

Date or dates debt was incurred

3/22/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 108.05

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.10 Nonpriority creditor's name and mailing address

AIR-OIL PRODUCTS CORP

Creditor Name

Creditor's Notice name

301 30TH STREET NE

Address

SUITE 112

AUBURN

WA

98002

City

State

ZIP Code

Country

Date or dates debt was incurred

3/8/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 24,096.40

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.11 Nonpriority creditor's name and mailing address

AIR-SEA FORWARDERS INC

Creditor Name

Creditor's Notice name

P.O. BOX 90637

Address

LOS ANGELES

CA

90009

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 450.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.12 Nonpriority creditor's name and mailing address

AMERICAN EXPRESS

Creditor Name

Creditor's Notice name

CPC REMITTANCE PROCESSING

Address

1801 NW 66TH AVE STE 103C

PLANTATION

FL

33313-4571

City

State

ZIP Code

Country

Date or dates debt was incurred

3/30/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 14,970.08

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.13 Nonpriority creditor's name and mailing address

AMJTC

Creditor Name

Creditor's Notice name

ATTN: ADMIN SERVICES

Address

P.O. BOX 80727

SEATTLE

WA

98108

City

State

ZIP Code

Country

Date or dates debt was incurred

3/26/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 1,381.19

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

3.14 Nonpriority creditor's name and mailing address

ANODIZING & PAINT TNM INC

Creditor Name

Creditor's Notice name

21, CHEMIN DE L'AVIATION

Address

POINTE-CLAIR

QC

H9R 4Z2

City

State

ZIP Code

CANADA

Country

Date or dates debt was incurred

3/19/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 309.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.15 **Nonpriority creditor's name and mailing address**

ANOTEK ANODIZING INC.

Creditor Name

Creditor's Notice name

19483 FRASER WAY

Address

PITT MEADOWS

BC

V3Y2V4

City

State

ZIP Code

CANADA

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 1,995.50

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.16 **Nonpriority creditor's name and mailing address**

APPLIED AERO SYSTEMS, LLC

Creditor Name

Creditor's Notice name

10727 47TH PLACE WEST

Address

MUKILTEO

WA

98275

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 21,542.18

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.17 **Nonpriority creditor's name and mailing address**

ARAMARK UNIFORM SERVICES

Creditor Name

Creditor's Notice name

AUS WEST LOCKBOX

Address

PO BOX 101179

PASADENA

CA

91189-0005

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 1,075.62*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.18 **Nonpriority creditor's name and mailing address**

ARCONIC FASTENING SYSTEMS AND RINGS

Creditor Name

Creditor's Notice name

7336 SOLUTIONS CENTER

Address

CHICAGO

IL

60677-7003

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 9,576.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.19 Nonpriority creditor's name and mailing address

ART BRASS AEROSPACE

Creditor Name

Creditor's Notice name

313 SO. FINDLAY STREET

Address

SEATTLE

WA

98108

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 18,416.80

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.20 Nonpriority creditor's name and mailing address

ASKO PROCESSING INC

Creditor Name

Creditor's Notice name

434 NORTH 35TH STREET

Address

SEATTLE

WA

98103

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 15,648.24

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.21 Nonpriority creditor's name and mailing address

ASSOCIATED MACHINE & FABRICATION

Creditor Name

Creditor's Notice name

14205 SE 36TH STREET

Address

Suite 100

BELLEVUE

WA

98006

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 12,826.75

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.22 Nonpriority creditor's name and mailing address

ASW GROUP RETRO

Creditor Name

Creditor's Notice name

P.O. BOX 20309

Address

SEATTLE

WA

98102-1309

City

State

ZIP Code

Country

Date or dates debt was incurred

3/22/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 4,614.42

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.23 Nonpriority creditor's name and mailing address

AT&T MOBILITY - 835207973

Creditor Name

Creditor's Notice name

PO BOX 6463

Address

CAROL STREAM

IL

60197-6463

City

State

ZIP Code

Country

Date or dates debt was incurred

3/19/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 39.55

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.24 Nonpriority creditor's name and mailing address

AUTOMATION PLUS, INC.

Creditor Name

Creditor's Notice name

3409 W. HARRY ST.

Address

WICHITA

KS

67213-1407

City

State

ZIP Code

Country

Date or dates debt was incurred

2/5/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 187.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.25 Nonpriority creditor's name and mailing address

BAY CITY SUPPLY

Creditor Name

Creditor's Notice name

PO BOX 2073

Address

BELLINGHAM

WASHINGTON

98229

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 3,684.88

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.26 Nonpriority creditor's name and mailing address

BEARING BRONZE LIMITED

Creditor Name

Creditor's Notice name

360 SHELDON DRIVE

Address

CAMBRIDGE

ON

N1T 1A9

City

State

ZIP Code

CANADA

Country

Date or dates debt was incurred

3/15/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 624.65

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.27 Nonpriority creditor's name and mailing address

BETTER ENGINEERING MFG. INC.

Creditor Name

Creditor's Notice name

8361 TOWNCENTER COURT

Address

BALTIMORE

MD

21236-4964

City

State

ZIP Code

Country

Date or dates debt was incurred

2/18/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 205.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.28 Nonpriority creditor's name and mailing address

BISCO INDUSTRIES INC

Creditor Name

Creditor's Notice name

DBA NATIONAL PRECISION

Address

PO BOX 68062

ANAHEIM

CA

92817

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 2,223.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.29 Nonpriority creditor's name and mailing address

BLACKHAWK INDUSTRIAL

Creditor Name

Creditor's Notice name

BLACKHAWK INDUSTRIAL DISTRIBUTION INC.

Address

DEPT#5097

P.O. BOX 219081

KANSAS CITY

MO

64121-5097

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 110,952.38

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.30 Nonpriority creditor's name and mailing address

BOEING ACCOMODATION SALES

Creditor Name

Creditor's Notice name

P.O. BOX #277851

Address

ATLANTA

GA

30384-7851

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 124,071.49

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Materials Purchased

Is the claim subject to offset?

☐ No☒ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.31 **Nonpriority creditor's name and mailing address**

BOEING C/O TMX AEROSPACE

Creditor Name

Creditor's Notice name

P.O. BOX 277851

Address

ATLANTA

GA

30384-7851

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 827,352.27*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Materials Purchased

3.32 **Nonpriority creditor's name and mailing address**

BOEING DISTRIBUTION SERVICES INC.

Creditor Name

Creditor's Notice name

88289 EXPEDITE WAY

Address

CHICAGO

IL

60695-0001

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 91,296.09*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Materials Purchased

Is the claim subject to offset?☐ No☒ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.33 Nonpriority creditor's name and mailing address

BRALCO METALS #73

Creditor Name

Creditor's Notice name

FILE 749161

Address

LOS ANGELES

CA

90074-9161

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$

6,424.76

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.34 Nonpriority creditor's name and mailing address

Carey Bond

Creditor Name

Creditor's Notice name

Address on File

Address

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$

73,291.42

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Director's Fees

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.35 Nonpriority creditor's name and mailing address

CARLSON TOOL & MFG. CORP.

Creditor Name

Creditor's Notice name

BIN 88362

Address

MILWAUKEE

WI

53288-0362

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 1,232.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.36 Nonpriority creditor's name and mailing address

CARLTON FORGE WORKS

Creditor Name

Creditor's Notice name

PO BOX 101992

Address

PASADENA

CA

91189-1992

City

State

ZIP Code

Country

Date or dates debt was incurred

3/22/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 11,232.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.37 **Nonpriority creditor's name and mailing address**

CASCADE ENGINEERING SERVICES INC.

Creditor Name

Creditor's Notice name

FBO SALLYPORT COMMERCIAL FINANCIAL, LLC

Address

PO BOX 4776, #100

HOUSTON

TX

77210-4776

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 5,309.98*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.38 **Nonpriority creditor's name and mailing address**

CCDI COMPOSITES

Creditor Name

Creditor's Notice name

1935 E. OCCIDENTAL STREET

Address

SANTA ANA

CA

92705

City

State

ZIP Code

Country

Date or dates debt was incurred

2/16/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 9,612.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.39 Nonpriority creditor's name and mailing address

CCT CONSTRUCTION INC

Creditor Name

Creditor's Notice name

13018 CANYON RD E.

Address

SUITE C

PUYALLUP

WA

98373

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 1,299.18

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.40 Nonpriority creditor's name and mailing address

CHECKMATE INDUSTRIES, INC.

Creditor Name

Creditor's Notice name

8810 - 147TH AVENUE NE

Address

GRANITE FALLS

WA

98252

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 375.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.41 Nonpriority creditor's name and mailing address

CHROME PLUS INTERNATIONAL

Creditor Name

Creditor's Notice name

P.O. BOX 845324

Address

DALLAS

TX

75284-5324

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 897.52

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.42 Nonpriority creditor's name and mailing address

CINTAS CORPORATION #460

Creditor Name

Creditor's Notice name

PO BOX 650838

Address

DALLAS

TX

75265-0838

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 1,360.10

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.43 Nonpriority creditor's name and mailing address

CLARK HILL, PLC

Creditor Name

Creditor's Notice name

PO BOX 3760

Address

PITTSBURGH

PA

15230

City

State

ZIP Code

Country

Date or dates debt was incurred

3/19/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 7,000.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.44 Nonpriority creditor's name and mailing address

CNC SERVICE & MAINTENANCE

Creditor Name

Creditor's Notice name

22609 73rd PLACE WEST

Address

MT.LAKE
TERRACE

WA

98043

City

State

ZIP Code

Country

Date or dates debt was incurred

10/20/2020

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 90.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.45 Nonpriority creditor's name and mailing address

COBALT ENTERPRISES, LLC

Creditor Name

Creditor's Notice name

16410 - 84TH ST NE

Address

SUITE D PMB 315

LAKE STEVENS

WA

98258

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2020

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 5.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.46 Nonpriority creditor's name and mailing address

COLIN STRAIN

Creditor Name

Creditor's Notice name

250 W DOUGLAS AVE

Address

UNIT 1609

WICHITA

KS

67202

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 436.01

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.47 Nonpriority creditor's name and mailing address

Collins

Creditor Name

Creditor's Notice name

Four Coliseum Centre

Address

2730 West Tyvola Road

Charlotte

NC

28217

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 200,000.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Payments to Vendors

3.48 Nonpriority creditor's name and mailing address

COMCAST

Creditor Name

Creditor's Notice name

PO BOX 37601

Address

PHILADELPHIA

PA

19101-0601

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 3,001.47

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.49 Nonpriority creditor's name and mailing address

COMPONENT PRODUCTS CORP

Creditor Name

Creditor's Notice name

11623 CYRUS WAY

Address

MUKILTEO

WA

98275

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 5,175.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.50 Nonpriority creditor's name and mailing address

CONSOLIDATED FOUNDRIES INC

Creditor Name

Creditor's Notice name

Cast Parts, Inc

Address

P O BOX 933170

CLEVELAND

OH

44193

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 27,744.75

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.51 Nonpriority creditor's name and mailing address

COX COMMUNICATIONS

Creditor Name

Creditor's Notice name

PO BOX 248871

Address

OKLAHOMA CITY OK 73124-8871

City State ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 1,279.62

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.52 Nonpriority creditor's name and mailing address

Cox Machine Inc

Creditor Name

Creditor's Notice name

5338 West 21st Street N

Address

Suite 100

WICHITA KS 67205

City State ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 19,741.14

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.53 Nonpriority creditor's name and mailing address

CPP - AZUSA

Creditor Name

Creditor's Notice name

P.O. BOX 933164

Address

CLEVELAND

OH

44193

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 138,293.22

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.54 Nonpriority creditor's name and mailing address

CPP - PORT HUENEME

Creditor Name

Creditor's Notice name

PO BOX 933162

Address

CLEVELAND

OH

44193

City

State

ZIP Code

Country

Date or dates debt was incurred

10/1/2020

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 34,261.93

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.55 Nonpriority creditor's name and mailing address

CRATE TECH INC

Creditor Name

Creditor's Notice name

2582 MOMENTUM PLACE

Address

CHICAGO

IL

60689-5325

City

State

ZIP Code

Country

Date or dates debt was incurred

3/12/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 950.68

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.56 Nonpriority creditor's name and mailing address

CUTTING SPECIALISTS

Creditor Name

Creditor's Notice name

6400 S 143RD PL

Address

TUKWILA

WA

98168

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 384.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.57 Nonpriority creditor's name and mailing address

CYGNUS INC

Creditor Name

Creditor's Notice name

PO BOX 466

Address

PONDERAY

ID

83852-0466

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 27,190.78

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.58 Nonpriority creditor's name and mailing address

DIEFORM LLC

Creditor Name

Creditor's Notice name

PO BOX 27338

Address

ANAHEIM

CA

92809

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 12,950.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.59 Nonpriority creditor's name and mailing address

DIGITAL OFFICE SYSTEMS

Creditor Name

Creditor's Notice name

530 S. HYDRAULIC

Address

WICHITA

KS

67211

City

State

ZIP Code

Country

Date or dates debt was incurred

4/1/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$

38.56

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.60 Nonpriority creditor's name and mailing address

DP TECHNOLOGY CORP.

Creditor Name

Creditor's Notice name

1150 AVENIDA ACASO

Address

CAMARILLO

CA

93012

City

State

ZIP Code

Country

Date or dates debt was incurred

1/7/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$

4,512.50

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.61 Nonpriority creditor's name and mailing address

ECOLIGHTS NORTHWEST LLC

Creditor Name

Creditor's Notice name

7021 S 220TH ST

Address

KENT

City

WA

State

98032

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 206.70

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.62 Nonpriority creditor's name and mailing address

EMBEE PROCESSING, LLC.

Creditor Name

Creditor's Notice name

P.O. BOX 102540

Address

PASADENA

City

CA

State

91189-2540

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 9,178.61

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.63 **Nonpriority creditor's name and mailing address**

ENVIRO PROPANE INC.

Creditor Name

Creditor's Notice name

P.O. BOX 171

Address

ARLINGTON

WA

98223

City

State

ZIP Code

Country

Date or dates debt was incurred

3/5/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 302.53

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.64 **Nonpriority creditor's name and mailing address**

E-WASTE, LLC

Creditor Name

Creditor's Notice name

12424 BEVERLY PARK ROAD

Address

SUITE A4

LYNNWOOD

WA

98087

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 1,354.80

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.65 **Nonpriority creditor's name and mailing address**

EXACTA AEROSPACE, INC.

Creditor Name

Creditor's Notice name

PO BOX 733662

Address

DALLAS

TX

75303-3641

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 217.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.66 **Nonpriority creditor's name and mailing address**

EXOTIC TOOL WELDING

Creditor Name

Creditor's Notice name

2909 SEAWAY BLVD SUITE B

Address

EVERETT

WA

98203

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 3,385.20*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.67 **Nonpriority creditor's name and mailing address**

FIRE CHIEF EQUIPMENT

Creditor Name

Creditor's Notice name

14214 NE 21ST STREET

Address

BELLEVUE

WA

98007

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 674.76*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.68 **Nonpriority creditor's name and mailing address**

FIVE AXIS INDUSTRIES

Creditor Name

Creditor's Notice name

3705 166TH PLACE NE

Address

ARLINGTON

WA

98223

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 91,875.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.69 Nonpriority creditor's name and mailing address

FOREST CITY GEAR CO., INC.

Creditor Name

Creditor's Notice name

11715 MAIN STREET

Address

ROSCOE

IL

61073

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 3,763.20

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.70 Nonpriority creditor's name and mailing address

FUCHS LUBRICANTS CANADA LTD

Creditor Name

Creditor's Notice name

PO BOX 57595 STN A

Address

TORONTO

ON

M5W 5M5

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 6,572.46

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.71 Nonpriority creditor's name and mailing address

FUTURE METALS

Creditor Name

Creditor's Notice name

PO BOX 98667

Address

CHICAGO

IL

60693

City

State

ZIP Code

Country

Date or dates debt was incurred

3/24/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 20,180.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.72 Nonpriority creditor's name and mailing address

GALAXIE BUSINESS EQUIPMENT INC

Creditor Name

Creditor's Notice name

913 MAIN STREET

Address

WINFIELD

KS

67156

City

State

ZIP Code

Country

Date or dates debt was incurred

1/23/2019

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 58.05

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.73 Nonpriority creditor's name and mailing address

GALAXIE BUSINESS EQUIPMENT INC

Creditor Name

Creditor's Notice name

913 MAIN

Address

WINFIELD

KS

67156

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 1,005.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.74 Nonpriority creditor's name and mailing address

GB SYSTEMS INC

Creditor Name

Creditor's Notice name

7202 NE 175TH ST

Address

KENMORE

WA

98028

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 3,084.94

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.75 Nonpriority creditor's name and mailing address

GLOBAL MACHINE WORKS INC.

Creditor Name

Creditor's Notice name

19130 59TH DRIVE N.E.

Address

ARLINGTON

WA

98223

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 467,031.79

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.76 Nonpriority creditor's name and mailing address

GOSIGER WEST - FULLERTON

Creditor Name

Creditor's Notice name

PO BOX 712288

Address

CINCINNATI

OH

45271-2288

City

State

ZIP Code

Country

Date or dates debt was incurred

3/9/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 6,264.06

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.77 Nonpriority creditor's name and mailing address

GRAINGER INDUSTRIAL

Creditor Name

Creditor's Notice name

DEPT. 865929749

Address

PO BOX 419267

KANSAS CITY

MO

64141-6267

City

State

ZIP Code

Country

Date or dates debt was incurred

4/9/2020

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 143.36

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.78 Nonpriority creditor's name and mailing address

GUY DEGREGG

Creditor Name

Creditor's Notice name

7815 UPPER RIDGE ROAD

Address

SNOHOMISH

WA

98203

City

State

ZIP Code

Country

Date or dates debt was incurred

4/10/2018

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 21.80

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.79 Nonpriority creditor's name and mailing address

HERCULES HEAT TREATING CORP

Creditor Name

Creditor's Notice name

101-113 CLASSON AVE

Address

15800

BROOKLYN

NY

11205-1401

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$

3,373.11

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.80 Nonpriority creditor's name and mailing address

HERMANSON COMPANY LLP

Creditor Name

Creditor's Notice name

1221 2ND AVENUE NORTH

Address

KENT

WA

98032

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$

1,810.32

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.81 Nonpriority creditor's name and mailing address

HITEMCO, LLC.

Creditor Name

Creditor's Notice name

160 SWEET HOLLOW ROAD

Address

OLD BETHPAGE

NY

11804

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$

28,445.59

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.82 Nonpriority creditor's name and mailing address

HOME DEPOT CREDIT SERVICES

Creditor Name

Creditor's Notice name

DEPT 32-2020094656

Address

PO BOX 9001030

LOUISVILLE

KY

40290-1030

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$

356.33

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.83 Nonpriority creditor's name and mailing address

HONEYCUTT MANUFACTURING

Creditor Name

Creditor's Notice name

12402 EVERGREEN DRIVE

Address

MUKILTEO

WA

98275

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 132,696.93

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

3.84 Nonpriority creditor's name and mailing address

HQ MACHINE TECH, LLC

Creditor Name

Creditor's Notice name

6900 8TH STREET

Address

BUENA PARK

CA

90620

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 7,230.40

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.85 **Nonpriority creditor's name and mailing address**

HYTEK FINISHES CO

Creditor Name

Creditor's Notice name

PO BOX 31001-2754

Address

PASADENA

CA

91110-2754

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 386,357.32*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.86 **Nonpriority creditor's name and mailing address**

IMAGINETICS LLC

Creditor Name

Creditor's Notice name

DEPT U

Address

PO BOX 3577

SEATTLE

WA

98124-3577

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 7,800.74*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.87 Nonpriority creditor's name and mailing address

INGERSOLL CUTTING TOOL

Creditor Name

Creditor's Notice name

505 FULTON AVE

Address

ROCKFORD

IL

61103

City

State

ZIP Code

Country

Date or dates debt was incurred

3/18/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 1,466.65

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.88 Nonpriority creditor's name and mailing address

J.D. OTT COMPANY

Creditor Name

Creditor's Notice name

2244 - 6TH AVENUE SOUTH

Address

SEATTLE

WA

98134-2002

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 3,123.52

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.89 Nonpriority creditor's name and mailing address

J.THAYER COMPANY

Creditor Name

Creditor's Notice name

15802 SW UPPER BOONES FERRY RD

Address

LAKE OSWEGO

OR

97035

City

State

ZIP Code

Country

Date or dates debt was incurred

1/20/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 1,432.34

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.89 Nonpriority creditor's name and mailing address

JC MANUFACTURING

Creditor Name

Creditor's Notice name

PO BOX 98488

Address

DES MOINES

WA

98198

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 38,015.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.91 Nonpriority creditor's name and mailing address

KAISER ALUMINUM ALEXCO LLC

Creditor Name

Creditor's Notice name

KAISER ALUMINUM FABRICATED PRODUCTS, LLC

Address

PO BOX 100203

PASADENA

CA

91189-0203

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 32,999.16

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.92 Nonpriority creditor's name and mailing address

KAMAN INDUSTRIAL TECHNOLOGIES

Creditor Name

Creditor's Notice name

PO BOX 74566

Address

CHICAGO

IL

60696-4566

City

State

ZIP Code

Country

Date or dates debt was incurred

3/15/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 62.52

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.93 Nonpriority creditor's name and mailing address

KAMATICS

Creditor Name

Creditor's Notice name

P.O. BOX 416778

Address

BOSTON

MA

02241-6778

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 46,631.05

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.94 Nonpriority creditor's name and mailing address

KANSAS GUN DRILLING INC

Creditor Name

Creditor's Notice name

1444 S. ST. CLAIR STREET

Address

BLDG B

WICHITA

KS

67213

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 2,200.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.95 Nonpriority creditor's name and mailing address

KAVLICO CORPORATION / SENSATA TECHNOLOGIES

Creditor Name

Creditor's Notice name

KAVLICO CORP DEPOSITORY ACCOUNT

Address

24729 NETWORK PLACE

CHICAGO

IL

60673-1247

City

State

ZIP Code

Country

Date or dates debt was incurred

2/10/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 78,324.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.96 Nonpriority creditor's name and mailing address

KISER MANUFACTURING, INC.

Creditor Name

Creditor's Notice name

PO BOX 315

Address

ARGONIA

KS

67004-0315

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 20,407.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.97 **Nonpriority creditor's name and mailing address**

LA FARGE & EGGE INC

Creditor Name

Creditor's Notice name

5820 188TH SW.

Address

LYNNWOOD

WA

98036

City

State

ZIP Code

Country

Date or dates debt was incurred

3/9/2021

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 13,588.22*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.98 **Nonpriority creditor's name and mailing address**

LANDSBERG - SEATTLE

Creditor Name

Creditor's Notice name

PO BOX 101144

Address

PASADENA

CA

91189-1145

City

State

ZIP Code

Country

Date or dates debt was incurred

3/11/2021

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 3,406.26*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.99 Nonpriority creditor's name and mailing address

LARKIN PRECISION LLC

Creditor Name

Creditor's Notice name

5810 S 194TH STREET

Address

KENT

WA

98032

City

State

ZIP Code

Country

Date or dates debt was incurred

3/26/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 1,456.25

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.100 Nonpriority creditor's name and mailing address

LEARNING TECHNOLOGIES GROUP INC

Creditor Name

Creditor's Notice name

ATTN: ACCOUNTING

Address

434 FAYETTEVILLE ST 9th FLOOR

RALEIGH

NC

27601

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 8,829.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.101 **Nonpriority creditor's name and mailing address**

LENSCRAFTERS, INC.

Creditor Name

Creditor's Notice name

BANK OF AMERICA LOCKBOX SERVICES

Address

14963 COLLECTIONS CTR.

CHICAGO

IL

60693

City

State

ZIP Code

Country

Date or dates debt was incurred

3/20/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 140.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.102 **Nonpriority creditor's name and mailing address**

LMI MACHINERY INC.

Creditor Name

Creditor's Notice name

970 INDUSTRY DRIVE

Address

TUKWILA

WA

98188

City

State

ZIP Code

Country

Date or dates debt was incurred

3/26/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 3,978.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.103 Nonpriority creditor's name and mailing address

LOGMEIN USA, INC

Creditor Name

Creditor's Notice name

PO BOX 50264

Address

LOS ANGELES

CA

90074-0264

City

State

ZIP Code

Country

Date or dates debt was incurred

3/11/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 1,488.37

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.104 Nonpriority creditor's name and mailing address

MAGELLAN AEROSPACE PROCESSING

Creditor Name

Creditor's Notice name

PO BOX 847020

Address

BOSTON

MA

02284-7020

City

State

ZIP Code

Country

Date or dates debt was incurred

3/26/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 20,015.17

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.105 **Nonpriority creditor's name and mailing address**

MAGNESIUM ALLOY PRODUCTS CO.

Creditor Name

Creditor's Notice name

2420 N. ALAMEDA STREET

Address

P.O. BOX 4668

COMPTON

CA

90224

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 16,560.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.106 **Nonpriority creditor's name and mailing address**

MAKINO INC

Creditor Name

Creditor's Notice name

DEPT CH 16443

Address

PALATINE

IL

60055-6443

City

State

ZIP Code

Country

Date or dates debt was incurred

3/15/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 130.97*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.107 Nonpriority creditor's name and mailing address

MANHATTAN CONSULTANTS, INC.

Creditor Name

Creditor's Notice name

6330 BROCKWAY ROAD

Address

THOMPSON

OH

44086

City

State

ZIP Code

Country

Date or dates debt was incurred

3/19/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 3,550.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.108 Nonpriority creditor's name and mailing address

MAPSCO

Creditor Name

Creditor's Notice name

TCFI CP LLC

Address

P.O. BOX 845324

DALLAS

TX

75284-5324

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 45,567.97

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

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

MAYDAY MANUFACTURING

Creditor Name

Creditor's Notice name

3100 JIM CRISTAL ROAD

Address

DENTON

TX

76207

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 3,394.30

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

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

MCMASTER-CARR SUPPLY CO

Creditor Name

Creditor's Notice name

PO BOX 7690

Address

CHICAGO

IL

60680-7690

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 142.20

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.111 Nonpriority creditor's name and mailing address

Mecadaq Tarnos

Creditor Name

Creditor's Notice name

Fleeson, Gooing, Coulson & Kitch LLC

Address

David G Seely

301 N Main, Suite 1900

Wichita

KS

67202

City

State

ZIP Code

Country

Date or dates debt was incurred

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ Undetermined

Check all that apply.

☒ Contingent☒ Unliquidated☒ Disputed

Basis for the claim:

Litigation

Is the claim subject to offset?

☐ No☐ Yes

3.112 Nonpriority creditor's name and mailing address

MECANIQUE D'AQUITAINE

Creditor Name

Creditor's Notice name

POLE TECHNOLOGIQUE JEAN BERTIN

Address

TARNOS

40220

City

State

ZIP Code

FRANCE

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 62,648.92

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.113 Nonpriority creditor's name and mailing address

MERRILL LYNCH 401(k)

Creditor Name

Creditor's Notice name

1400 AMERICAN BOULEVARD

Address

PENNINGTON

NJ

08534

City

State

ZIP Code

Country

Date or dates debt was incurred

3/31/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 18,494.73

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.114 Nonpriority creditor's name and mailing address

MIHLFELD & ASSOCIATES INC

Creditor Name

Creditor's Notice name

P.O. BOX 11047

Address

SPRINGFIELD

MO

65808-1047

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 16,789.64

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

MORNEAU SHEPELL LIMITED

Creditor Name

Creditor's Notice name

LBX# 1663

Address

PO BOX 95000

PHILADELPHIA

PA

19195-0001

City

State

ZIP Code

Country

Date or dates debt was incurred

3/2/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 1,180.23

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

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

NANCE MANUFACTURING INC

Creditor Name

Creditor's Notice name

2005 S. WEST ST.

Address

WICHITA

KS

67213

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 111,997.71

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

NATIONAL PRECISION BEARING

Creditor Name

Creditor's Notice name

MECHATRONICS, INC

Address

27286 NETWORK PLACE

CHICAGO

IL

60673-1272

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 45,278.56*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

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

NET-INSPECT

Creditor Name

Creditor's Notice name

25 CENTRAL WAY

Address

SUITE 300

KIRKLAND

WA

98033

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 1,200.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

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

NEW HAMPSHIRE BALL BEARINGS INC.

Creditor Name

Creditor's Notice name

FILE 15273 COLLECTIONS CENTER DRIVE

Address

CHICAGO

IL

60693

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 10,626.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

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

NORTH SOUND HOSE & FITTINGS INC.

Creditor Name

Creditor's Notice name

3520 PAINE ST. #1

Address

EVERETT

WA

98201

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 455.01*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

NUWEST GROUP HOLDINGS LLC

Creditor Name

Creditor's Notice name

PO BOX 940

Address

ROSEVILLE

CA

95661

City

State

ZIP Code

Country

Date or dates debt was incurred

4/27/2020

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 1,582.70

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

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

NWI Kansas City LLC

Creditor Name

Creditor's Notice name

PO Box 1278

Address

Thomasville

GA

31799

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 74,606.67

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

NWI PRECISION TUBE ULC

Creditor Name

Creditor's Notice name

DEPT 410116

Address

PO BOX 4375 STN A

TORONTO

ON

M5W 0J3

City

State

ZIP Code

CANADA

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 10,000.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

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

OCCUPATIONAL HEALTH CENTERS OF WASHINGTON, P.S.

Creditor Name

Creditor's Notice name

PO BOX 4300

Address

RANCHO
CUCAMONGA

CA

91729-4300

City

State

ZIP Code

Country

Date or dates debt was incurred

2/6/2020

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 156.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

Office Support Services LLC

Creditor Name

Creditor's Notice name

503 N. Broad Street

Address

Thomasville

GA

31792

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 307,485.60*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

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

OMEGA PRECISION

Creditor Name

Creditor's Notice name

P.O. BOX 1583

Address

MUKILTEO

WA

98275

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 198,200.56*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.127 Nonpriority creditor's name and mailing address

ORION

Creditor Name

Creditor's Notice name

1590 A STREET NE

Address

AUBURN

WA

98002

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$

24,106.50

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.128 Nonpriority creditor's name and mailing address

ORRICO

Creditor Name

Creditor's Notice name

4150 N SUTTLE ROAD

Address

PORTLAND

OR

97217

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$

1,160.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.129 Nonpriority creditor's name and mailing address

P.M. TESTING LABORATORY INC

Creditor Name

Creditor's Notice name

3921 PACIFIC HWY E

Address

FIFE

WA

98424

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 397.50

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.130 Nonpriority creditor's name and mailing address

PACIFIC DISTRIBUTING INC

Creditor Name

Creditor's Notice name

5017 LACKEY RD NW

Address

VAUGHN

WA

98394

City

State

ZIP Code

Country

Date or dates debt was incurred

3/11/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 688.25

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.131 **Nonpriority creditor's name and mailing address**

PACIFIC FORGE INC

Creditor Name

Creditor's Notice name

10641 ETIWANDA AVE

Address

FONTANA

CA

92337

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 33,300.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.132 **Nonpriority creditor's name and mailing address**

PACIFIC METALLURGICAL

Creditor Name

Creditor's Notice name

925 5TH AVENUE SOUTH

Address

PO BOX 399

KENT

WA

98035

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 18,185.83*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.133 Nonpriority creditor's name and mailing address

PACIFIC NORTHWEST SHREDDING INC

Creditor Name

Creditor's Notice name

P.O. BOX 59773

Address

RENTON

WA

98058-2773

City

State

ZIP Code

Country

Date or dates debt was incurred

3/9/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 250.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.134 Nonpriority creditor's name and mailing address

PACIFIC OFFICE AUTOMATION INC.

Creditor Name

Creditor's Notice name

PO BOX 030310

Address

LOS ANGELES

CA

90030-0310

City

State

ZIP Code

Country

Date or dates debt was incurred

2/24/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 3,662.24

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

PACIFIC OFFICE AUTOMATION, INC.

Creditor Name

Creditor's Notice name

14747 NW GREENBRIER PKWY

Address

BEAVERTON

OR

97006

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 1,388.42*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.136 **Nonpriority creditor's name and mailing address**

PARAGON PACIFIC INC

Creditor Name

Creditor's Notice name

STS Operating, INC

Address

P.O. BOX 74007454

CHICAGO

IL

60674-7454

City

State

ZIP Code

Country

Date or dates debt was incurred

3/8/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 2,157.20*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.137 **Nonpriority creditor's name and mailing address**

PARAGON SERVICES, INC.

Creditor Name

Creditor's Notice name

1015 S. WEST STREET

Address

WICHITA

KS

67213

City

State

ZIP Code

Country

Date or dates debt was incurred

3/26/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 4,960.50

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.138 **Nonpriority creditor's name and mailing address**

PARTNERSHIP CARD SERVICES

Creditor Name

Creditor's Notice name

COMMERCIAL BANK

Address

P.O. BOX 2181

COLUMBUS

GA

31902-2181

City

State

ZIP Code

Country

Date or dates debt was incurred

3/24/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 2,599.29

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.139 Nonpriority creditor's name and mailing address

PATTONAIR USA, INC

Creditor Name

Creditor's Notice name

1900 ROBOTICS PLACE

Address

FORT WORTH

TX

76118

City

State

ZIP Code

Country

Date or dates debt was incurred

2/24/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 240.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.139 Nonpriority creditor's name and mailing address

PAYFLEX CLAIMS ACCOUNT

Creditor Name

Creditor's Notice name

PO BOX 2239

Address

OMAHA

NE

68103-2239

City

State

ZIP Code

Country

Date or dates debt was incurred

3/29/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 181.14

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.141 **Nonpriority creditor's name and mailing address**

PCC - PRIMUS INT'L

Creditor Name

Creditor's Notice name

UNIVERSITY SWAGING DIVISION

Address

PO BOX 101976

PASADENA

CA

91189-1976

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 63,789.01*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.142 **Nonpriority creditor's name and mailing address**

PEREGRINE MANUFACTURING, INC

Creditor Name

Creditor's Notice name

19504 24th AVE W

Address

LYNNWOOD

WA

98036

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 3,102.97*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.143 **Nonpriority creditor's name and mailing address**

PETRIE, SHERRI J.

Creditor Name

Creditor's Notice name

10508 W. 99TH STREET

Address

OVERLAND
PARK

KS

66214

City

State

ZIP Code

Country

Date or dates debt was incurred

3/28/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 215.46

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.144 **Nonpriority creditor's name and mailing address**

PETROCARD

Creditor Name

Creditor's Notice name

P.O. BOX 34243

Address

SEATTLE

WA

98124-1243

City

State

ZIP Code

Country

Date or dates debt was incurred

3/15/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 110.48

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.145 **Nonpriority creditor's name and mailing address**

PFS EMPLOYER CONTRIBUTIONS

Creditor Name

Creditor's Notice name

10802 FARNAM DRIVE

Address

SUITE 100

OMAHA

NE

68154

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 2,608.92

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.146 **Nonpriority creditor's name and mailing address**

PIONEER BROACH COMPANY

Creditor Name

Creditor's Notice name

6434 TELEGRAPH ROAD

Address

LOS ANGELES

CA

90040

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 800.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.147 **Nonpriority creditor's name and mailing address**

PIONEER INDUSTRIES

Creditor Name

Creditor's Notice name

7000 HIGHLAND PARKWAY SW

Address

SEATTLE

WA

98106

City

State

ZIP Code

Country

Date or dates debt was incurred

2/23/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 780.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.148 **Nonpriority creditor's name and mailing address**

PORT PLASTICS INC

Creditor Name

Creditor's Notice name

P.O. BOX 398573

Address

SAN FRANCISCO

CA

94139-8573

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 428.67

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.149 Nonpriority creditor's name and mailing address

PPG INTERNATIONAL INC.

Creditor Name

Creditor's Notice name

DEPT 1059

Address

P.O. BOX 121059

DALLAS

TX

75312-1059

City

State

ZIP Code

Country

Date or dates debt was incurred

3/22/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 948.29

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.150 Nonpriority creditor's name and mailing address

PRAXAIR

Creditor Name

Creditor's Notice name

PO BOX 120812 DEPT 0812

Address

DALLAS

TX

75312-0812

City

State

ZIP Code

Country

Date or dates debt was incurred

2/17/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 763.82

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.151 **Nonpriority creditor's name and mailing address**

PRECISION COIL SPRING

Creditor Name

Creditor's Notice name

10107 ROSE STREET

Address

EL MONTE

CA

91731

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 58,662.30*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.152 **Nonpriority creditor's name and mailing address**

PROGRESSIVE ALLOY STEELS UNLIMITED

Creditor Name

Creditor's Notice name

P.O. BOX 675267

Address

DETROIT

MI

48267-5266

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 1,107.36*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.153 **Nonpriority creditor's name and mailing address**

PROPONENT FKA KAPCO

Creditor Name

Creditor's Notice name

PO BOX 841349

Address

LOS ANGELES

CA

90084-1349

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 132.60*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.154 **Nonpriority creditor's name and mailing address**

PROTECTIVE COATINGS INC

Creditor Name

Creditor's Notice name

1208 4th AVE N.

Address

KENT

WA

98032

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 34,039.95*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.155 **Nonpriority creditor's name and mailing address**

PUGET SOUND ENERGY

Creditor Name

Creditor's Notice name

PAYMENT PROCESSING

Address

BOT-01H

PO BOX 91269

BELLEVUE

WA

98009-9269

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 2,566.60*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.156 **Nonpriority creditor's name and mailing address**

QUAL-FAB, INC.

Creditor Name

Creditor's Notice name

1705 S. 93RD ST. F-11

Address

SEATTLE

WA

98108

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 15,756.72*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.157 **Nonpriority creditor's name and mailing address**

QUALITY STAMPING & MACHINING INC

Creditor Name

Creditor's Notice name

1907 137TH AVE E

Address

SUMNER

WA

98390

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 156,003.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.158 **Nonpriority creditor's name and mailing address**

R & S MACHINING INC

Creditor Name

Creditor's Notice name

4800 BAUMGARTNER ROAD

Address

ST LOUIS

MO

63129

City

State

ZIP Code

Country

Date or dates debt was incurred

3/26/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 1,700.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known):

21-10674

Name

3.159 Nonpriority creditor's name and mailing address

RADIUS FABRICATIONS-FORT WORTH, INC.

Creditor Name

Creditor's Notice name

P.O. BOX 640080

Address

PITTSBURGH

PA

15264-0080

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 48,965.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.160 Nonpriority creditor's name and mailing address

RBC AIRCRAFT PRODUCTS

Creditor Name

Creditor's Notice name

9211 PAYSPHERE CIR

Address

CHICAGO

IL

60674

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 22,874.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.161 **Nonpriority creditor's name and mailing address**

RBC BEARINGS

Creditor Name

Creditor's Notice name

9211 PAYSPHERE CIRCLE

Address

CHICAGO

IL

60674

City

State

ZIP Code

Country

Date or dates debt was incurred

3/16/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 10,304.75*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.162 **Nonpriority creditor's name and mailing address**

RBC TRANSPORT DYNAMICS

Creditor Name

Creditor's Notice name

9211 PAYSPHERE CIRCLE

Address

CHICAGO

IL

60674

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 4,675.50*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.163 **Nonpriority creditor's name and mailing address**

RED WING BRANDS OF AMERICA INC

Creditor Name

Creditor's Notice name

RED WING BUSINESS ADVANTAGE ACCOUNT

Address

PO BOX 844329

DALLAS

TX

75284-4329

City

State

ZIP Code

Country

Date or dates debt was incurred

2/10/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 255.65

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.164 **Nonpriority creditor's name and mailing address**

RENTON COIL SPRING CO

Creditor Name

Creditor's Notice name

425 S 7TH ST

Address

PO BOX 880

RENTON

WA

98057-0880

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 32,851.27

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.165 **Nonpriority creditor's name and mailing address**

REPUBLIC SERVICES

Creditor Name

Creditor's Notice name

PO BOX 78829

Address

PHOENIX

AZ

85062-8829

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 4,531.69*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.166 **Nonpriority creditor's name and mailing address**

REXNORD INC

Creditor Name

Creditor's Notice name

PO BOX 93944

Address

CHICAGO

IL

60673-3944

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 48,178.11*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.167 **Nonpriority creditor's name and mailing address**

ROLLED ALLOYS, INC.

Creditor Name

Creditor's Notice name

125 W. STERNS ROAD

Address

TEMPERANCE

MI

48182

City

State

ZIP Code

Country

Date or dates debt was incurred

3/26/2021

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 449.28*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.168 **Nonpriority creditor's name and mailing address**

S.S. WHITE TECHNOLOGIES INC

Creditor Name

Creditor's Notice name

8300 SHEEN DRIVE

Address

ST.
PETERSBURG

FL

33709

City

State

ZIP Code

Country

Date or dates debt was incurred

3/18/2021

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 3,029.16*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.169 **Nonpriority creditor's name and mailing address**

SAFETY-KLEEN CORP

Creditor Name

Creditor's Notice name

PO BOX 975201

Address

DALLAS

TX

75397-5201

City

State

ZIP Code

Country

Date or dates debt was incurred

1/12/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 2,961.38

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.170 **Nonpriority creditor's name and mailing address**

SARGENT AEROSPACE & DEFENSE

Creditor Name

Creditor's Notice name

LOCKBOX #12818

Address

12818 COLLECTIONS CENTER DRIVE

CHICAGO

IL

60693

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 23,800.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.171 Nonpriority creditor's name and mailing address

SEALED AIR CORPORATION

Creditor Name

Creditor's Notice name

26077 Network Place

Address

CHICAGO

IL

60673-1260

City

State

ZIP Code

Country

Date or dates debt was incurred

2/17/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 609.45

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.172 Nonpriority creditor's name and mailing address

SEATTLE FACILITY SERVICES, LLC

Creditor Name

Creditor's Notice name

9623 32ND STREET SE

Address

BLDG D, SUITE 117

LAKE STEVENS

WA

98258

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 6,494.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.173 Nonpriority creditor's name and mailing address

SECURITY ESSENTIALS

Creditor Name

Creditor's Notice name

8584 E. WASHINGTON ST.,#403

Address

CHAGRIN FALLS OH 44023

City State ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 900.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.174 Nonpriority creditor's name and mailing address

SELWAY MACHINE TOOL CO

Creditor Name

Creditor's Notice name

29250 UNION CITY BLVD.

Address

UNION CITY CA 94587

City State ZIP Code

Country

Date or dates debt was incurred

2/17/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 1,546.31

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

SERVICE STEEL AEROSPACE

Creditor Name

Creditor's Notice name

UNITED ALLOUS AM/DYNAMIC METALS

Address

14735 COLLECTIONS CENTER DR

CHICAGO

IL

60693

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 129,426.55*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes3.176 **Nonpriority creditor's name and mailing address**

Shaun Donnellan

Creditor Name

Creditor's Notice name

Address on File

Address

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 74,083.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Director's Fees

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

SHIM-IT CORP

Creditor Name

Creditor's Notice name

1691 CALIFORNIA AVENUE

Address

CORONA

CA

92881-3375

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 4,424.30*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.178 **Nonpriority creditor's name and mailing address**

SKILLS INC.

Creditor Name

Creditor's Notice name

715 - 30TH STREET NE

Address

AUBURN

WA

98002

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 3,807.30*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.179 Nonpriority creditor's name and mailing address

SONITROL PACIFIC

Creditor Name

Creditor's Notice name

8220 N. INTERSTATE AVE

Address

PORTLAND

OR

97217-6635

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 864.54

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.180 Nonpriority creditor's name and mailing address

SPIRIT AEROSYSTEMS

Creditor Name

Creditor's Notice name

P.O. BOX 2978

Address

WICHITA

KS

67201-2978

City

State

ZIP Code

Country

Date or dates debt was incurred

10/14/2020

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 32,236.78

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☐ No☒ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

Spirit Aerosystems

Creditor Name

Creditor's Notice name

3801 S Oliver Street

Address

Wichita

KS

67210

City

State

ZIP Code

Country

Date or dates debt was incurred**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ Undetermined*Check all that apply.*☐ Contingent☒ Unliquidated☐ Disputed**Basis for the claim:**

Litigation

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

SPIRIT AEROSYSTEMS, INC

Creditor Name

Creditor's Notice name

3355 S. OLIVER

Address

Wichita

KS

67210

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 508,148.50*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Payments to Vendors

Is the claim subject to offset?☐ No☒ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

Stony Point Equipment Finance LLC

Creditor Name

Creditor's Notice name

Two Town Square Blvd.

Address

Suite 310

Ashtville

NC

28809

City

State

ZIP Code

Country

Date or dates debt was incurred**Last 4 digits of account****number****As of the petition filing date, the claim is:** \$ 278,588.14*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Deferred Lease Payments

3.184 **Nonpriority creditor's name and mailing address**

STONY POINT GROUP, INC

Creditor Name

Creditor's Notice name

Two Town Square Blvd.

Address

Suite 310

Ashtville

NC

28809

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account**number****As of the petition filing date, the claim is:** \$ 46,414.51*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.185 **Nonpriority creditor's name and mailing address**

SULLIVAN PRECISION METAL FINISHING

Creditor Name

Creditor's Notice name

995 NORTH SERVICE ROAD, WEST

Address

SULLIVAN

MO

63080

City

State

ZIP Code

Country

Date or dates debt was incurred

3/25/2021

Last 4 digits of account number**As of the petition filing date, the claim is:** \$ 400.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.186 **Nonpriority creditor's name and mailing address**

SUNSHINE METALS INC

Creditor Name

Creditor's Notice name

PO BOX 8332

Address

PASADENA

CA

91109-8332

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account number**As of the petition filing date, the claim is:** \$ 11,014.08*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.187 **Nonpriority creditor's name and mailing address**

TARR

Creditor Name

Creditor's Notice name

PO BOX 35142 - #28324

Address

SEATTLE

WA

98124-5142

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 795.60*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.188 **Nonpriority creditor's name and mailing address**

TAZMANIAN FREIGHT SYSTEMS, INC

Creditor Name

Creditor's Notice name

PO BOX 74008270

Address

CHICAGO

IL

60674-8270

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 17,508.52*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.189 **Nonpriority creditor's name and mailing address**

TECH-MARINE ENTERPRISES

Creditor Name

Creditor's Notice name

5111 4th Street E.

Address

FIFE

WA

98424

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 619.65*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.190 **Nonpriority creditor's name and mailing address**

TECT Aerospace Hypervelocity Inc

Creditor Name

Creditor's Notice name

5545 North Mill Heights Dr.

Address

Park City

KS

67219

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 10,794,580.97*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Intercompany Balances

Is the claim subject to offset?☐ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.191 **Nonpriority creditor's name and mailing address**

TECT Aerospace Wellington, Inc.

Creditor Name

Creditor's Notice name

1515 North A Street

Address

Wellington

KS

67152

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 43,740.85*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.192 **Nonpriority creditor's name and mailing address**

TERRACON CONSULTANTS, INC.

Creditor Name

Creditor's Notice name

P.O. BOX 959673

Address

ST LOUIS

MO

63195-9673

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 630.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

THE BOEING COMPANY

Creditor Name

Creditor's Notice name

PO BOX 277851

Address

ATLANTA

GA

30384-7851

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 234,983.97*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Materials Purchased

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

THE BOEING COMPANY

Creditor Name

Creditor's Notice name

100 North Riverside

Address

Chicago

IL

60606

City

State

ZIP Code

Country

Date or dates debt was incurred**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 14,920,168.08*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Advance Payment

Is the claim subject to offset?☐ No☒ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

THOMPSON GUNDRILLING

Creditor Name

Creditor's Notice name

13840 SATICOY STREET

Address

VAN NUYS

CA

91402

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 21,790.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

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

TIAA COMMERCIAL FINANCE, INC

Creditor Name

Creditor's Notice name

PO BOX 911608

Address

DENVER

CO

80291-1608

City

State

ZIP Code

Country

Date or dates debt was incurred

3/12/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 301.89

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

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

TRINITY PRECISION INC

Creditor Name

Creditor's Notice name

1935 W. WALKER STREET

Address

WICHITA

KS

67213

City

State

ZIP Code

Country

Date or dates debt was incurred

2/15/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 68.50

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

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

TRUCK TRAILS NORTHWEST LLC

Creditor Name

Creditor's Notice name

12405 MUKILTEO SPEEDWAY

Address

LYNNWOOD

WA

98087-1531

City

State

ZIP Code

Country

Date or dates debt was incurred

3/26/2021

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 2,295.06

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.199 Nonpriority creditor's name and mailing address

TW METALS

Creditor Name

Creditor's Notice name

PO BOX 933014

Address

ATLANTA

GA

31193-3014

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 20,062.20

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.200 Nonpriority creditor's name and mailing address

U.S. CASTINGS LLC

Creditor Name

Creditor's Notice name

P.O. BOX 678

Address

ENTIAT

WA

98822

City

State

ZIP Code

Country

Date or dates debt was incurred

Not Stated

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 10,849.49

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.201 **Nonpriority creditor's name and mailing address**

UNITED RECYCLING & CONTAINER

Creditor Name

Creditor's Notice name

18827 YEW WAY

Address

SNOHOMISH

WA

98296

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 105.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.202 **Nonpriority creditor's name and mailing address**

Utica Realty Holdings V LLC

Creditor Name

Creditor's Notice name

Two Town Square Blvd.

Address

Suite 310

Asheville

NC

28809

City

State

ZIP Code

Country

Date or dates debt was incurred**Last 4 digits of account**

number

As of the petition filing date, the claim is: \$ 315,735.82

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Deferred Lease Payments

Is the claim subject to offset?☐ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.203 Nonpriority creditor's name and mailing address

Utica Realty Kent LLC

Creditor Name

Creditor's Notice name

Two Town Square Blvd.

Address

Suite 310

Ashville

NC

28809

City

State

ZIP Code

Country

Date or dates debt was incurred

Last 4 digits of account

number

As of the petition filing date, the claim is:

248,521.80

Check all that apply.

\$ 208,521.50

☐ Contingent☐ Unliquidated☐ Disputed

AMOUNT UPDATED

Basis for the claim:

Deferred Lease Payments

3.204 Nonpriority creditor's name and mailing address

VALENCE EVERETT

Creditor Name

Creditor's Notice name

PO BOX 740513

Address

LOS ANGELES

CA

90074-0513

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$

16,061.37

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.205 **Nonpriority creditor's name and mailing address**

VANAM TOOL & ENGINEERING, LLC

Creditor Name

Creditor's Notice name

PO BOX 870400

Address

KANSAS CITY

MO

64187-0400

City

State

ZIP Code

Country

Date or dates debt was incurred

3/15/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 2,105.76*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.206 **Nonpriority creditor's name and mailing address**

VENDORIN LLC.

Creditor Name

Creditor's Notice name

P.O. BOX 1937

Address

HATTIESBURG

MS

39403

City

State

ZIP Code

Country

Date or dates debt was incurred

3/19/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 183.00*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.207 **Nonpriority creditor's name and mailing address**

VERIZON WIRELESS

Creditor Name

Creditor's Notice name

PO BOX 660108

Address

DALLAS

TX

75266-0108

City

State

ZIP Code

Country

Date or dates debt was incurred

4/2/2021

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 3,483.46*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.208 **Nonpriority creditor's name and mailing address**

VIDEOJET TECHNOLOGIES

Creditor Name

Creditor's Notice name

12113 COLLECTIONS CENTER DR

Address

FEDERAL ID# 36-2822116

CHICAGO

IL

60693

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

**Last 4 digits of account
number****As of the petition filing date, the claim is:** \$ 3,357.72*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.209 Nonpriority creditor's name and mailing address

WALTER E NELSON CO OF WESTERN WA

Creditor Name

Creditor's Notice name

813 - 44TH STREET NW

Address

AUBURN

WA

98001

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 579.14

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.210 Nonpriority creditor's name and mailing address

WEATHERFORD AEROSPACE INC

Creditor Name

Creditor's Notice name

LOCKBOX COLLECTIONS

Address

P.O. BOX 6387

CAROL STREAM

IL

60197-6387

City

State

ZIP Code

Country

Date or dates debt was incurred

3/18/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 2,664.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.211 Nonpriority creditor's name and mailing address

WESCO AIRCRAFT

Creditor Name

Creditor's Notice name

PO BOX 734341

Address

DALLAS

TX

75373-4341

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 80,814.56

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

3.212 Nonpriority creditor's name and mailing address

WICHITA COUNTRY CLUB

Creditor Name

Creditor's Notice name

P.O. BOX 8105, MUNGER STATION

Address

WICHITA

KS

67208

City

State

ZIP Code

Country

Date or dates debt was incurred

3/19/2021

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 2,050.01

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Trade

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.213 Nonpriority creditor's name and mailing address

William McCormick

Creditor Name

Creditor's Notice name

Address on File

Address

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 76,766.10

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Director's Fees

3.214 Nonpriority creditor's name and mailing address

Willis, Emily

Creditor Name

Creditor's Notice name

Address on File

Address

City

State

ZIP Code

Country

Date or dates debt was incurred

1/23/2018

Last 4 digits of account
number

As of the petition filing date, the claim is: \$ 239.01

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Flex Benefits

Is the claim subject to offset?

☒ No☐ Yes

Debtor: TECT Aerospace, LLC

Case number (if known): 21-10674

Name

3.215 **Nonpriority creditor's name and mailing address**

WS WILSON CORP

Creditor Name

Creditor's Notice name

24 HARBOR PARK DRIVE

Address

PORT
WASHINGTON

NY

11050

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 7,030.00

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

3.216 **Nonpriority creditor's name and mailing address**

ZIPLY FIBER

Creditor Name

Creditor's Notice name

PO BOX 740416

Address

CINCINNATI

OH

45274-0416

City

State

ZIP Code

Country

Date or dates debt was incurred

Various

Last 4 digits of account

number

As of the petition filing date, the claim is: \$ 707.31

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:**

Trade

Is the claim subject to offset?☒ No☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors. If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Name

Line

☐ Not Listed.Explain

Notice Name

Street

City

State

ZIP Code

Country

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.	\$	3,109,373.49
			32,913,373.12
5b. Total claims from Part 2	Total Amount Updated 5b. +	\$	32,873,372.82
5c. Total of Parts 1 and 2	Total Amount Updated 5c.	\$	36,022,746.64
Lines 5a + 5b = 5c.			35,982,746.31

Fill in this information to identify the case:

Debtor Name: In re : TECT Aerospace, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 21-10674 (KBO)

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 E/F, Part 2
- ☐ *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 05/12/2021

MM / DD / YYYY

✱ /s/ Kevin O. Larson

Signature of individual signing on behalf of debtor

Kevin O. Larson

Printed name

Vice President of Finance

Position or relationship to debtor