| Case 19-46230 Doc 1 | | 10/03/19 17:32:42 | Main Document |
|-----------------------------------------------|-------------------------------|-------------------|---------------------------------------|
| Fill in this information to identify your cas | Pg 1 of 221 | 1 | |
| Fin in this information to identify your cas | Ξ. | | |
| United States Bankruptcy Court for the: | | | |
| Eastern District of Missouri | | | |
| Case number (If known): | Chapter you are filing under: | | |
| | Chapter 7 | | |
| | Chapter 12 | | |
| | Chapter 13 | | Check if this is an amended filing |
| | | 1 | amondod ming |

Official Form 101 Voluntary Petition for Individuals Filing for Bankruptcy 12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

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

| Pa | art 1: Identify Yourself | | |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting | Michael First name Christopher Middle name Dean Last name | Meredith First name Leigh Miller Middle name Dean Last name |
| | with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | $\begin{array}{cccccccccccccccccccccccccccccccccccc$ | $\begin{array}{rrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrrr$ |

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| _ | | | |
|----|--------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer Identification Numbers | I have not used any business names or EINs. | ✓ I have not used any business names or EINs. |
| | (EIN) you have used in | The Plastic Merchant | |
| | the last 8 years | Business name | Business name |
| | Include trade names and | | |
| | doing business as names | Business name | Business name |
| | | | |
| | | EIN | EIN |
| | | | |
| | | EIN | EIN |
| | | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | | |
| | | 3464 Charlestowne Crossing Dr | |
| | | Number Street | Number Street |
| | | | |
| | | | |
| | | Saint Charles MO 63301 | |
| | | City State ZIP Code | City State ZIP Code |
| | | St. Charles County | |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | <u></u> | |
| | | P.O. Box | P.O. Box |
| | | City State ZIP Code | City State ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | <i>this district</i> to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other | Over the last 180 days before filing this petition, I have lived in this district longer than in any other |
| | | district. | district. |
| | | I have another reason. Explain. | I have another reason. Explain. |
| | | (See 28 U.S.C. § 1408.) | (See 28 U.S.C. § 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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| Pa | art 2: Tell the Court Abo | out Your Ba | inkruptcy Case | | | |
|-----|----------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Check or for Bankr Chap Chap Chap Chap | ter 11 ter 12 | see <i>Notice Requi</i> i e top of page 1 and | red by 11 U.S.C. § 3 | 342(b) for Individuals Filing iate box. |
| 8. | How you will pay the fee | local yours subm with a I nee Apple I requ By la less t pay t | pay the entire fee when I file court for more details about he self, you may pay with cash, ca itting your payment on your be a pre-printed address. d to pay the fee in installmen cation for Individuals to Pay Th uest that my fee be waived (` w, a judge may, but is not require han 150% of the official pover the fee in installments). If you co other 7 Filing Fee Waived (Offici | by you may pay. ashier's check, or ehalf, your attorn hts . If you choos <i>he Filing Fee in I</i> . You may request uired to, waive yo ty line that applie choose this option | Typically, if you a money order. If y ey may pay with a e this option, sign <i>nstallments</i> (Offic this option only if our fee, and may o the sto your family s n, you must fill ou | are paying the fee your attorney is a credit card or check and attach the ial Form 103A). f you are filing for Chapter 7. do so only if your income is ize and you are unable to t the <i>Application to Have the</i> |
| 9. | bankruptcy within the | District | | w | hen | Case number |
| 10. | affiliate? Dist | trict | | When | Case | to you |
| 11. | Do you rent your residence? | No. | Go to line 12. Has your landlord obtained an evi | | | |
| | | | ✓ No. Go to line 12. Yes. Fill out <i>Initial Statement</i> , this bankruptcy petition. | About an Eviction . | Judgment Against Y | <i>You</i> (Form 101A) and file it with |

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Part 3: Report About Any Businesses You Own as a Sole Proprietor

| 12 | Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one | No. Go to Part 4. ✓ Yes. Name and location of business The Plastic Merchant Name of business, if any 3464 Charlestowne Crossing Dr Number Street | | | | | |
|----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|---------------------------|-------------------|--|
| | sole proprietorship, use a separate sheet and attach it to this petition. | | Saint Charles City Check the appropriate box to describe Health Care Business (as defined Single Asset Real Estate (as defined Stockbroker (as defined in 11 U.S Commodity Broker (as defined in None of the above | l in 11 U.S.C. § ned in 11 U.S.C S.C. § 101(53A)) | 101(27A)) . § 101(51B) | 63301 ZIP Code | |
| | Are you filing under Chapter 11 of the Bankruptcy Code and are you a <i>small business</i> <i>debtor</i> ? For a definition of <i>small</i> <i>business debtor</i> , see 11 U.S.C. § 101(51D). | If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. | | | | if | |
| | Art 4: Report if You Own Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | ✓ No | Any Hazardous Property or Any What is the hazard? | | at Needs | | |
| | that must be fed, or a building that needs urgent repairs? | | Where is the property? | | | | |

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Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

ability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
 Disability. My physical disability causes me ta be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Part 6: Answer These Ques | stions for Reporting Purposes | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
| 16. What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Mo. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. | | | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | administrative expenses are paid the | estimate that after any exempt p | roperty is excluded and bute to unsecured creditors? | | |
| 18. How many creditors do you estimate that you owe? | 50-99 |)0-5,000)1-10,000)01-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 | | |
| 19. How much do you estimate your assets to be worth? | \$50,001-\$100,000 \$10, ✓ \$100,001-\$500,000 \$50, | 000,001-\$10 million ,000,001-\$50 million ,000,001-\$100 million 0,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | \$50,001-\$100,000 \$10,000 \$100,001-\$500,000 \$50,000 | 000,001-\$10 million ,000,001-\$50 million ,000,001-\$100 million 0,000,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| For you | I have examined this petition, and I declare u | under penalty of perjury that the i | nformation provided is true and | | |
| , | correct. If I have chosen to file under Chapter 7, I am of title 11, United States Code. I understand under Chapter 7. | | | | |
| | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill ou this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | |
| | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | |
| | I understand making a false statement, conc with a bankruptcy case can result in fines up 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | |
| | /s/ Michael Christopher Dean | /s/ Meredit | h Leigh Miller Dean | | |
| | Signature of Debtor 1 | Signature of I | Debtor 2 | | |
| | Executed on | Executed on | 10/03/2019 MM / DD / YYYY | | |

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| For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page. | to proceed under Chapter 7, 11, 12, or 13 of ti available under each chapter for which the per the notice required by 11 U.S.C. § 342(b) and, knowledge after an inquiry that the information (s/Bryon Hale) | le 11, United States Code, son is eligible. I also certif in a case in which § 707(b | y that I have delivered to the debtor(s))(4)(D) applies, certify that I have no |
|--------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| | Signature of Attorney for Debtor Bryon Hale | | MM / DD /YYYY |
| | Printed name | | |
| | Barklage, Brett & Hamill, PC | | |
| | Firm name | | |
| | 211 N. Third Street | | |
| | Number Street | | |
| | St. Charles | MO | 63301 |
| | City | State | ZIP Code |
| | Contact phone 636-949-2120 | Email address | @barklage-brett.com |
| | 64883 | МО | |
| | Bar number | State | |

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| Fill in this information to identify your case: | | | | | | |
|----------------------------------------------------------------------|--------------------------|---------------|-----------|--|--|--|
| Debtor 1 | Michael Christopher Dean | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | merealth reig | h Miller Dean | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: Eastern District of Missouri | | | | | | |
| Case number | | | | | | |

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

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

Part 1: Summarize Your Assets

| | | Your assets Value of what you own |
|----|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ <u>0.00</u> |
| | 1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> | \$ <u>117,969.00</u> |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ <u>117,969.00</u> |
| Pa | art 2: Summarize Your Liabilities | |
| | | Your liabilities Amount you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of Schedule D | \$ <u>0.00</u> |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ <u>2,149.38</u> |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | + \$ <u>834,404.32</u> |
| | Your total liabilities | \$ <u>836,553.70</u> |
| Pa | art 3: Summarize Your Income and Expenses | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ <u>5,253.17</u> |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ <u>4,213.00</u> |

| Debtor 1 Case 19-46230 Doc 1 Filed 10/03/19 Entered 10 Michael Christopher Dean Pg 9 of 221 First Name Middle Name Last Name | 0/03/19 17:32:42 Main Document Case number (if known) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| Part 4: Answer These Questions for Administrative and Statistical Rec 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical form to the court with your other schedules. | this form to the court with your other schedules. by an individual primarily for a personal, purposes. 28 U.S.C. § 159. |
| From the Statement of Your Current Monthly Income: Copy your total current mont Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule Experimentation of the statement of the | \$ |
| | Total claim |
| From Part 4 on <i>Schedule E/F</i> , copy the following: | |
| 9a. Domestic support obligations (Copy line 6a.) | \$0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$2,149.38 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$0.00 |
| 9d. Student loans. (Copy line 6f.) | \$0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report priority claims. (Copy line 6g.) | t as <u>\$0.00</u> |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + \$0.00 |
| 9g. Total. Add lines 9a through 9f. | \$2,149.38 |

| Fill in this (in | <mark>gyrgation-toidenii</mark> | y yc <mark>urcese</mark> and this | fili h@/03/19 | Entered 10/03/19 17:3 | 32:42 | Main Document |
|---------------------|---------------------------------|-----------------------------------|----------------------|-----------------------|-------|--------------------------------------|
| | | | Pg 1 | .0 of 221 | | |
| Debtor 1 | Michael Christopher | r Dean | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Meredith Leigh Mill | ler Dean | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the | : Eastern District of Misso | uri | | | |
| Case number | | | | | | |
| | | | | | | L Check if this is an amended filing |
| | | | | | | |

Official Form 106A/B Schedule A/B: Property

12/15

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

| Part 1: | Describe Each Residence | , Building, Land, or Other Rea | al Estate You Own or Have an Interest In |
|---------|--------------------------------|--------------------------------|------------------------------------------|
|---------|--------------------------------|--------------------------------|------------------------------------------|

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

| No. Go to Part 2. | | | |
|-------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|---------------------------------------|
| Yes. Where is the property? 1.1 | What is the property? Check all that apply. Single-family home Duplex or multi-unit building | Do not deduct secured cl the amount of any secure Creditors Who Have Clair | ed claims on <i>Schedule D:</i> |
| | Condominium or cooperative | Current value of the entire property? | Current value of the portion you own? |
| City State ZIP Code | Land Investment property Timeshare Other | \$ | simple, tenancy by |
| County | Who has an interest in the property? Check one. | Check if this is co | ommunity property |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | |
| If you own or have more than one, list here: | What is the property? Check all that apply. Single-family home Duplex or multi-unit building | Do not deduct secured cl the amount of any secure <i>Creditors Who Have Clai</i> | ed claims on <i>Schedule D:</i> |
| | Condominium or cooperative | Current value of the entire property? | Current value of the portion you own? |
| | Land Investment property | \$ | \$ |
| City State ZIP Code | Timeshare Other Who has an interest in the property? Check one. | Describe the nature interest (such as fee the entireties, or a life | simple, tenancy by |
| County | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Check if this is co (see instructions) | ommunity property |
| | Other information you wish to add about this ite property identification number: | m, such as local | |

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| _ | 1 Street address, if available, or other description | | What is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D Creditors Who Have Claims Secured by Property Current value of the entire property? Current value of the portion you own? \$ | |
|---------------------------|-----------------------------------------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| Co | bunty | | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this ite property identification number: | Check if this is co (see instructions) | e estate), if known. |
| you have Part 2: | e attached for Part 1. Wri Describe Your Vehic n, lease, or have legal or o | te that number h cles equitable interes ou lease a vehicle | I of your entries from Part 1, including any entries here Ist in any vehicles, whether they are registered or r e, also report it on <i>Schedule G: Executory Contracts a</i> , motorcycles | not? Include any vehicles | \$ <u>0.00</u> |
| 3.1. M M Ya Af | ther information: | 2 | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured cla the amount of any secure <i>Creditors Who Have Clain</i> Current value of the entire property? \$5,000.00 | d claims on Schedule D: |
| 3.2. Ma Ma Ye Ap | her information: | | Who has an interest in the property? Check one. □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) | Do not deduct secured cla the amount of any secure <i>Creditors Who Have Clain</i> Current value of the entire property? \$9,000.00 | d claims on <i>Schedule D:</i> |

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| | Make: | Who has an interest in the property? Check one. | Do not deduct secured cla | |
|--------|------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|
| | Model: | Debtor 1 only | the amount of any secured Creditors Who Have Claim | |
| | Year: | Debtor 2 only | Current value of the | Current value of the |
| | Approximate mileage: | Debtor 1 and Debtor 2 only At least one of the debtors and another | entire property? | portion you own? |
| | Other information: | | | |
| | | Check if this is community property (see instructions) | \$ | \$ |
| | | Who has an interest in the property? Check one. | Do not deduct secured cla | ims or exemptions Put |
| | Make: Model: | Debtor 1 only | the amount of any secured Creditors Who Have Claim | d claims on Schedule D: |
| | | Debtor 2 only | | |
| | Year: | Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| | Approximate mileage: | At least one of the debtors and another | · · · · · · · · · · · · · · · · · | ,, |
| | Other information: | Check if this is community property (see instructions) | \$ | \$ |
| 4.1. | Make: Model: Year: Other information: | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) | Do not deduct secured cla the amount of any secured <i>Creditors Who Have Clain</i> Current value of the entire property? \$ | d claims on Schedule D: ns Secured by Property. Current value of the portion you own? |
| lf you | own or have more than one, list here: | | | |
| , | Make: | Who has an interest in the property? Check one. | Do not deduct secured cla the amount of any secured | d claims on Schedule D: |
| | Model: | Debtor 2 only | Creditors Who Have Claim | |
| | Year: Other information: | Debtor 1 and Debtor 2 only At least one of the debtors and another | Current value of the entire property? | Current value of the portion you own? |
| | | Check if this is community property (see instructions) | \$ | \$ |
| | | | 1 | |
| | | all of your entries from Part 2, including any entries here | | \$_14,000.00 |
| you n | are allocied for Fail 2. While liat NUMDEr | | | |
| | | | | |

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| Pa | rt 3: Describe You | r Personal and Household Items | |
|-----|-----------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|
| Do | o you own or have any le | egal or equitable interest in any of the following items? | Current value of the portion you own? |
| 6. | Household goods and | furnishings | Do not deduct secured claims or exemptions. |
| | | ces, furniture, linens, china, kitchenware Furniture and appliances | \$ <u>500.00</u> |
| 7. | Electronics | | |
| | collections; e | nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music lectronic devices including cell phones, cameras, media players, games 62" Television, sound bar, 2 Apple laptops; 2 iphones | \$ 2,000.00 |
| 0 | Collectibles of value | | Ψ |
| 8. | Examples: Antiques and | figurines; paintings, prints, or other artwork; books, pictures, or other art objects; | I |
| | | or baseball card collections; other collections, memorabilia, collectibles 20,000+ Magic the Gathering Cards | 1 |
| | Yes. Describe | | \$ |
| 9. | Equipment for sports a | nd hobbies | |
| | and kayaks; o | graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments | |
| | No Yes. Describe | Bicycle | \$ |
| 10. | Firearms | | <u> </u> |
| | Examples: Pistols, rifles, | shotguns, ammunition, and related equipment | |
| | Yes. Describe | | \$_0.00 |
| 11. | Clothes | | |
| | | hes, furs, leather coats, designer wear, shoes, accessories Miscellaneous clothing | 1 |
| | Yes. Describe | | \$ |
| 12 | Jewelry | | |
| | Examples: Everyday jew gold, silver | elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | |
| | No Ves. Describe | 2 Steinhart watches, Wedding Bands | \$ <u>3,500.00</u> |
| 13. | Non-farm animals <i>Examples:</i> Dogs, cats, bi | irde horses | |
| | | | |
| | Vo Yes. Describe | | \$ |
| 14. | Any other personal and | household items you did not already list, including any health aids you did not list | |
| | No Yes. Give specific | | ¢ 0.00 |
| | information | | <u>φ</u> |
| 15. | | all of your entries from Part 3, including any entries for pages you have attached | \$_7,500.00 |

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| Part 4: Describe Your Financial Assets | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| Do you own or have any legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. Cash <i>Examples:</i> Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition | |
| ☑ No | |
| ☐ Yes Cash: | \$ |
| 17. Deposits of money <i>Examples:</i> Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. | |
| □ No ☑ Yes Institution name: | |
| 17.1. Checking account: UFB Direct - Meredith Dean | <u>\$</u> 10.00 |
| 17.2. Checking account: UFB Direct - Michael Dean | |
| 17.3. Savings account: | \$ |
| 17.4. Savings account: | . \$ |
| 17.5. Certificates of deposit: | - \$ |
| 17.6. Other financial account: First Community Credit Union | <u>\$</u> 493.40 |
| 17.7. Other financial account: Central Bank | _{\$} 37.65 |
| 17.8. Other financial account: Alliant Credit Union | _{\$} 5.00 |
| 17.9. Other financial account: | |
| 18. Bonds, mutual funds, or publicly traded stocks <i>Examples:</i> Bond funds, investment accounts with brokerage firms, money market accounts No Yes Institution or issuer name: | |
| Fidelity - Cash Management Account | <u>\$</u> 406.49 |
| Fidelity - Taxable Investment Account | <u>\$</u> 0.15 |
| Stockpile.com | \$ <u>0.00</u> |
| 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No Yes. Give specific information about them. Name of entity: % of ownership: | \$ \$ |
| ^ | \$ |

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| Non-negotiable in No No Yes. Give spe information ab them Issuer name: | out | _ \$ |
|---------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| Yes. Give spe information ab them Issuer name: | iout | - |
| information ab them Issuer name: | iout | - |
| them Issuer name: | | - |
| Issuer name: | | - |
| | | - |
| | | \$ |
| | | |
| | | \$ |
| | ension accounts | |
| , | sts in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans | |
| No | | |
| Yes. List each | | |
| account separ Type of accour | | |
| 01(k) or similar plan: | Fidelity | _{\$} 16,695.00 |
| Pension plan: | | • • |
| RA: | Vanguard IRA | |
| | PEERS Retirement Account | _ \$ |
| Retirement account: | | _ <u>\$_0,022.02</u> |
| Keogh: | | _ * |
| Additional account: | State Farm 401k | |
| Additional account: | Vanguard IRA | _ _{\$} 46,739.52 |
| Your share of all u | s and prepayments unused deposits you have made so that you may continue service or use from a company | |
| Your share of all u Examples: Agree companies, or oth No Yes lectric: | unused deposits you have made so that you may continue service or use from a company ments with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications there | \$\$ |
| Your share of all u Examples: Agreen companies, or oth V No Yes ectric: as: eating oil: | unused deposits you have made so that you may continue service or use from a company ments with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications there | \$ \$ \$ |
| Your share of all (Examples: Agreen companies, or oth No Yes ectric: as: pating oil: ental unit: | unused deposits you have made so that you may continue service or use from a company ments with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications there | \$ \$ \$ \$ \$ |
| Your share of all u Examples: Agreen companies, or oth V No Yes ectric: as: eating oil: ental unit: repaid rent: | unused deposits you have made so that you may continue service or use from a company ments with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications there | \$\$ \$\$ \$\$ \$\$ |
| Your share of all u Examples: Agree companies, or oth I No Yes ectric: as: ating oil: ental unit: epaid rent: elephone: | unused deposits you have made so that you may continue service or use from a company ments with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications there | \$\$ \$\$ \$\$ \$\$ \$\$ |
| Your share of all u Examples: Agree companies, or oth No Yes lectric: as: eating oil: ental unit: repaid rent: elephone: //ater: | unused deposits you have made so that you may continue service or use from a company ments with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications there | \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ |
| Your share of all u Examples: Agree companies, or oth No Yes lectric: as: eating oil: ental unit: repaid rent: elephone: //ater: | unused deposits you have made so that you may continue service or use from a company ments with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications there | \$\$ \$\$ \$\$ \$\$ \$\$ \$\$ |
| Your share of all t <i>Examples:</i> Agreet companies, or oth | unused deposits you have made so that you may continue service or use from a company ments with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications there | \$ \$ \$ \$ \$ \$ |
| Your share of all u Examples: Agree companies, or oth I No Yes | unused deposits you have made so that you may continue service or use from a company ments with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications there | \$\$ \$\$ \$\$ \$\$ \$\$ |

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| Of Interacts in an education IDA in an account in a multitud ADI E was more accounted with the | | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------------------------|
| 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified sta 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | ate tuition program. | |
| ∠0 0.0.0. §§ 000(b)(1), 020A(b), and 020(b)(1). ∠ No | | |
| | | |
| Yes Institution name and description. Separately file the records of any inter- | ests.11 U.S.C. § 521(c) | |
| | | \$ |
| | | |
| | | \$ |
| | | Ψ |
| 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights of | or nowers | |
| exercisable for your benefit | | |
| ☑ No | | |
| Yes. Give specific | | |
| information about them | | \$ <u>0.00</u> |
| | |] |
| 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property | | |
| <i>Examples</i> : Internet domain names, websites, proceeds from royalties and licensing agreements | | ì |
| | | |
| Yes. Give specific information about them | | \$0.00 |
| | | Ψ |
| 27. Licenses, franchises, and other general intangibles | | J |
| <i>Examples</i> : Building permits, exclusive licenses, cooperative association holdings, liquor licenses, profe | ssional licenses | |
| | | 1 |
| Yes. Give specific | | |
| information about them | | \$0.00 |
| | | _ |
| Money or property owed to you? | | Current value of the |
| | | portion you own? Do not deduct secured |
| | | claims or exemptions. |
| 28. Tax refunds owed to you | | |
| ₽ No | | |
| Yes. Give specific information | Federal: | 0.00 |
| about them, including whether | , ouorain 4 | |
| you already filed the returns and the tax years | | <u>30.00</u> 30.00 |
| | Local: | 30.00 |
| | | |
| 29. Family support | | |
| Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlen | ent, property settlemer | nt |
| | | |
| Yes. Give specific information | Alimony: | \$ 0.00 |
| | Maintenance: | \$ <u>0.00</u> |
| | Support: | \$ <u>0.00</u> |
| | Divorce settlement: | \$ <u>0.00</u> |
| | | \$ 0.00 |
| | Property settlement: | Ψ |
| 30. Other amounts someone owes you | | |
| Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, wo Social Security benefits; unpaid loans you made to someone else | rkers compensation, | |
| | |] |
| Yes. Give specific information | | |
| | | \$ <u>0.00</u> |
| L. | | - |

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| 31. Interests in insurance policies <i>Examples:</i> Health, disability, or life insurance; health savings account (HSA); credit, homeor No | wner's, or renter's insurance | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|--------------------------------------------------------------------------------------------|
| Yes. Name the insurance company Company name: | Beneficiary: | Surrender or refund value: |
| of each policy and list its value Dearborn National Life Term Life - Daughter 2 - through Orchard Farm School District | Meredith Dean | \$ 0.00 |
| Dearborn National Life Term Life - Daughter 1 - through Orchard Farm School District | Meredith Dean | \$ \$ 0.00 |
| Dearborn National Life Term Life - Michael Dean - through Orchard Farm School District | Meredith Dean | \$ |
| 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or ar property because someone has died. ✓ No ✓ Yes. Give specific information | e currently entitled to receive | 0.00 |
| 33. Claims against third parties, whether or not you have filed a lawsuit or made a demar <i>Examples:</i> Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim | nd for payment | \$ <u>0.00</u> \$0.00 |
| 34. Other contingent and unliquidated claims of every nature, including counterclaims of | the debter and rights | |
| to set off claims | the debtor and rights | |
| | |] |
| Yes. Describe each claim | | \$ <u>0.00</u> |
| | | |
| 35. Any financial assets you did not already list | | _ |
| | | _ |
| Yes. Give specific information | | \$ 0.00 |
| | | |
| 36. Add the dollar value of all of your entries from Part 4, including any entries for pages for Part 4. Write that number here | you have attached → | <u>\$</u> 96,469.00 |
| | | |
| Part 5: Describe Any Business-Related Property You Own or Have | an Interest In. List any re | eal estate in Part 1. |
| 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. | | |
| | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 38. Accounts receivable or commissions you already earned | | |
| □ No | | 1 |
| Yes. Describe | | \$ |
| 39. Office equipment, furnishings, and supplies <i>Examples:</i> Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephone No | ones, desks, chairs, electronic devices | 1 |
| Yes. Describe | | \$ |
| | | |

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| 40. Machinery, fixtures, e | equipment, supplies you use in business, and tools of your trade | |
|-----------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| | | _ |
| Yes. Describe | | \$ |
| 41. Inventory | | |
| No | | |
| Yes. Describe | | \$ |
| 42. Interests in partnersh | lips or joint ventures | |
| N₀ | | |
| Yes. Describe | | |
| | %% | \$ \$ |
| | % | \$ |
| 43. Customer lists. maili | ng lists, or other compilations | |
| No | | |
| Yes. Do your lists | s include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? | |
| Yes. Des | cribe | ¢ |
| | | \$ |
| 44. Any business-related | property you did not already list | |
| Yes. Give specific | | \$ |
| information | | \$\$ |
| | | \$ |
| | | \$ |
| | | \$ |
| | | \$ |
| | of all of your entries from Part 5, including any entries for pages you have attached number here | \$ <u>0.00</u> |
| | | |
| | | |
| Part 6: Describe A If you own o | ny Farm- and Commercial Fishing-Related Property You Own or Have an Interest I r have an interest in farmland, list it in Part 1. | n. |
| | | |
| 46. Do you own or have a No. Go to Part 7. | any legal or equitable interest in any farm- or commercial fishing-related property? | |
| Yes. Go to line 47. | | |
| | | Current value of the portion you own? |
| | | Do not deduct secured claims or exemptions. |
| 47. Farm animals | poultry farm-raised fich | |
| \square No | poultry, farm-raised fish | |
| | | |
| | | \$ |

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| 48. Crops—either growing or harvested | | |
|------------------------------------------------------------------------------------------------------------------------------|----------------------------------------|--------------------------------|
| No Yes. Give specific information | | \$ |
| 49. Farm and fishing equipment, implements, machinery, fixtures | s, and tools of trade | |
| | | \$ |
| 50. Farm and fishing supplies, chemicals, and feed | | |
| ☐ No ☐ Yes | | |
| | | \$ |
| 51. Any farm- and commercial fishing-related property you did n | ot already list | |
| Yes. Give specific information | | |
| | | \$ |
| 52. Add the dollar value of all of your entries from Part 6, includi for Part 6. Write that number here | | → \$ |
| | | |
| Part 7: Describe All Property You Own or Have a | an Interest in That You Did Not List A | bove |
| 53. Do you have other property of any kind you did not already l <i>Examples:</i> Season tickets, country club membership | ist? | |
| ✓ No ✓ Yes. Give specific | | |
| information | | |
| | | |
| 54. Add the dollar value of all of your entries from Part 7. Write the | hat number here | → \$_0.00 |
| Part 8: List the Totals of Each Part of this Form | | |
| 55. Part 1: Total real estate, line 2 | | |
| 56. Part 2: Total vehicles, line 5 | \$_14,000.00 | |
| 57. Part 3: Total personal and household items, line 15 | \$_7,500.00 | |
| 58. Part 4: Total financial assets, line 36 | \$ <u>96,469.00</u> | |
| 59. Part 5: Total business-related property, line 45 | \$_0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$_0.00 | |
| 61. Part 7: Total other property not listed, line 54 | + \$ <u>0.00</u> | |
| 62. Total personal property. Add lines 56 through 61 | \$ Copy personal property | total → + <u>\$</u> 117,969.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | \$117,969.00 |

Michael Christopher Dean & Meredith Leigh Miller Dr First Name Middle Name Last Name

Debtor 1

Case number (if known)_

Continuation Sheet for Official Form 106A/B 31) Interests in insurance policies

| | policies | |
|--------------------------------------------------------------------------------------------------|---------------|------|
| Dearborn National Life Term Life - Meredith Dean - Through Orchard Farm School District | Michael Dean | 0.00 |
| Brighthouse Financial - Term Life - Michael Dean | Meredith Dean | 0.00 |
| Brighthouse Financial - Term Life - Meredith Dean | Michael Dean | 0.00 |

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| Fill in this inf | formation to identify you | ur case: | |
|---------------------------|--------------------------------|----------------------------|-----------|
| Debtor 1 | Michael Christopher Dean | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: East | stern District of Missouri | |
| Case number (If known) | | | (, |
| | | | |

Check if this is an amended filing

Official Form 106C Schedule C: The Property You Claim as Exempt

4/19

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

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

| Part 1: Identify the Property You Claim as Exempt | | | | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|------------------------------------|--|--|--|
| Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ❑ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | |
| Brief description of the property and line on Schedule A/B that lists this property Debtor 1 Exemptions | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption | Specific laws that allow exemption | | | |
| 2012 Volkswagen Tiguan Brief description: Line from Schedule A/B: 3.1 | \$ <u>5,000.00</u> | 2,500.00 100% of fair market value, up to any applicable statutory limit | Mo. Rev. Stat. § 513.430 1.(5) | | | |
| 2011 Toyota Venza Brief description: Line from Schedule A/B: 3.2 | \$ <u>9,000.00</u> | _ \$ 997.31 ☐ 100% of fair market value, up to any applicable statutory limit | Mo. Rev. Stat. § 513.440 | | | |
| 2011 Toyota Venza description: Line from Schedule A/B: 3.2 | \$ <u>9,000.00</u> | _ ⊈ \$ <u>500.00</u> ☐ 100% of fair market value, up to any applicable statutory limit | Mo. Rev. Stat. § 513.430 1.(5) | | | |
| 3. Are you claiming a homestead exemption or (Subject to adjustment on 4/01/22 and every 3 ✓ No ✓ Yes. Did you acquire the property covered I ✓ No | years after that for cases filed | | | | | |

☐ Yes

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| Part 2 | 2: Additional Page | | | |
|---------------------------|---------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------------------------|------------------------------------|
| | rief description of the property and line n <i>Schedule A/B</i> that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief | Household goods - Furniture and appliances | \$ 500.00 | د. \$ 250.00 | Mo. Rev. Stat. § 513.430 1.(1) |
| descrip | | Ψ | 100% of fair market value, up to any applicable statutory limit | |
| Schedu | <i>Ile A/B:</i> 6 Electronics - 62" Television, sound bar, 2 Apple laptops; | | | Mo. Rev. Stat. § 513.430 1.(1) |
| Brief descrip | 2 iphones tion: | \$ <u>2,000.00</u> | \$ <u>1,000.00</u> 100% of fair market value, up to | |
| Line fro | om <i>Ile A/B:</i> 7 | | any applicable statutory limit | |
| Brief descrip | Collectibles of value - 20,000+ Magic the Gathering Cards | \$ <u>500.00</u> | v \$ <u>250.00</u> | Mo. Rev. Stat. § 513.430 1.(1) |
| Line fro | m | | 100% of fair market value, up to any applicable statutory limit | |
| Schedu Brief | Ile A/B: 8 Sports and hobby equipment - Bicycle | | | Mo. Rev. Stat. § 513.430 1.(1) |
| descrip | | \$ <u>500.00</u> | \$ 250.00 100% of fair market value, up to | |
| Line fro Schedu | - | | any applicable statutory limit | Mo. Rev. Stat. § 513.430 1.(1) |
| Brief descrip | | \$ <u>500.00</u> | | |
| Line fro | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief | Jewelry - 2 Steinhart watches | \$ 500.00 | ¥ 250.00 | Mo. Rev. Stat. § 513.430 1.(2) |
| descrip | | , <u> </u> | 100% of fair market value, up to any applicable statutory limit | |
| Schedu | <i>Ile A/B:</i> 12 Jewelry - Wedding Bands | | | Mo. Rev. Stat. § 513.430 1.(2) |
| Brief descrip | tion: | \$ <u>3,000.00</u> | _ ⊈ \$ <u>1,500.00</u> □ 100% of fair market value, up to | |
| Line fro <i>Schedu</i> | | | any applicable statutory limit | |
| Brief descrip | | <u>\$10.00</u> | <u>\$ 10.00</u> | Mo. Rev. Stat. § 513.440 |
| Line fro | | | 100% of fair market value, up to any applicable statutory limit | |
| <i>Schedu</i> Brief | Ile A/B: 17.2 First Community Credit Union (Checking) | 402.40 | — 102.40 | Mo. Rev. Stat. § 513.440 |
| descrip | tion: | \$ <u>493.40</u> | - ♥ \$ 493.40 □ 100% of fair market value, up to | |
| Line fro Schedu | | | any applicable statutory limit | Mo. Rev. Stat. § 513.440 |
| Brief descrip | | \$ <u>37.65</u> | V \$ <u>37.65</u> | - |
| Line fro Schedu | | | 100% of fair market value, up to any applicable statutory limit | |
| Brief descrip | Alliant Credit Union (Checking) | \$ <u>5.00</u> | v \$ <u>5.00</u> | Mo. Rev. Stat. § 513.440 |
| Line fro | | | 100% of fair market value, up to any applicable statutory limit | |
| Schedu | | | | Mo. Rev. Stat. § 513.440 |
| Brief descrip | tion: | \$ <u>406.49</u> | 406.49 100% of fair market value, up to | |
| Line fro Schedu | om <i>Ile A/B:</i> 18 | | any applicable statutory limit | |
| | | | | |

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|----------------------------------------------|----------------|----------|------------------------|---------------|
| Michael Christopher D | ean Pg 2 | 3 of 221 | Case number (if known) | |

First Name

Debtor

Middle Name Last Name

Case number (if known)_

Part 2: Additional Page

| | | - | | |
|---------------|-----------------------------------------------------------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------|-------------------------------------|
| | Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Duiof | Fidelity - Taxable Investment Account (Brokerage) | | | Mo. Rev. Stat. § 513.440 |
| Brief | | \$ 0.15 | ✓ \$ 0.15 | |
| uesc | ription: | * <u></u> | 100% of fair market value, up to | |
| Line Sche | from edule A/B: 18 | | any applicable statutory limit | |
| Brief | Vanguard IRA | | | Mo. Rev. Stat. § 513.430 1.(10) (f) |
| desc | ription: | \$ <u>46,739.52</u> | \$ 46,739.52 100% of fair market value, up to any applicable statutory limit | |
| Line Sche | edule A/B: 21 | | any applicable statutory limit | |
| Brief | Dearborn National Life Term Life - Daughter 2 - through | | | Mo. Rev. Stat. § 513.430 1.(7) |
| | Orchard Farm School District ription: | \$ <u>0.00</u> | ✓ \$ 0.00 | |
| | | | 100% of fair market value, up to |) |
| | from edule A/B: 31 | | any applicable statutory limit | |
| SUITE | Dearborn National Life Term Life - Daughter 1 - through | | | Mo. Rev. Stat. § 513.430 1.(7) |
| Brief desc | Orchard Farm School District ription: | \$ <u>0.00</u> | ✓ \$ 0.00 | • • • • • |
| | from | | 100% of fair market value, up to |) |
| | edule A/B: 31 | | any applicable statutory limit | |
| Brief | | \$ 0.00 | v \$ 0.00 | Mo. Rev. Stat. § 513.430 1.(7) |
| desc | ription: | ₽ <u>0.000</u> | | |
| | f | | 100% of fair market value, up to any applicable statutory limit | |
| | from edule A/B: 31 | | | |
| Brief | Dearborn National Life Term Life - Meredith Dean - | 0.00 | | Mo. Rev. Stat. § 513.430 1.(7) |
| | Through Orchard Farm School District ription: | \$ <u>0.00</u> | ✓ \$ 0.00 | |
| | from edule A/B: 31 | | 100% of fair market value, up to any applicable statutory limit |) |
| | Brighthouse Financial - Term Life - Michael Dean | | | Mo. Rev. Stat. § 513.430 1.(7) |
| Brief | ription: | \$ ^{0.00} | ✓ \$ 0.00 | |
| 4030 | | | 100% of fair market value, up to | |
| | from edule A/B: 31 | | any applicable statutory limit | |
| | Cash on hand (Cash On Hand) | | | Mo. Rev. Stat. § 513.440 |
| Brief | | \$ 0.00 | ✓ \$ 0.00 | |
| desc | ription: | Ψ | _ | |
| | _ | | 100% of fair market value, up to any applicable statutory limit | |
| Line Sche | from edule A/B: | | | |
| Brief | | ¢ | | |
| desc | ription: | \$ | L_\$ | |
| | from edule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| Driof | | | | |
| Brief desc | ription: | \$ | \$ \$ | |
| Lino | from | | 100% of fair market value, up to | |
| | edule A/B: | | any applicable statutory limit | |
| Brief | | ¢ | | |
| desc | ription: | \$ | 100% of fair market value, up to | |
| | , | | any applicable statutory limit | |
| | from edule A/B: | | · · · | |
| Brief | | | _ | |
| | ription: | \$ | \$ | |
| Line | from | | 100% of fair market value, up to any applicable statutory limit | |
| | edule A/B: | | any applicable statutory infilt | |

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|----|----|----|---|----|----------|---|----------|
| | | | | | <u> </u> | | <u> </u> |

| Fill in this information to identify your case: | | | | | | |
|----------------------------------------------------------------------|----------------------------|-------------|-----------|--|--|--|
| Debtor 1 | | | | | | |
| - | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Meredith Leigh Miller Dean | l | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: Eastern District of Missouri | | | | | | |
| Case number (If known) | | | () | | | |
| | | | | | | |

Part 1: Identify the Property You Claim as Exempt

Check if this is an amended filing

Official Form 106C Schedule C: The Property You Claim as Exempt

4/19

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

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

| - | | | | | | | |
|-------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|------------------------------------|--|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ❑ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) | | | | | | |
| 2. | For any property you list on <i>Schedule A/B</i> th | nat you claim as exempt, fill i | in the information below. | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property Debtor 2 Exemptions | Current value of the portion you own Copy the value from | Amount of the exemption you claim Check only one box | Specific laws that allow exemption | | | |
| | | Schedule A/B | for each exemption | | | | |
| | 2012 Volkswagen Tiguan ef cription: e from | \$ <u>5,000.00</u> | ✓ \$ 2,500.00 ☐ 100% of fair market value, up to any applicable statutory limit | Mo. Rev. Stat. § 513.430 1.(5) | | | |
| | nedule A/B: 3.1 | | | | | | |
| Lin | cription: e from | \$ <u>9,000.00</u> | ✓ \$ 590.00 ☐ 100% of fair market value, up to any applicable statutory limit | Mo. Rev. Stat. § 513.430.1(3) | | | |
| Brie des | nedule A/B: 3.2 2011 Toyota Venza cription: e from | \$_9,000.00 | ✓ § 500.00 100% of fair market value, up to any applicable statutory limit | Mo. Rev. Stat. § 513.430 1.(5) | | | |
| | nedule A/B: 3.2 | | | | | | |
| 3. | Are you claiming a homestead exemption o (Subject to adjustment on 4/01/22 and every 3 No Yes. Did you acquire the property covered No | years after that for cases filed | · , | | | | |
| | | | | | | | |

| Debtor | |
|--------|--|

 Case 19-46230 Meredith Leigh Miller Dean
 Filed 10/03/19 Prize for the second secon

Part 2: Additional Page

| Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
|--------------------------------------------------------------------------------------------|--------------------------------------|--------------------------------------------------------------------------------------------------------------|-------------------------------------|
| | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Household goods - Furniture and appliances Brief description: | \$ <u>500.00</u> | ✓ \$ 250.00 100% of fair market value, up to | Mo. Rev. Stat. § 513.430 1.(1) |
| Line from Schedule A/B: 6 | | any applicable statutory limit | |
| Brief 2 iphones description: | \$2,000.00 | ✓ \$ 1,000.00 ☐ 100% of fair market value, up to any applicable statutory limit | Mo. Rev. Stat. § 513.430 1.(1) |
| Schedule A/B: 7 Collectibles of value - 20,000+ Magic the Gathering | | | Mo. Rev. Stat. § 513.430 1.(1) |
| Brief Cards description: | \$ <u>500.00</u> | ✓ \$ 250.00 ☐ 100% of fair market value, up to | |
| Line from Schedule A/B: 8 | | any applicable statutory limit | |
| Sports and hobby equipment - Bicycle description: | \$ <u>500.00</u> | ¥ <u>250.00</u> | Mo. Rev. Stat. § 513.430 1.(1) |
| Line from | | 100% of fair market value, up to any applicable statutory limit | |
| Schedule A/B: 9 Clothing - Miscellaneous clothing Brief description: | \$ <u>500.00</u> | ✓ \$ 250.00 | Mo. Rev. Stat. § 513.430 1.(1) |
| Line from | | 100% of fair market value, up to any applicable statutory limit | |
| Schedule A/B: 11 Jewelry - 2 Steinhart watches | 500.00 | | Mo. Rev. Stat. § 513.430 1.(2) |
| description: Line from | \$ <u>500.00</u> | <pre>\$ 250.00 100% of fair market value, up to any applicable statutory limit</pre> | |
| Schedule A/B: 12 Jewelry - Wedding Bands | | | Mo. Rev. Stat. § 513.430 1.(2) |
| Brief description: | \$ <u>3,000.00</u> | ✓ \$ 1,500.00 ☐ 100% of fair market value, up to | |
| Line from Schedule A/B: 12 | | any applicable statutory limit | |
| UFB Direct - Meredith Dean (Checking) Brief description: | \$ <u>10.00</u> | S 10.00 100% of fair market value, up to | Mo. Rev. Stat. § 513.430.1(3) |
| Line from Schedule A/B: 17.1 | | any applicable statutory limit | |
| Fidelity Brief description: | \$ <u>16,695.00</u> | \$ 16,695.00 | Mo. Rev. Stat. § 513.430 1.(10) (f) |
| Line from Schedule A/B: ²¹ | | 100% of fair market value, up to any applicable statutory limit | |
| PEERS Retirement Account Brief | _{\$} 3,322.02 | ✓ \$ 3,322.02 | Mo. Rev. Stat. § 169.090 |
| description: Line from <i>Schedule A/B:</i> ²¹ | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | \$ <u>28,749.77</u> | 28,749.77 100% of fair market value, up to any applicable statutory limit | Mo. Rev. Stat. § 513.430 1.(10) (f) |
| Line from Schedule A/B: 21 Dearborn National Life Term Life - Daughter 2 - through | | | Mo. Rev. Stat. § 513.430 1.(7) |
| Brief Orchard Farm School District description: | \$ <u>0.00</u> | ✓ \$ 0.00 ☐ 100% of fair market value, up to | |
| Line from Schedule A/B: 31 | | any applicable statutory limit | |

Debtor

 Case 19-46230 Miller Dean
 Doc 1 Filed 10/03/19 Prize
 Entered 10/03/19 17:32:42 Main Document

 First Name
 Middle Name
 Last Name

Additional Page Part 2:

| _ | | | | |
|---------------|------------------------------------------------------------------------------------------------------------|--------------------------------------|---------------------------------------------------------------------------|------------------------------------|
| | Brief description of the property and line on <i>Schedule A/B</i> that lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief | | \$ 0.00 | ✔ \$ 0.00 | Mo. Rev. Stat. § 513.430 1.(7) |
| desc Line | ription: from | Ψ | ■ ♥ 100% of fair market value, up to any applicable statutory limit | |
| Sche Brief | edule A/B: 31 Dearborn National Life Term Life - Michael Dean - through Orchord Form School District | 0.00 | | Mo. Rev. Stat. § 513.430 1.(7) |
| | through Orchard Farm School District ription: | \$ <u>0.00</u> | ✓ \$ 0.00 100% of fair market value, up to | |
| Line Sche | edule A/B: 31 | | any applicable statutory limit | |
| Brief desc | Dearborn National Life Term Life - Meredith Dean - Through Orchard Farm School District ription: | \$ <u>0.00</u> | v \$ <u>0.00</u> | Mo. Rev. Stat. § 513.430 1.(7) |
| Line | | | 100% of fair market value, up to any applicable statutory limit |) |
| Sche Brief | edule A/B: 31 Brighthouse Financial - Term Life - Meredith Dean | | | Mo. Rev. Stat. § 513.430 1.(7) |
| desc | ription: | \$ <u>0.00</u> | ✓ \$ 0.00 ☐ 100% of fair market value, up to |) |
| Line Sche | from edule A/B: 31 Cash on hand (Cash On Hand) | | any applicable statutory limit | Mo. Rev. Stat. § 513.440 |
| Brief desc | ription: | \$ <u>0.00</u> | <u>د \$ 0.00</u> | - |
| Line Sche | from edule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| Brief desc | ription: | \$ | | |
| Line Sche | from edule A/B: | | 100% of fair market value, up to any applicable statutory limit |) |
| Brief desc | ription: | \$ | □ \$ | |
| | from edule A/B: | | 100% of fair market value, up to any applicable statutory limit |) |
| Brief desc | ription: | \$ | \$ \$ |) |
| Line Sche | from edule A/B: | | any applicable statutory limit | |
| Brief desc | ription: | \$ | ☐ \$ ☐ 100% of fair market value, up to | |
| Line Sche | from edule A/B: | | any applicable statutory limit | |
| Brief desc | ription: | \$ | □\$ | |
| Line Sche | from edule A/B: | | 100% of fair market value, up to any applicable statutory limit | |
| Brief desc | ription: | \$ | \$ | |
| Line Sche | from edule A/B: | | any applicable statutory limit | |
| Brief desc | ription: | \$ | \$ 100% of fair market value, up to | |
| Line Sche | from edule A/B: | | any applicable statutory limit | |

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| Fill in this information to identify your case: | | | | | | | |
|----------------------------------------------------------------------|----------------------------|-------------|-----------|--|--|--|--|
| Debtor 1 | Michael Christopher Dean | | | | | | |
| - | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | Meredith Leigh Miller Dean | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States Bankruptcy Court for the: Eastern District of Missouri | | | | | | | |
| Case number (If known) | | | | | | | |

Check if this is an amended filing

Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property 12/15

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

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

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

Part 1: List All Secured Claims

| for each claim. If more than one creditor | more than one secured claim, list the creditor separately has a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name. | Column A Amount of claim Do not deduct the value of collateral. | <i>Column B</i> Value of collateral that supports this claim | Column C Unsecured portion If any |
|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-----------------------------------------------------------------------|--------------------------------------------|
| 2.1 | Describe the property that secures the claim: | \$ | _ \$ | \$ |
| Creditor's Name | - | | | |
| Number Street | - | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| | | | | |
| City State ZIP Code | | | | |
| Who owes the debt? Check one. | Disputed | | | |
| Debtor 1 only | Nature of lien. Check all that apply. | | | |
| Debtor 2 only | An agreement you made (such as mortgage or secured | | | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | car loan) | | | |
| | Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | | | |
| Check if this claim relates to a | Other (including a right to offset) | | | |
| community debt Date debt was incurred | Last 4 digits of account number | - | | |
| 2.2 | Describe the property that secures the claim: | \$ | \$ | \$ |
| | | · | _ • | T |
| Creditor's Name | - | | | |
| Number Street | - | | | |
| | | | | |
| | As of the date you file, the claim is: Check all that apply. | | | |
| | _ 🖵 Contingent | | | |
| City State ZIP Code | Unliquidated | | | |
| Who owes the debt? Check one. | Disputed | | | |
| Debtor 1 only | Nature of lien. Check all that apply. | | | |
| Debtor 2 only Debtor 1 and Debtor 2 only | An agreement you made (such as mortgage or secured | | | |
| At least one of the debtors and another | car loan) Statutory lien (such as tax lien, mechanic's lien) | | | |
| | Judgment lien from a lawsuit | | | |
| Check if this claim relates to a community debt | Other (including a right to offset) | | | |
| Date debt was incurred | | - | | |
| | Last 4 digits of account number | | | |

| Debto | | Michael Christopher Dean | Filed 10/ | /03/19 Entered Pg 28 of 221 | d 10/03/19 17:32:42 Main Document Case number (if known) |
|----------|------------------|-----------------------------------------|------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Pa | art 2: | List Others to Be Notified f | or a Debt Th | nat You Already Lis | ted |
| ag yo | ency i u have | s trying to collect from you for a debt | t you owe to so e debts that yo | omeone else, list the cre ou listed in Part 1, list th | bt that you already listed in Part 1. For example, if a collection aditor in Part 1, and then list the collection agency here. Similarly, if he additional creditors here. If you do not have additional persons to |
| | | | | | On which line in Part 1 did you enter the creditor? |
| | Name | 9 | | | Last 4 digits of account number |
| | Stree | t | | | |
| | City | | State | ZIP Code | |
| | | | | | On which line in Part 1 did you enter the creditor? |
| | Name | 2 | | | Last 4 digits of account number |
| | Street | t | | | |
| | City | | State | ZIP Code | |
| | | | | | On which line in Part 1 did you enter the creditor? |
| | Name | 9 | | | Last 4 digits of account number |
| | | | | | |
| | Street | t | | | |
| | | | | | |
| | City | | State | ZIP Code | On which line in Part 4 did you arter the anality? |
| | | | | | On which line in Part 1 did you enter the creditor? Last 4 digits of account number |
| | Name | 9 | | | |
| | Street | t | | | |
| | | | | | |
| | City | | State | ZIP Code | |
| | | | | | On which line in Part 1 did you enter the creditor? |
| | Name | 9 | | | Last 4 digits of account number |
| | Street | t | | | |
| | | | ····· | | |
| | City | | State | ZIP Code | |
| | | | | | On which line in Part 1 did you enter the creditor? |
| | Name | 2 | | | Last 4 digits of account number |
| | Street | t | | | |
| | | | | | |
| | City | | State | ZIP Code | |

| <u>Case 19-46230 Doc 1 Filed 10/03/19 Entered 1</u> 0/03/19 17:32:42 Main Doci |
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|--------------------------------------------------------------------------------|

| Fill in this in | | | | | | | | |
|----------------------------------------------------------------------|----------------------------|-------------|-----------|--|--|--|--|--|
| Debtor 1 | Michael Christopher Dean | | | | | | | |
| | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | Meredith Leigh Miller Dean | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the: Eastern District of Missouri | | | | | | | | |
| Case number (If known) | | | | | | | | |

Check if this is an amended filing

Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

| Pa | rt 1: List All of Your PRIORITY Unsecure | ed Claims | | | | | |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------|-----------------------|--|--|
| | Do any creditors have priority unsecured claims Do. Go to Part 2. Yes. | s against you? | | | | | |
| 2. | List all of your priority unsecured claims. If a cre each claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the c unsecured claims, fill out the Continuation Page of I | editor has more than one priority unsecured claim, list th a claim has both priority and nonpriority amounts, list th laims in alphabetical order according to the creditor's na Part 1. If more than one creditor holds a particular claim | at claim here a ame. If you hav | nd show both pr e more than two | iority and priority | | |
| | (For an explanation of each type of claim, see the in | nstructions for this form in the instruction booklet.) | | . | N | | |
| | Indiana Department of Revenue | | Total claim | Priority amount | Nonpriority amount | | |
| 2.1 | Priority Creditor's Name | Last 4 digits of account number 1940 | <u></u> 2,149.38 | \$_1,600.00 | _{\$} 549.38 | | |
| | PO Box 7206 Number Street | When was the debt incurred? | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply | , | | | | |
| | Indianapolis IN 46207 | Contingent | | | | | |
| | City State ZIP Code | | | | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | Debtor 1 only | Type of PRIORITY unsecured claim: | | | | | |
| | Debtor 2 only | Domestic support obligations | | | | | |
| | Debtor 1 and Debtor 2 only | Taxes and certain other debts you owe the government | | | | | |
| | At least one of the debtors and another | Claims for death or personal injury while you were | | | | | |
| | Check if this claim is for a community debt | intoxicated | | | | | |
| | Is the claim subject to offset? | U Other. Specify | | | | | |
| | | | | | | | |
| | LJ Yes Internal Revenue Service | | | | | | |
| 2.2 | | Last 4 digits of account number | <u>\$</u> 0.00 | \$ <u>0.00</u> | \$0.00 | | |
| | Priority Creditor's Name | When was the debt incurred? | | | | | |
| | Centralized Insolvency Operation | | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | |
| | PO Box 7346 Philadelphia PA 19101 | Contingent | | | | | |
| | City State ZIP Code | | | | | | |
| | | Disputed | | | | | |
| | Who incurred the debt? Check one. | Type of PRIORITY unsecured claim: | | | | | |
| | ✓ Debtor 2 only | Domestic support obligations | | | | | |
| | Debtor 1 and Debtor 2 only | Taxes and certain other debts you owe the government | | | | | |
| | At least one of the debtors and another | Claims for death or personal injury while you were | | | | | |
| | Check if this claim is for a community debt | intoxicated | | | | | |
| | Is the claim subject to offset? | Other. Specify | | | | | |
| | V No | | | | | | |
| | Yes | | | | | | |

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|-------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------|-----------------------|
| Part | | Pg 30 of 221 | | | |
| | | beginning with 2.3, followed by 2.4, and so forth. | Total claim | Driority | Nonnriority |
| Arte | r listing any entries on this page, number them | beginning with 2.3, followed by 2.4, and so forth. | Total claim | Priority amount | Nonpriority amount |
| 2.3 | Internal Revenue Service | Last 4 digits of account number 7425 | <u>\$0.00</u> | <u>\$0.00</u> | <u>\$</u> 0.00 |
| | Priority Creditor's Name Centralized Insolvency Operation Number Street PO Box 7346 Philadelphia PA 19101 City State ZIP Code Who incurred the debt? Check one. Image: Check one. Image: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Image: Check if this claim is for a community debt Is the claim subject to offset? Image: No No | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify | | | |
| 2.4 | Yes Missouri Department of Revenue | | 0.00 | 0.00 | 0.00 |
| | · | Last 4 digits of account number 5808 | <u>\$0.00</u> | <u>\$0.00</u> | <u>\$</u> 0.00 |
| | Priority Creditor's Name PO Box 500 Number Street Jefferson City MO 65106 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | When was the debt incurred? | | | |
| 2.5 | Missouri Department of Revenue | Last 4 digits of account number 7425 | <u>\$</u> 0.00 | <u></u> \$_0.00 | <u>\$ 0.00</u> |
| | Priority Creditor's Name PO Box 500 Number Street Jefferson City MO 65106 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify | | | |

| Debt | or 1 | Case 1 2462290 Pr DEBOC 1 | Filed 1 | | Entered 10/03/19 1-7:32:42 Main Do | ocument |
|----------|-------------|-----------------------------------------------------------------------|---------------------------------|----------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| | | First Name Middle Name L | ast Name | Pg 3 | 1 of 221 | |
| Par | 't 2: | List All of Your NONPRIORITY | (Unsecure | ed Claims | | |
| 3. I | Do ar | ny creditors have nonpriority unsecu | ured claims | against you? | ? | |
| | ー N ビ Y | lo. You have nothing to report in this pa | art. Submit th | is form to the | court with your other schedules. | |
| 1 | ¥ Y | es | | | | |
| i | nonpr | riority unsecured claim, list the creditor | separately for holds a parti | or each claim. | rder of the creditor who holds each claim. If a creditor For each claim listed, identify what type of claim it is. Do st the other creditors in Part 3.If you have more than three | not list claims already |
| | Aa | shiv Shah | | | | Total claim |
| 4.1 | | | | | Last 4 digits of account number | _{\$} 5,520.00 |
| | Nonp | priority Creditor's Name | | | When was the debt incurred? | \$ <u>3,520.00</u> |
| | | 0 Linden Ave | | | | |
| | Num Apt | iber Street t 122 | | | | |
| | <u> </u> | | | | As of the date you file, the claim is: Check all that apply. | |
| | Sui City | nnyvale CA | | 6-8811 | Contingent | |
| | | o incurred the debt? Check one. | e zipc | ode | | |
| | | Debtor 1 only | | | | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | | | | that you did not report as priority claims | |
| | | Check if this claim is for a community of | debt | | Debts to pension or profit-sharing plans, and other similar de Other. Specify The Plastic Merchant | edts |
| | ~ 1 | ne claim subject to offset? No Yes | | | | |
| 4.2 | | hishek Kochhar | | | Last 4 digits of account number | _{\$} 717.00 |
| | | | | | When was the debt incurred? | * |
| | | priority Creditor's Name) Pine Hollow Rd | | | | |
| | Numt | | | | As of the date you file, the claim is: Check all that apply. | |
| | Apt | t 13-1A | | | _ | |
| | | st Norwich NY | - | | Contingent Unliquidated | |
| | City Who | o incurred the debt? Check one. | e ZIP C | ode | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 1 |
| | | Check if this claim is for a community | debt | | Debts to pension or profit-sharing plans, and other similar de | ebts |
| | ls th | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | • | | | | | |
| <u> </u> | Ade | Yes ebavo Oshin | | | | |
| 4.3 | | | | | Last 4 digits of account number | _{\$} 100.05 |
| | Nonp | priority Creditor's Name | | | When was the debt incurred? | * |
| | | 04 Stearns Hill Rd | | | | |
| | Num | ber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Wa | altham MA | 02451 | 1-7113 | | |
| | City Who | o incurred the debt? Check one. | e ZIP C | ode | | |
| | | Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a community of | debt | | Debts to pension or profit-sharing plans, and other similar de | ebts |
| | | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| 1 | ~ I | No Yes | | | | |

| Debt | tor 1 Calichan Christopher D | EBOC 1 Fi | led 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | iment |
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| | | | 9 | 32 of 221 | |
| Par | rt 2: List All of Your NON | PRIORITY Ur | isecured Claims | | |
| | Do any creditors have nonprior No. You have nothing to repo Yes | - | | J? e court with your other schedules. | |
| i | nonpriority unsecured claim, list th | he creditor sepa ne creditor hold | arately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.4 | Aditya Pandurangi | | | | Total claim |
| 4.4 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 186.05 |
| | 950 Franklin St Number Street | | | When was the debt incurred? | * |
| | Apt 54 | | | | |
| | San Francisco | CA | 94109-7773 | As of the date you file, the claim is: Check all that apply. | |
| | , | | ZIP Code | | |
| | Who incurred the debt? Check of Debtor 1 only | ne. | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and a | inother | | that you did not report as priority claims | |
| | Check if this claim is for a c | ommunity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? ✓ No ☐ Yes | | | Other. Specify The Plastic Merchant | |
| 4.5 | Agrim Jindal | | | Last 4 digits of account number | \$ <u>4,173.50</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 4335 Tarlton Way | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Sugarland | ТХ | 77478-5287 | Contingent | |
| | City Who incurred the debt? Check o | State | ZIP Code | | |
| | Debtor 1 only | ne. | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and a | nother | | that you did not report as priority claims | |
| | Check if this claim is for a co | ommunity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| 4.6 | Alaina Barham | | | Last 4 digits of account number | _{\$} 120.00 |
| | Nonpriority Creditor's Name 2825 Downing Circle | | | When was the debt incurred? | · |
| | Number Street | | | | |
| | | ••• | 05040 4045 | As of the date you file, the claim is: Check all that apply. | |
| | Birmingham City | AL | 35242-4619 ZIP Code | | |
| | Who incurred the debt? Check o | | 5585 | Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and a | nother | | Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a c | ommunity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts The Deptite March and | |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |

| Debt | or 1 | Eirst Name Middle Name | 1 Fil | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | iment |
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| Pai | rt 2: | List All of Your NONPRIOR | RITY Un | secured Claims | | |
| | | ny creditors have nonpriority un No. You have nothing to report in thi Yes | | | | |
| | nonp inclu | priority unsecured claim, list the cred | ditor sepa ditor holds | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.7 | ۵۱۵ | an Chu | | | | Total claim |
| 4.7 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 909.50 |
| | | 8 Franklin St | | | When was the debt incurred? | • |
| | | ot 1211 | | | | |
| | | akland | CA | 94607-4226 | As of the date you file, the claim is: Check all that apply. | |
| | City | | State | ZIP Code | | |
| | | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | a thu a la la f | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commu | nity debt | | Other. Specify The Plastic Merchant | |
| | | the claim subject to offset? | | | | |
| | | No Yes | | | | |
| 4.8 | | an Lee | | | | _{\$} 537.05 |
| 4.0 | | | | | Last 4 digits of account number When was the debt incurred? | \$ <u>007.00</u> |
| | | npriority Creditor's Name | | | | |
| | | 95 Stevenson Blvd | | | | |
| | | nit 342 | | | As of the date you file, the claim is: Check all that apply. | |
| | Fre | eemont | CA | 94538-2376 | | |
| | City | | State | ZIP Code | | |
| | | no incurred the debt? Check one. | | | Disputed | |
| | _ | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | | - 14 | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commun | nity debt | | ✓ Other. Specify The Plastic Merchant | |
| | | the claim subject to offset? | | | | |
| | | No Yes | | | | |
| 4.9 | | an Myrold | | | Last 4 digits of account number | |
| | | - | | | C C | <u>\$1,325.00</u> |
| | | npriority Creditor's Name | | | When was the debt incurred? | |
| | | 350 NW Locust St mber Street | | | | |
| | Null | iber Greet | | | As of the date you file, the claim is: Check all that apply. | |
| | Сс | orvallis | OR | 97330-1367 | Contingent | |
| | City | he incurred the debt? Check and | State | ZIP Code | | |
| | | no incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Dbligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | ~ | | | | | |
| | | Yes | | | | |

| Debte | or 1 C | First Name Middle Name | 1 Fi | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
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| Par | t 2: L | List All of Your NONPRIO | RITY Un | secured Claims | | |
| [[| - | creditors have nonpriority un You have nothing to report in th | | | u? ne court with your other schedules. | |
| r | nonpriori ncluded | ity unsecured claim, list the cre | ditor sepa ditor holds | rately for each clair | order of the creditor who holds each claim. If a creditor has m. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4 1 0 | Alan P | Penner | | | | Total claim |
| 4.10 | | ty Creditor's Name | | | Last 4 digits of account number | _{\$} 1,680.10 |
| | 8 Bake | • | | | When was the debt incurred? | * |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Goleta | l | CA | 93117-1359 | | |
| | City | | State | ZIP Code | Contingent | |
| | _ | curred the debt? Check one. | | | | |
| | | otor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | otor 2 only otor 1 and Debtor 2 only | | | Student loans | |
| | _ | east one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | eck if this claim is for a commu | nity debt | | ✓ Other. Specify The Plastic Merchant | |
| | Is the c No Yes | claim subject to offset? | | | | |
| 4.11 | Alexar | nder Han | | | Last 4 digits of account number | <u>\$480.00</u> |
| | Nonpriori | ity Creditor's Name | | | When was the debt incurred? | |
| | | oncord Way | | | | |
| | Number | Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Prospe | ect Heights | IL | 60070-3417 | | |
| | City | | State | ZIP Code | | |
| | | ter 4 only | | | Disputed | |
| | _ | tor 1 only tor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | tor 1 and Debtor 2 only | | | Student loans | |
| | At le | east one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | eck if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | | inty debt | | Other. Specify The Plastic Merchant | |
| | Is the c | claim subject to offset? | | | | |
| | Yes | | | | | |
| 4.12 | Alex E | Barbalat | | | Last 4 digits of account number | _{\$} 7,067.00 |
| | Nonpriori | ity Creditor's Name | | | When was the debt incurred? | |
| | | rrowhead Way | | | | |
| | Number | Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Haywa | ard | CA | 94544-6649 | | |
| | City | | State | ZIP Code | _ Contingent Unliquidated | |
| | | curred the debt? Check one. | | | | |
| | | otor 1 only otor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | otor 2 only otor 1 and Debtor 2 only | | | Student loans | |
| | | east one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | 🗆 Che | eck if this claim is for a commu | nity debt | | that you did not report as priority claims | |
| | | claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | V No | | | | | |
| | Yes | | | | | |

| Debt | or 1 | First Name Middle Name | 1 Fil | ed 10/03/19 | Entered 10/03/19 17;32;42 Main Docu | ument |
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| | | | | 0 | 35 of 221 | |
| Par | t 2: | List All of Your NONPRIOR | RITY Uns | secured Claims | | |
| [| | ny creditors have nonpriority una lo. You have nothing to report in thi res | | | | |
| ri | nonpr ncluc | riority unsecured claim, list the cred | litor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.10 | Alo | ex Luu | | | | Total claim |
| 4.13 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 620.25 |
| | | 67 9th Ave | | | When was the debt incurred? | * |
| | Apt | | | | | |
| | | n Francisco | CA | 94122-2329 | As of the date you file, the claim is: Check all that apply. | |
| | City | | State | ZIP Code | | |
| | | o incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | | iity debt | | Other. Specify The Plastic Merchant | |
| | IS tr | he claim subject to offset? No | | | | |
| | | Yes | | | | 745 55 |
| 4.14 | Ale | ex Paulenoff | | | Last 4 digits of account number | <u>\$745.55</u> |
| | Nonp | priority Creditor's Name | | | When was the debt incurred? | |
| | | 0 4th Ave | | | | |
| | Num Apt | nber Street t 7C | | | As of the date you file, the claim is: Check all that apply. | |
| | Bro | ooklyn | NY | 11217-2789 | | |
| | City | ····· | State | ZIP Code | Unliquidated | |
| | _ | o incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | \square | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nitv debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | , | | Cother. Specify The Plastic Merchant | |
| | | - | | | | |
| | | Yes | | | | |
| 4.15 | Ale | ex Sun | | | Last 4 digits of account number | _{\$} 685.05 |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | | Orangewood Ct | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Re | edlands | CA | 92373-1443 | | |
| | City | | State | ZIP Code | | |
| | _ | to incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | ~ | | | | | |
| | <u> </u> | Yes | | | | |

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| Par | rt 2: List All of Your NONPRIORITY | Unsecured Claims | | |
| [| Do any creditors have nonpriority unsecu No. You have nothing to report in this pa Yes | | | |
| i i | nonpriority unsecured claim, list the creditor | separately for each clair holds a particular claim, | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.16 | Alex Yarmulnik | | | Total claim |
| 4.10 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 40.00 |
| | 160 Morgan St Number Street | | When was the debt incurred? | |
| | Apt 1212 | | | |
| | Jersey City NJ City State | 07302-6243 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | □ Check if this claim is for a community of | debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | ✓ No Yes | | | |
| 4.17 | | | Last 4 digits of account number | \$1,698.00 |
| | | | - When was the debt incurred? | * |
| | Nonpriority Creditor's Name 3312 Wilmette Ave | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Wilmette | 60091-2961 | | |
| | City State | | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community o | leht | Debts to pension or profit-sharing plans, and other similar debts | |
| | - | 1601 | Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| — | Yes | | | |
| 4.18 | Allegiant Path, LLC | | Last 4 digits of account number 4505 | _{\$} 135.11 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | φ |
| | 5700 Southwyck Blvd | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Toledo OH | 43614 | | |
| | City State | | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | \Box Check if this claim is for a community of | debt | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Medical Sparicop | |
| | Is the claim subject to offset? | | Other. Specify Medical Services | |
| | Yes | | | |

| Debt | or 1 | First Name Middle Name | C 1 Fil | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
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| Par | 't 2: | List All of Your NONPRIC | DRITY Un | secured Claims | | |
| [| | nny creditors have nonpriority u No. You have nothing to report in t Yes | | | | |
| ri | nonp | priority unsecured claim, list the cro | editor sepa editor holds | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.19 | Alli | lison Adams | | | | Total claim |
| 4.19 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 170.00 |
| | | 56 Solera Dr | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | City | o incurred the debt? Check one. | OH State | 43229-2743 ZIP Code | Contingent Unliquidated | |
| | | Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only | | | Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | | At least one of the debtors and anothe Check if this claim is for a comm | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | t he claim subject to offset? No Yes | | | Uner. Speciny The Flacke metoriality | |
| 4.20 | Alv | wina Moricle | | | Last 4 digits of account number | <u>\$2,559.50</u> |
| | | npriority Creditor's Name | | | When was the debt incurred? | |
| | | 179 Suffolk Downs nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Sto | ow | ОН | 44224-5811 | Contingent | |
| | City Wh | no incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and anothe | r | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a community of the claim subject to offset? | unity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | No Yes | | | | |
| 4.21 | An | merican Express | | | Last 4 digits of account number 1001 | \$ <u>6,012.10</u> |
| | PC | npriority Creditor's Name O Box 981535 mber Street | | | When was the debt incurred? | |
| | Null | liber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | Paso | ТХ | 79998 | Contingent | |
| | _ | / no incurred the debt? Check one. Debtor 1 only | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and anothe | er | | Dbligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a comm | unity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ~ | t <mark>he claim subject to offset?</mark> No Yes | | | Other. Specify Credit Card Debt | |

| Debt | or 1 Caskehae Cher De De De De C 1 Filed | 10/03/19 | | ument |
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| Pai | t 2: List All of Your NONPRIORITY Unsecu | ured Claims | | |
| | Do any creditors have nonpriority unsecured claim ☐ No. You have nothing to report in this part. Submit ☑ Yes | • • | | |
| l | nonpriority unsecured claim, list the creditor separately | / for each claim. | rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do no st the other creditors in Part 3.If you have more than three n | ot list claims already |
| | | | | Total claim |
| 4.22 | | | Last 4 digits of account number 2008 | s 65.00 |
| | Nonpriority Creditor's Name PO Box 981535 Number Street | | When was the debt incurred? | <u>\$.00.00</u> |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | El Paso TX 799 City State ZIF Who incurred the debt? Check one. | 998 ⁹ Code | Contingent Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt Other. Specify Credit Card Debt | S |
| | ✓ No Yes | | | |
| 4.23 | American Express | | Last 4 digits of account number 1004 | <u>\$8,640.24</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | PO Box 981535 Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | El Paso TX 799 City State ZIF Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | 998 P Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt Is the claim subject to offset? No Yes | | Debts to pension or profit-sharing plans, and other similar debt | s |
| 4.24 | American Express | | Last 4 digits of account number 1008 | _{\$} 15,424.20 |
| | Nonpriority Creditor's Name PO Box 981535 | | When was the debt incurred? | <u> </u> |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | El Paso TX 799 | | | |
| | City State Zil Who incurred the debt? Check one. Debtor 1 only | P Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Student loansObligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community debt | | that you did not report as priority claims | S |
| | Is the claim subject to offset? | | ☑ Other. Specify Credit Card Debt | |

| Debt | or 1 | Cadichae Chrstopper Dez First Name Middle Name | DC 1 F | iled 10/03/19 | Entered 10/0 <u>3/19 17 ເສລີ,42 Main Doc</u> u 39 of 221 | ument |
|--------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | rt 2: | List All of Your NONPF | RIORITY U | • | | |
| | | | - | • • | ? e court with your other schedules. | |
| i i | nonpi incluc | riority unsecured claim, list the | creditor sep | parately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| | _ | | | | | Total claim |
| 4.25 | | nerican Express | | | Last 4 digits of account number 1006 | s 55,252.32 |
| | |) Box 981535 | | | When was the debt incurred? | · |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | City Whe | Paso o incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and | | 79998 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Is ti | Yes | nmunity debt | t | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Debt | |
| 4.26 | | ny Tessin | | | Last 4 digits of account number When was the debt incurred? | <u>\$360.00</u> |
| | | priority Creditor's Name 97 San Simon St | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | City Wh | stin o incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and | | 92782-8023 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ls tł ✓ | Check if this claim is for a con he claim subject to offset? No Yes | nmunity debt | t | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.27 | An | drew Churchill | | | Last 4 digits of account number | _{\$} 170.00 |
| | | priority Creditor's Name 608 Zullo Dr nber Street | | | When was the debt incurred? | ф <u>ттенее</u> |
| | Po | olesville | MD | 20837-2145 | As of the date you file, the claim is: Check all that apply. | |
| | City Wh | to incurred the debt? Check one Debtor 1 only Debtor 2 only | State | ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | |
| | □ □ Is tl ✓ | Debtor 1 and Debtor 2 only At least one of the debtors and and Check if this claim is for a con he claim subject to offset? No Yes | | t | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

| Debt | or 1 | First Name Middle Name | 1 Fil | ed 10/03/19 | Entered 10/03/19 17 (in 32 42 Main Docu | ument |
|------|---------------|----------------------------------------------------------------------------------|----------------------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | | | | 0 | 0 of 221 | |
| Par | 't 2: | List All of Your NONPRIOR | RITY Uns | secured Claims | | |
| [| _ | Iny creditors have nonpriority un No. You have nothing to report in th Yes | | • • | | |
| ri | nonp Inclu | priority unsecured claim, list the crea | ditor sepai ditor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.28 | ۸n | ndrew Deblase | | | | Total claim |
| 4.20 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 1,151.50 |
| | | 3 Ebersole Rd | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Re City | eading | PA State | 19605-3290 ZIP Code | Contingent | |
| | | io incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | nitv debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | the claim subject to offset? | | | Cother. Specify The Plastic Merchant | |
| | ~ | No Yes | | | | |
| 4.29 | An | ndrew Hartnett | | | Last 4 digits of account number | <u>\$</u> 85.00 |
| | Non | npriority Creditor's Name | | | When was the debt incurred? | |
| | | 40 Lindell Blvd | | | | |
| | | nber Street ot 702 | | | As of the date you file, the claim is: Check all that apply. | |
| | | aint Louis | MO | 63108-2436 | Contingent | |
| | City | / | State | ZIP Code | | |
| | _ | no incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | | | Cother. Specify The Plastic Merchant | |
| | ~ | No Yes | | | | |
| 4.30 | Ar | ndrew Schroeder | | | Last 4 digits of account number | \$ <u>340.00</u> |
| | 81 | npriority Creditor's Name I8 N Logan St | | | When was the debt incurred? | |
| | | nber Street ot 301 | | | As of the date you file, the claim is: Check all that apply. | |
| | De | enver | СО | 80203-3121 | | |
| | City Wh | / ho incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ~ | the claim subject to offset? No | | | Other. Specify The Plastic Merchant | |
| | | Yes | | | | |

| Debt | or 1 Case 1 Group Carl Carl Carl Carl Carl Carl Carl Carl | | _Entered 10/0 <u>3/19 17;32 42 Main Docu</u> 11 of 221 | iment |
|--------|---------------------------------------------------------------------------------------------------------|----------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | t 2: List All of Your NONPRIORITY Uns | 0 | +1 01 221 | |
| | | | | |
| [| Do any creditors have nonpriority unsecured c No. You have nothing to report in this part. Su Yes | • • | | |
| r i | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.31 | Andrey Nauman | | | Total claim |
| 4.51 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 960.05 |
| | 280 Marin Blvd | | When was the debt incurred? | |
| | Number Street Apt 21M | | | |
| | Jersey City NJ | 07302-4607 | As of the date you file, the claim is: Check all that apply. | |
| | Original Original City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | □ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Conter. Specify The Plastic Merchant | |
| | V No | | | |
| 4.00 | L Yes Anna Zaks | | | 260.00 |
| 4.32 | | | Last 4 digits of account number When was the debt incurred? | <u>\$360.00</u> |
| | Nonpriority Creditor's Name 5047 Everton Ave | | | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Solon OH | 44139-1282 | Contingent Unliquidated | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | ✓ No | | | |
| | Yes | | | |
| 4.33 | Anthony Forlizzi | | Last 4 digits of account number | _{\$} 250.52 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 2 Eisenhower Rd Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Peabody MA | 01960-2204 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated | |
| | Debtor 1 only | | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ☑ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify The Plastic Merchant | |
| | V No | | | |
| | Yes | | | |

| Debt | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | Entered 10/03/19 17;32;42 Main Docu | iment |
|----------|---------------|------------------------------------------------------------------------------------|---------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| | | | | J | 42 of 221 | |
| Par | rt 2: | List All of Your NONPRIOF | ITY Uns | secured Claims | | |
| [| _ | any creditors have nonpriority uns No. You have nothing to report in thi Yes | | | | |
| i | nonp inclu | priority unsecured claim, list the crea | litor separ itor holds | ately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.34 | Δn | nthony Hunter | | | | Total claim |
| 4.34 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 257.50 |
| | 52 | 118 Ellis Godfrey Dr nber Street | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | lirfield | CA | 94533-1428 | Contingent | |
| | City | | State | ZIP Code | | |
| | | no incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nitv debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | the claim subject to offset? | , | | Other Specify The Plastic Merchant | |
| | ~ | No Yes | | | | |
| 4.35 | An | nthony Smith | | | Last 4 digits of account number | <u>\$7,780.50</u> |
| | Nor | npriority Creditor's Name | | | When was the debt incurred? | |
| | | 55 S Mason Rd | | | | |
| | | mber Street 409 | | | As of the date you file, the claim is: Check all that apply. | |
| | Ka | atv | ТХ | 77450-2437 | Contingent | |
| | City | / | State | ZIP Code | Unliquidated | |
| | | no incurred the debt? Check one. Debtor 1 only | | | | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commun | ity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls t | the claim subject to offset? | | | Cother. Specify The Plastic Merchant | |
| | | No | | | | |
| <u> </u> | | Yes | | | | |
| 4.36 | Ar | nwar Torres | | | Last 4 digits of account number | _{\$} 244.50 |
| | | npriority Creditor's Name S Cedar St | | | When was the debt incurred? | |
| | Nur | mber Street | | | | |
| | | nit 406 | WA | 98121-4104 | As of the date you file, the claim is: Check all that apply. | |
| | City | eattle | State | ZIP Code | | |
| | Wł | ho incurred the debt? Check one. | | | Unliquidated Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commur | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | the claim subject to offset? No | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | | Yes | | | | |

| Debt | | File Last Name | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
|--------|--------------------------------------------------------------------------------------------|-----------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | | | Ŭ | 43 of 221 | |
| Par | t 2: List All of Your NONPRIORIT | Y Uns | ecured Claims | | |
| I | Do any creditors have nonpriority unsec No. You have nothing to report in this p Yes | | | | |
| i i | nonpriority unsecured claim, list the creditor | r separa r holds a | ately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.37 | Arnold Lin | | | | Total claim |
| 4.37 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 5,660.00 |
| | 331 Louie Ave | | | When was the debt incurred? | |
| | Number Street | | | | |
| | | ٨ | 95240-1122 | As of the date you file, the claim is: Check all that apply. | |
| | Lodi CA City Sta | | 21P Code | Contingent | |
| | Who incurred the debt? Check one. | | | Unliquidated Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | L Check if this claim is for a community | debt | | Cother. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| 4.38 | Asad Jawed | | | Last 4 digits of account number | <u>\$1,990.61</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 14338 General Ct | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Plainfield IL | | 60544-2429 | Contingent | |
| | City Sta | | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a community | debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| | ✓ No | | | | |
| 4.39 | Ves | | | | |
| | Balachandra Divvela | | | Last 4 digits of account number When was the debt incurred? | \$ <u>369.00</u> |
| | Nonpriority Creditor's Name 5830 Stansbury Smt | | | | |
| | Number Street | | | | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Alpharetta G/ City Sta | A ate | 30005-4319 ZIP Code | | |
| | Who incurred the debt? Check one. | | | Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | | |
| | At least one of the debtors and another | | | Dbligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community | debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Debis to perison of profestioning plans, and other similar debis Other. Specify | |
| | ✓ No | | | | |
| | Yes | | | | |

| Debt | or 1 | Cadichae Chosopher Debo | C 1 File | | _Entered 10/0 <u>3/19 17 ສີ2.</u> 4 of 221 | iment |
|------|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | 't 2: | List All of Your NONPRIC | ORITY Uns | • | | |
| [| | ny creditors have nonpriority u lo. You have nothing to report in t es | | • • | | |
| ri | nonpr | riority unsecured claim, list the cr | editor separ editor holds | rately for each claim. | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | _ | | | | | Total claim |
| 4.40 | | nk of America priority Creditor's Name | | | Last 4 digits of account number 5178 | _{\$} 55.35 |
| | | Box 851001 | | | When was the debt incurred? | * |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | o incurred the debt? Check one. Debtor 1 only Debtor 2 only | TX State | 75285 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | □ / □ / Is th ☑ / | Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a comm he claim subject to offset? No Yes | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Debt | |
| 4.41 | Bar | rclays Bank Delaware | | | Last 4 digits of account number 2862 | <u>\$5,921.97</u> |
| | | priority Creditor's Name 0 Box 8801 | | | When was the debt incurred? | |
| | Num | | | | As of the date you file, the claim is Check all that apply | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | City | Imington | DE State | 19899 ZIP Code | Unliquidated | |
| | _ | o incurred the debt? Check one. Debtor 1 only | | | | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and anothe | er | | that you did not report as priority claims | |
| | | Check if this claim is for a comm | unity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Debt | |
| | ~ 1 | h e claim subject to offset? No Yes | | | | |
| 4.42 | Ва | rry Blumenthal | | | Last 4 digits of account number | _{\$} 225.00 |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | 105 Num | 5 Chickamaw Pl | | | | |
| | inuin | | | | As of the date you file, the claim is: Check all that apply. | |
| | | adeville | LA | 70471-1610 | Contingent | |
| | _ | o incurred the debt? Check one. | State | ZIP Code | □ Unliquidated □ Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and anothe | er | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a comm | unity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ls th ✔ | he claim subject to offset? | - | | Debis to perison of professioning pairs, and other similar debis Other. Specify The Plastic Merchant | |

| Debt | or 1 | First Name Middle Name | c 1 Fil Last Nam | | _Entered 10/0 <u>3/19 17 ເສລີ,42 Main Docu</u> 5 of 221 | ument |
|--------|--------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | 't 2: | List All of Your NONPRIC | ORITY Un | 9 | 5 01 221 | |
| [| _ | ny creditors have nonpriority u o. You have nothing to report in t es | | • • | ? court with your other schedules. | |
| i i | nonpr | iority unsecured claim, list the cr | editor sepa editor holds | rately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.40 | Por | n Nickel-S'Andrea | | | | Total claim |
| 4.43 | - | riority Creditor's Name | | | Last 4 digits of account number | _{\$} 240.00 |
| | | 58 35th Ave SW | | | When was the debt incurred? | |
| | Numb | ber Street | | | | |
| | | b incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a comm ne claim subject to offset? | | 98126-3045 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.44 | Ber | No Yes nson Sim priority Creditor's Name | | | Last 4 digits of account number When was the debt incurred? | \$ <u>1,360.00</u> |
| | | 5R odside o incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe | | 11377-5784 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ls th ✔ N | Check if this claim is for a comm ne claim subject to offset? No Yes | unity debt | | Other. Specify The Plastic Merchant | |
| 4.45 | Bet | thany Walsh | | | Last 4 digits of account number | \$80.00 |
| | | priority Creditor's Name 5 Sunrise Ave ber Street | | | When was the debt incurred?As of the date you file, the claim is: Check all that apply. | \$ <u>00.00</u> |
| | | limore o incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a comm | | 11710-4531 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | • | ne claim subject to offset? No Yes | | | Other. Specify The Plastic Merchant | |

| Debt | or 1 | Caster Debc | 1 File | ed 10/03/19 Pa 4 | _Entered 10/03/19 <u>17 ສາງ 42 Main Docu</u> 6 of 221 | iment |
|------|------------|-----------------------------------------------------------------------------------|----------------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | 't 2: | List All of Your NONPRIOF | RITY Uns | Ŭ | | |
| [| _ | ny creditors have nonpriority una lo. You have nothing to report in thi res | | • • | | |
| ri | nonpr | riority unsecured claim, list the cred | ditor separ ditor holds | ately for each claim. | rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.46 | | C Healthcare | | | Last 4 digits of account number 5311 | _{\$} 874.43 |
| | | oriority Creditor's Name) Box 958410 | | | When was the debt incurred? | <u>\$ 07 4.45</u> |
| | Numb | | | | | |
| | | | | | | |
| | Sai | int Louis | МО | 63195 | As of the date you file, the claim is: Check all that apply. | |
| | City | | State | ZIP Code | Contingent | |
| | Who | o incurred the debt? Check one. | | | Unliquidated Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | | - 14 | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commun | nity debt | | Other. Specify Medical Services | |
| | ~ I | he claim subject to offset? No Yes | | | | |
| 4.47 | | C Home Infusion | | | Last 4 digits of account number 6480 | _{\$} 94.99 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | |) Box 957364 | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | | | | | |
| | | int Louis | MO | 63195 | Contingent Unliquidated | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commur | aitu daht | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | | пту церт | | ☑ Other. Specify Medical Services | |
| | Is th | he claim subject to offset? | | | | |
| | | Yes | | | | |
| 4.48 | Bra | andon Fredman | | | Last 4 digits of account number | |
| | | priority Creditor's Name | | | When was the debt incurred? | \$ <u>92.00</u> |
| | | 28 Sandstone Dr | | | | |
| | Num | | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | int Louis | MO | 63146-5032 | | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims | |
| | | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | No Yes | | | | |
| 1 | | 100 | | | | |

| Debt | or 1 | First Name Middle Name | | Filed 10/03/19 | Entered 10/0 <u>3/1917;32;42 Main Docu</u> | ument |
|------|--------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | 't 2: | List All of Your NONF | RIORITY | Ŭ | | |
| [| _ | ny creditors have nonprior o. You have nothing to repor es | | • • | ? e court with your other schedules. | |
| ri | nonpr | iority unsecured claim, list th | ne creditor se le creditor ho | parately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.49 | Bra | ndr Beekman-Ellner | | | | Total claim |
| 4.43 | | riority Creditor's Name | | | Last 4 digits of account number | _{\$} 484.70 |
| | | 03 Stone Hill Pl | | | When was the debt incurred? | |
| | Numt | ber Street | | | | |
| | | Yes | nother | 22153-1717 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.50 | Bria | an Crow | | | Last 4 digits of account number | <u>\$100.05</u> |
| | | briority Creditor's Name B Prospect PI Apt 1R ber Street | | | When was the debt incurred?As of the date you file, the claim is: Check all that apply. | |
| | | o incurred the debt? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Check if this claim is for a co ne claim subject to offset? | nother | 11238-4168 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | No Yes | | | | |
| 4.51 | Bria | an Johnson priority Creditor's Name | | | Last 4 digits of account number When was the debt incurred? | \$ <u>174.00</u> |
| | 373 Num | 32 Pescadero Dr ber Street | | | | |
| | | | ~ ~ ~ | | As of the date you file, the claim is: Check all that apply. | |
| | | nta Barbara o incurred the debt? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a | | 93105-4478 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ls th ✔ r | Check if this claim is for a co ne claim subject to offset? No Yes | ommunity de | bt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

| Debt | or 1 Caster of the Middle Name Last Name | ed 10/03/19 | | ument |
|------|-------------------------------------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| | | • | 48 of 221 | |
| Pai | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| | Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su ☑ Yes | | | |
| i | nonpriority unsecured claim, list the creditor separ | ately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.52 | Brian Kutnick | | | Total claim |
| 4.52 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 380.00 |
| | 299 Princeton Dr Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Canton MI | 48188-1030 | | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | \Box Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | Ves | | | |
| 4.53 | Brian Lim | | Last 4 digits of account number | <u>\$</u> 277.05 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 213 Prospect Ave Bsmt | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Brooklyn NY | 11215-5315 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | ✓ No Yes | | | |
| 4.54 | Brian Wong | | Last 4 digits of account number | _{\$} 300.05 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | · |
| | 601 E. Micheltorena St | | | |
| | Number Street Unit 68 | | As of the date you file, the claim is: Check all that apply. | |
| | Santa Barbara CA | 93103-1986 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community debt | | that you did not report as priority claims | |
| | • | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | Yes | | | |

| Debte | or 1 | First Name Middle Name | 1 Fil | ed 10/03/19 | Entered 10/03/19 17;32;42 Main Docu | ument |
|-------|----------------|---------------------------------------------------------------------------------|----------------------------|---------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | | | | 5 | 49 of 221 | |
| Par | t 2: | List All of Your NONPRIOF | RITY Uns | secured Claims | | |
| [| _ | ny creditors have nonpriority una o. You have nothing to report in thi es | | | | |
| ri | nonpr nclud | riority unsecured claim, list the crea | litor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.55 | Bric | on Bastian | | | | Total claim |
| 4.55 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 1,167.50 |
| | | 15 Myrtle Ln | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | lington | KY | 41005-7862 | Contingent | |
| | City | | State | ZIP Code | | |
| | _ | D incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | $\square A$ | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | 1 | | | | Cother. Specify The Plastic Merchant | |
| 4 5 6 | | Yes Ice DeGrinder | | | | 040.00 |
| 4.56 | ыu | | | | Last 4 digits of account number | <u>\$243.00</u> |
| | | priority Creditor's Name | | · · · · · · · · · · · · · · · · · · · | When was the debt incurred? | |
| | 352 Numl | 28 Barretts Ferry Dr | | | | |
| | Num | ber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Will | liamsburg | VA | | Contingent | |
| | City | | State | ZIP Code | Unliquidated | |
| | | o incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | D A | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nitv debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | ne claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | • | | | | |
| | | Yes | | | | |
| 4.57 | Bry | yan Gambrel | | | Last 4 digits of account number | \$ <u>665.00</u> |
| | | priority Creditor's Name 27 Paxton Ave | | | When was the debt incurred? | |
| | Num Apt | iber Street t 927 | | | As of the date you file, the claim is: Check all that apply. | |
| | Cin | ncinnati | OH | 45209-2419 | | |
| | City Who | o incurred the debt? Check one. | State | ZIP Code | | |
| | _ | Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | L) / | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | ne claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | • | | | | | |
| | | Yes | | | | |

| Debt | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | Entered 10/03/19 17;32;42 Main Docu | ument |
|------|------------|--------------------------------------------------------------------------------------------------------------|----------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| | | | | 5 | 50 of 221 | |
| Par | 't 2: | List All of Your NONPRIOR | RITY Uns | ecured Claims | | |
| I | | ny creditors have nonpriority una No. You have nothing to report in thi Yes | | | | |
| i | nonp | priority unsecured claim, list the cred | litor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do no st the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.58 | Bn | yan Mayer | | | | Total claim |
| 4.50 | - | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 218.55 |
| | | Fairlawn Dr | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | City | | NY State | 11722-4664 ZIP Code | Contingent Unliquidated | |
| | | o incurred the debt? Check one. Debtor 1 only Debtor 2 only | | | Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commun | nitv debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ls t ✔ | t <mark>he claim subject to offset?</mark> No Yes | , | | Other. Specify The Plastic Merchant | list claims already priority unsecured \$218.55 \$249.00 \$255.00 |
| 4.59 | Br | yan Weiss | | | Last 4 digits of account number | _{\$} 249.00 |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | | 97 Carlton PI NE nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Bro | ookhaven | GA | 30319-3621 | | |
| | City Wh | no incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | _ | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | | Student loans | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a community of the claim subject to offset? | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.60 | | Yes Jenaventura Hormazabal | | | Last 4 digits of account number | |
| | | npriority Creditor's Name | | | Last 4 digits of account number When was the debt incurred? | \$ <u>255.00</u> |
| | | 08 NW 45th Ave | | | | |
| | | bt 36 | | | As of the date you file, the claim is: Check all that apply. | |
| | | iami | FL | 33126-2473 | Contingent | |
| | _ | no incurred the debt? Check one. Debtor 1 only | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | i - |
| | ~ | t he claim subject to offset? No Yes | | | ✓ Other. Specify The Plastic Merchant | |

| Debt | tor 1 Castehan Caste | Last Name | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | iment | | |
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| | | | 5 | 51 of 221 | | | |
| Par | rt 2: List All of Your NONPRIORIT | FY Un | secured Claims | | | | |
| [| Do any creditors have nonpriority unser No. You have nothing to report in this p Yes | | | | | | |
| ri | nonpriority unsecured claim, list the creditor | or sepai or holds | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already | | |
| 4.61 | Cameron Newland | | | | Total claim | | |
| 4.61 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 158.00 | | |
| | 11018 NE 11th St Number Street | | | When was the debt incurred? | * | | |
| | Apt 112 | | | | | | |
| | | VA | 98004-4576 | As of the date you file, the claim is: Check all that apply. | | | |
| | , | ate | ZIP Code | | | | |
| | Who incurred the debt? Check one. | | | Disputed | | | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | | | Student loans | | | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | Check if this claim is for a community | v daht | | Debts to pension or profit-sharing plans, and other similar debts | s <u>200.00</u> | | |
| | Check if this claim is for a community | γ αθοι | | Other. Specify The Plastic Merchant | | | |
| | Is the claim subject to offset? | | | | | | |
| 4.62 | Cameron Todd | | | Last 4 digits of account number | <u>\$</u> 200.00 | | |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | | | |
| | 1210 Calhoun St | | | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | | | |
| | New Orleans L | A | 70118-6002 | Contingent | | | |
| | | tate | ZIP Code | | | | |
| | Who incurred the debt? Check one. Debtor 1 only | | | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | | | |
| | At least one of the debtors and another | | | that you did not report as priority claims | | | |
| | Check if this claim is for a community | y debt | | Debts to pension or profit-sharing plans, and other similar debts | | | |
| | Is the claim subject to offset? | | | Cther. Specify The Plastic Merchant | | | |
| | ✓ No | | | | | | |
| | Yes | | | | | | |
| 4.63 | Capital One Services, LLC | | | Last 4 digits of account number 5138 | \$ <u>21,886.05</u> | | |
| | Nonpriority Creditor's Name PO Box 30285 | | | When was the debt incurred? | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | | | |
| | Salt Lake City U | IT | 84130 | | | | |
| | City Si | tate | ZIP Code | Contingent Unliquidated | | | |
| | Who incurred the debt? Check one. | | | | | | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | | | Student loans | | | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | | | |
| | Check if this claim is for a community | y debt | | that you did not report as priority claims | | | |
| | Is the claim subject to offset? | | | Other. Specify Credit Card Debt | | | |
| | Yes | | | | | | |

| Debt | or 1 Caskehae Chestor Deboc 1 File | <u>d 10/03/19</u> | Entered 10/03/19 17:32:42 Main Docu | ument |
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| Der | | • | 2 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Unse | ecured Claims | | |
| [| Do any creditors have nonpriority unsecured cla No. You have nothing to report in this part. Sub Yes | • • | | |
| i | nonpriority unsecured claim, list the creditor separation | tely for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.04 | Carlos Ortega Lopez | | | Total claim |
| 4.64 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 5,449.00 |
| | 7203 Fred Morse Dr Number Street | | When was the debt incurred? | * |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Austin TX City State Who incurred the debt? Check one. | 78723-1610 ZIP Code | Contingent Unliquidated | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and another Check if this claim is for a community debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Coner. Speciny The Flashe Motoriality | |
| 4.65 | Carols Suarex | | Last 4 digits of account number | <u>\$87.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 34 Alta St | | | |
| | Number Street Apt C | | As of the date you file, the claim is: Check all that apply. | |
| | Arcadia CA S | 91006-3616 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| 4.66 | Casey Donnelly | | Last 4 digits of account number | <u>\$1,284.30</u> |
| | Nonpriority Creditor's Name 1163 W Peachtree St NE Number Street | | When was the debt incurred? | |
| | Apt 1715 | | As of the date you file, the claim is: Check all that apply. | |
| | | 30309-4542 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | \square At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |

| Debt | | | | ed 10/03/19 | _Entered 10/03/19 17:32:42 Main Doci | ument |
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| | First | Name Middle Name | Last Name | Pg 5 | 53 of 221 | |
| Par | rt 2: List | All of Your NONPRIO | RITY Uns | secured Claims | | |
| [| _ ` | itors have nonpriority un have nothing to report in th | | | ? e court with your other schedules. | |
| i | nonpriority ui | nsecured claim, list the cre | ditor separ ditor holds | ately for each claim | order of the creditor who holds each claim. If a creditor ha b. For each claim listed, identify what type of claim it is. Do no ist the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.07 | Covolar | | | | | Total claim |
| 4.67 | Cavalry SF | | | | Last 4 digits of account number 5292 | _{\$} 3,747.62 |
| | | hit Lake Drive, Suite 400 Street | | | When was the debt incurred? | φ |
| | Valhalla | | | 10505 | As of the date you file, the claim is: Check all that apply. | |
| | City | | NY State | 10595 ZIP Code | Contingent Unliquidated | |
| | Debtor 1 | | | | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 | and Debtor 2 only one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | f this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Debt | ; |
| | Is the claim ✓ No ─ Yes | n subject to offset? | | | Other. Specify Credit Card Debt | |
| 4.68 | | | | | Last 4 digits of account number 7370 When was the debt incurred? | \$ <u>3,078.52</u> |
| | Nonpriority Cre 500 Summ | ^{editor's Name} nit Lake Drive, Suite 400 | | | | |
| | Number | Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Valhalla | | NY | 10595 | Contingent | |
| | | ed the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 | | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 | and Debtor 2 only one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if | f this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Debt | i |
| | Is the claim | n subject to offset? | | | , | |
| 4.69 | Centerpoi | nte Hospital | | | Last 4 digits of account number 5402 | \$ <u>4,358.93</u> |
| | Nonpriority Cre PO Box 67 | | | | When was the debt incurred? | |
| | Number | Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Dallas _{City} | | TX State | 75267 ZIP Code | | |
| | | red the debt? Check one. only | | | Unliquidated Disputed | |
| | Debtor 2 | | | | Type of NONPRIORITY unsecured claim: | |
| | | and Debtor 2 only one of the debtors and another | | | Student loans | |
| | _ | f this claim is for a commu | nity debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim | n subject to offset? | | | ☑ Other. Specify Medical Services | |

| Debt | or 1 | Cate Age And Cate And | 1 File | | _Entered 10/0 <u>3/19 17 ເສລີ,42 Main Docເ</u> 4 of 221 | ument |
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| Par | 't 2: | List All of Your NONPRIOR | RITY Uns | Ŭ | - 01 221 | |
| | | ny creditors have nonpriority una lo. You have nothing to report in thi ′es | | • • | | |
| i i | nonp | riority unsecured claim, list the crea | litor separ litor holds | ately for each claim. | rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do no st the other creditors in Part 3.If you have more than three no | t list claims already |
| | 0. | atom siste Dhusisian Osmissa | | | | Total claim |
| 4.70 | | enterpointe Physician Services | | | Last 4 digits of account number | _{\$} 10.00 |
| | 48 | 01 Weldon Springs Parkway ber Street | | | When was the debt incurred? | |
| | City Wh | int Charles o incurred the debt? Check one. Debtor 1 only | MO State | 63304 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | |
| | □ □ Ist | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commun he claim subject to offset? No Yes | nity debt | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services | |
| 4.71 | Ch | ad Thompson | | | Last 4 digits of account number | <u>\$2,160.05</u> |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | | 34 Broomsage Pl nber Street | | <u></u> | As of the date you file, the claim is: Check all that apply. | |
| | City Wh | Ilahassee to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | FL State | 32309-2050 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ls ti ✔ | Check if this claim is for a commur he claim subject to offset? No Yes | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.72 | Cł | nantal Tu | | | Last 4 digits of account number | _{\$} 574.00 |
| | 36 | priority Creditor's Name 63 BRanding Iron Pl nber Street | | | When was the debt incurred? | ф <u>от нос</u> |
| | Di | ıblin | CA | 94568-7297 | As of the date you file, the claim is: Check all that apply. | |
| | City Wh | | State | ZIP Code | Contingent Unliquidated Disputed | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ls t ✓ | Check if this claim is for a commun he claim subject to offset? No Yes | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

| Debt | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | _Entered 10/0 <u>3/19 17 ເສລີ,42 Main Docເ</u> 5 of 221 | ument |
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| Par | rt 2: | List All of Your NONPRIOF | RITY Uns | 0 | | |
| | | ny creditors have nonpriority una lo. You have nothing to report in thi res | | • • | | |
| i i | nonpi incluc | riority unsecured claim, list the cred | litor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.73 | | arles Doherty | | | Last 4 digits of account number | _{\$} 261.00 |
| | | oriority Creditor's Name 420 Hyde Parkway | | | When was the debt incurred? | ş <u></u> |
| | Num | , , | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Spi | ringhill | FL | 34609-9607 | | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | Whe | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | | Student loans | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commun | nity debt | | ✓ Other. Specify The Plastic Merchant | |
| | ~ | he claim subject to offset? No Yes | | | | |
| 4.74 | | arles Li | | | Last 4 digits of account number | _{\$} 118.50 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | | 82 Barrington Ct | | | | |
| | Num | - | | | As of the date you file, the claim is: Check all that apply. | |
| | | | | | | |
| | | n Jose | CA | 95121-2602 | Contingent Unliquidated | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | | Student loans | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commur | nity debt | | ✓ Debts to persion of profitsharing plans, and other similar debts ✓ Other. Specify The Plastic Merchant | |
| | | he claim subject to offset? | | | | |
| | | No Yes | | | | |
| 4.75 | | narles Smith | | | Last 4 digits of account number | |
| | | priority Creditor's Name | | | When was the debt incurred? | \$ <u>237.00</u> |
| | | 1 Braircliff Dr | | | | |
| | Num | | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | - | g Harbor Township | NJ | 08234-8208 | Contingent | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims | |
| | | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | Image: A start of the start of | | | | | |
| 1 | | Yes | | | | |

| Debt | or 1 | First Name Middle Name | 1 File | | Entered 10/03/1917;32: <u>42</u> N 6 of 221 | lain Docu | ment |
|------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------------------|
| Par | rt 2: | List All of Your NONPRIOR | RITY Uns | 0 | | | |
| | _ | ny creditors have nonpriority un lo. You have nothing to report in thi es | | • • | | | |
| r | nonpr incluc | riority unsecured claim, list the cred | ditor separa litor holds | ately for each claim. | rder of the creditor who holds each claim. If For each claim listed, identify what type of clair st the other creditors in Part 3.If you have more | m it is. Do not | list claims already |
| | 0 | | | | | | Total claim |
| 4.76 | | ase Bank USA, N.A. | | | Last 4 digits of account number 0085 | | _{\$} 32,666.76 |
| | | Box 15123 | | | When was the debt incurred? | - | |
| | Num | ber Street | | | | | |
| | City Who | mington o incurred the debt? Check one. Debtor 1 only Debtor 2 only | DE State | 19850 ZIP Code | As of the date you file, the claim is: Check all th Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | ıat apply. | |
| | □ / □ / Is th ☑ / | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commun he claim subject to offset? No Yes | nity debt | | Student loans Obligations arising out of a separation agreement that you did not report as priority claims Debts to pension or profit-sharing plans, and other Other. Specify Credit Card Debt | | |
| 4.77 | Cha | ase Bank USA, N.A. | | | Last 4 digits of account number 0794 | | <u>\$34,314.46</u> |
| | | priority Creditor's Name | | | When was the debt incurred? | _ | |
| | PO Num | ber Street | | | | | |
| | | | | | As of the date you file, the claim is: Check all th | nat apply. | |
| | Car City | rol Stream | IL State | 60197 ZIP Code | Contingent Unliquidated | | |
| | | o incurred the debt? Check one. Debtor 1 only | | | Disputed | | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreemen | nt or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | | |
| | | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other Other. Specify Credit Card Debt | er similar debts | |
| | • | h e claim subject to offset? No Yes | | | | | |
| 4.78 | Ch | nase Bank USA, N.A. | | | Last 4 digits of account number 4498 | | _{\$} 5,768.05 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | _ | φ <u>0,700.00</u> |
| | |) Box 15123 | | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all th | nat apply. | |
| | | Imington | DE | 19850 | Contingent | | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | | | |
| | | Debtor 1 only | | | | | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreemen | nt or divorce | |
| | | Check if this claim is for a commu | nitv debt | | that you did not report as priority claims | | |
| | | he claim subject to offset? | | | Debts to pension or profit-sharing plans, and other Other. Specify Credit Card Debt | er similar debts | |
| | • | | | | | | |

| Debto | or 1 Castename Middle Name Last Name | ed 10/03/19 | Entered 10/03/10 17:32 Main Docu | ument |
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| | | Ŭ | 57 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | ecured Claims | | |
| | Do any creditors have nonpriority unsecured c No. You have nothing to report in this part. Sul Yes | | | |
| r ii | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | t list claims already |
| 4 70 | Chase Bank USA, N.A. | | | Total claim |
| 4.79 | Nonpriority Creditor's Name | | Last 4 digits of account number 2449 | _{\$} 6,320.18 |
| | PO Box 15123 Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Wilmington DE | 19850 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | □ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Debt | |
| | Is the claim subject to offset? | | U Other. Specify Orean Oard Debt | |
| | No | | | |
| 4.00 | L Yes Chase Bank USA, N.A. | | 0010 | CO4 0C |
| 4.80 | Chase Dalik USA, N.A. | | Last 4 digits of account number 3613 | <u>\$624.06</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | PO Box 15123 Number Street | ······ | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Wilmington DE | 19850 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Debt | |
| | Is the claim subject to offset? | | | |
| | V No Yes | | | |
| 4.81 | Chase Bank USA, N.A. | | Last 4 digits of account number 5665 | \$ <u>7,014.01</u> |
| | Nonpriority Creditor's Name PO Box 15123 | | When was the debt incurred? | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Wilmington DE | 19850 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated | |
| | Debtor 1 only | | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community debt | | that you did not report as priority claims | |
| | Is the claim subject to offset? | | ✓ Debts to pension of profits and pension of pension of pension of profits and pension of pension | |
| | ✓ No | | | |
| | Yes | | | |

| Debto | or 1 | First Name Middle Name | 1 File | | Entered 10/03/1917;;32; <u>42</u> N 8 of 221 | lain Docu | iment |
|---------|----------------|--------------------------------------------------------------------------------|-----------------------------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|------------------------|
| Par | t 2: | List All of Your NONPRIOF | RITY Uns | U | | | |
| | | ny creditors have nonpriority unsolo. You have nothing to report in thi fes | | | | | |
| r ii | nonpi ncluc | riority unsecured claim, list the cred | litor separa litor holds | ately for each claim. | rder of the creditor who holds each claim. If For each claim listed, identify what type of clair at the other creditors in Part 3.If you have more | m it is. Do not | list claims already |
| | | | | | | | Total claim |
| 4.82 | | ase Bank USA, N.A. | | | Last 4 digits of account number 0156 | | _{\$} 5,924.14 |
| | | Box 15123 | | | When was the debt incurred? | _ | |
| | Wil | mington | DE | 19850 | As of the date you file, the claim is: Check all th | nat apply. | |
| | City | | State | ZIP Code | Contingent | | |
| | _ | o incurred the debt? Check one. | | | Unliquidated Disputed | | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreemen that you did not report as priority claims | t or divorce | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other | er similar debts | |
| | ls tł | he claim subject to offset? | | | Other. Specify Credit Card Debt | | |
| | • | No | | | | | |
| 4.00 | | Yes ase Bank USA, N.A. | | | 0704 | | 00.040.04 |
| 4.83 | On | ase bally USA, N.A. | | | Last 4 digits of account number 2734 When was the debt incurred? | | <u>\$33,243.04</u> |
| | | priority Creditor's Name) Box 15123 | | | | - | |
| | Num | | | | | | |
| | | | | | As of the date you file, the claim is: Check all the | at apply. | |
| | Wil | Imington | DE | 19850 | | | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | | |
| | 1 | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | | |
| | | Debtor 2 only | | | Student loans | | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreemen | it or divorce | |
| | _ | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other | er similar debts | |
| | | Check if this claim is for a commur | nty debt | | ✓ Other. Specify Credit Card Debt | | |
| | Is tr | he claim subject to offset? | | | | | |
| | | Yes | | | | | |
| 4.84 | Ch | ase Bank USA, N.A. | | | Last 4 digits of account number 3190 | | _{\$} 4,941.20 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | _ | \$4,941.20 |
| | PC |) Box 15123 | | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all th | at apply | |
| | \\/i | Imington | DE | 19850 | - | at apply. | |
| | City | | State | ZIP Code | Contingent | | |
| | _ | o incurred the debt? Check one. Debtor 1 only | | | Disputed | | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreemen that you did not report as priority claims | t or divorce | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other | er similar debts | |
| | | he claim subject to offset? | | | Other. Specify Credit Card Debt | | |
| | | | | | | | |
| | <u> </u> | Yes | | | | | |

| Debto | or 1 | First Name Middle Name | 1 File | ed 10/03/19 Pa 5 | _Entered 10/0 <u>3/19 17 ສີ2</u> ; <u>42 Main Docu</u> 9 of 221 | ument |
|-------|----------------|----------------------------------------------------------------------------------|-------------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| Par | t 2: | List All of Your NONPRIOF | RITY Uns | . | | |
| | | ny creditors have nonpriority una lo. You have nothing to report in thi es | | | | |
| r | nonpr ncluc | riority unsecured claim, list the cred | ditor separa litor holds a | ately for each claim. | rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | ~ | | | | | Total claim |
| 4.85 | | ase Bank USA, N.A. | | | Last 4 digits of account number 5369 | _{\$} 602.62 |
| | | Box 15123 | | | When was the debt incurred? | • |
| | Num | ber Street | | | | |
| | | mington | DE | 19850 | As of the date you file, the claim is: Check all that apply. | |
| | City Who | o incurred the debt? Check one. | State | ZIP Code | Unliquidated | |
| | _ | Debtor 1 only | | | Disputed Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | | | Cother. Specify Credit Card Debt | |
| | | No Yes | | | | |
| 4.86 | | ase Bank USA, N.A. | | | Last 4 digits of account number 0628 | \$ <u>5,763.40</u> |
| | Nonp | priority Creditor's Name | | | When was the debt incurred? | |
| | PO Num | Box 15123 | | | | |
| | Num | | | | As of the date you file, the claim is: Check all that apply. | |
| | | Imington | DE | 19850 | | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | _ | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | ~ I | he claim subject to offset? No Yes | | | | |
| 4.87 | Ch | neng Wang | | | Last 4 digits of account number | _{\$} 11,600.00 |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | 38 Num | N. Almaden Blvd nber Street | | | | |
| | | it 1406 | | | As of the date you file, the claim is: Check all that apply. | |
| | City | | CA State | 95110-2755 ZIP Code | Contingent | |
| | _ | o incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | Check if this claim is for a commun | nity debt | | that you did not report as priority claims | |
| | | he claim subject to offset? | nty debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | | | | | |
| | <u> </u> | Yes | | | | |

| Debt | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Doci | ument |
|------|------------|-----------------------------------------------------------------------------------|----------------------------|----------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | | | | • | 0 of 221 | |
| Par | 't 2: | List All of Your NONPRIOF | RITY Uns | secured Claims | | |
| [| _ | ny creditors have nonpriority uns No. You have nothing to report in thi Yes | | | | |
| ri | nonp | priority unsecured claim, list the crea | litor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor ha . For each claim listed, identify what type of claim it is. Do no st the other creditors in Part 3.If you have more than three no | t list claims already |
| 4 00 | Ch | iia Yang | | | | Total claim |
| 4.88 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 3,800.00 |
| | | 53 Cedro Ln | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | alnut Creek | CA | 94598-3845 | _ | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | ; |
| | ~ | t <mark>he claim subject to offset?</mark> No Yes | | | Other. Specify The Plastic Merchant | |
| 4.89 | Ch | nih Yoa Huang | | | Last 4 digits of account number | _{\$} 340.00 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | | Adair Way | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | На | ayward | CA | 94542-7940 | | |
| | City Wh | no incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 2 only | | | Student loans | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | i |
| | ls ti | he claim subject to offset? | | | Cother. Specify The Plastic Merchant | |
| | ~ | No | | | | |
| 1.00 | | Yes | | | | |
| 4.90 | Cł | hih-yu Choa | | | Last 4 digits of account number | _{\$} 716.00 |
| | | npriority Creditor's Name 126 32nd Ave | | | When was the debt incurred? | |
| | Nun | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | 50 | eattle | WA | 98122-3314 | _ | |
| | City | / | State | ZIP Code | Contingent Unliquidated | |
| | _ | no incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commun | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | i |
| | | the claim subject to offset? | | | Other. Specify | |
| | ~ | No Yes | | | | |

| Debto | or 1 Casten and Cast Name Middle Name Last Name | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | iment |
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| | | • | 51 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| | Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su ☑ Yes | | | |
| r i | nonpriority unsecured claim, list the creditor separ | ately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.91 | Chirayu Modi | | | Total claim |
| 4.91 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 1,348.25 |
| | 99 S. Beech Springs Circle Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | The Woodlands TX | 77389-4446 | | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | V No Yes | | | |
| 4.92 | Chris Baxter | | Last 4 digits of account number | <u>\$950.00</u> |
| | Nonpriority Creditor's Name | · · · · · · · · · · · · · · · · · · · | When was the debt incurred? | |
| | 3385 Korbel St | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Eugene OR | 97404-3880 | | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | • | | Cother. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | | | | |
| 4.93 | Chris Cheng | | Last 4 digits of account number | _{\$} 1,906.50 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | · <u></u> |
| | 15409 Pescadero Dr | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Wichita KS | 67230-7254 | | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Decision of points and grant and other similar decision Other. Specify The Plastic Merchant | |
| | ₩ No | | | |
| | Yes | | | |

| Debt | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | Entered 10/03/19 17 :: 32:: 42 Main Docu | ument |
|------|------------------|---------------------------------------------------------------------------------|----------------------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| | | | | • | 52 of 221 | |
| Par | rt 2: | List All of Your NONPRIOR | RITY Uns | secured Claims | | |
| | | ny creditors have nonpriority uns o. You have nothing to report in thi es | | • • | | |
| i | nonpri includ | iority unsecured claim, list the cred | litor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.94 | Chr | is Sobeck | | | | Total claim |
| 4.94 | | riority Creditor's Name | | | Last 4 digits of account number | _{\$} 457.05 |
| | | 8 Skyline Dr | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Win | iona | MN | 55987-5447 | _ | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | | b incurred the debt? Check one. | | | | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | | Student loans | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ЦС | Check if this claim is for a commur | nity debt | | ☑ Other. Specify The Plastic Merchant | |
| | | e claim subject to offset? | | | | |
| | | | | | | |
| 4.05 | | Yes ristopher Cardinale | | | | _{\$} 961.00 |
| 4.95 | 0111 | | | | Last 4 digits of account number | \$ 901.00 |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | 142 | 205 Consititution Cir | | | | |
| | Apt | | | | As of the date you file, the claim is: Check all that apply. | |
| | | levue | NE | 68123-6861 | | |
| | City | | State | ZIP Code | | |
| | | b incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commun | nity dobt | | Debts to pension or profit-sharing plans, and other similar debts | i |
| | | | inty debt | | C Other. Specify The Plastic Merchant | |
| | IS th | e claim subject to offset? | | | | |
| | | vo (es | | | | |
| 4.96 | Chr | ristopher Carley | | | Last 4 digits of account number | _{\$} 474.00 |
| | Nonp | priority Creditor's Name | | | When was the debt incurred? | φ |
| | 722 | 21 Hyannis Dr | | | | |
| | Numb | ber Street | | | As of the date you file the claim is Check all that apply | |
| | 14/- | | 0.4 | 01007 1000 | As of the date you file, the claim is: Check all that apply. | |
| | City | est Hills | CA State | 91307-1323 ZIP Code | | |
| | Who | o incurred the debt? Check one. | | | Unliquidated Disputed | |
| | | Debtor 1 only | | | | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | | At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | ne claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | | | | | |
| 1 | Y | Yes | | | | |

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|------|-------------------------------------------------------------------------------------------------------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| De | | 0 | 55 01 221 | |
| Pa | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| | Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su ✔ Yes | • • | | |
| i | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.97 | Christopher Eyin | | | Total claim |
| 4.97 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 712.50 |
| | 9447 Canonbury Sq Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Fairfax VA City State Who incurred the debt? Check one. | 22031-6097 ZIP Code | Contingent Unliquidated | |
| | Debtor 1 only Debtor 2 only | | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? Image: No Yes | | | |
| 4.98 | Christopher Lamele | | Last 4 digits of account number | <u>\$457.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 5420 Kansas St. Number Street | | | |
| | Unit A | | As of the date you file, the claim is: Check all that apply. | |
| | Houston TX | 77007-1275 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? Image: No Image: Yes | | | |
| 4.99 | Christopher Weber | | Last 4 digits of account number | \$ <u>190.00</u> |
| | Nonpriority Creditor's Name 3031 Beth Ct Number Street | | When was the debt incurred? | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Edgewood KY | 41017-9665 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | Is the claim subject to offset? | | | |

| Debt | | iled 10/03/19 | | iment |
|------|-----------------------------------------------------------------------|---------------------|------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| _ | First Name Middle Name Last N | ^{ame} Pg | 64 of 221 | |
| Par | t 2: List All of Your NONPRIORITY U | nsecured Claims | i | |
| 3. | Do any creditors have nonpriority unsecure | d claims against yo | u? | |
| | No. You have nothing to report in this part. | | | |
| l | Yes | | | |
| 4. L | ist all of your nonpriority unsecured claims | in the alphabetical | order of the creditor who holds each claim. If a creditor has | more than one |
| | | | n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | |
| | claims fill out the Continuation Page of Part 2. | • | | |
| | | | | Total claim |
| 4.10 | Chun Liang | | Last 4 digits of account number | |
| | Nonpriority Creditor's Name | | | _{\$} 484.50 |
| | 12180 164th Ct NE | | When was the debt incurred? | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Redmond WA | 98052-2399 | | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community deb | t | Debts to pension or profit-sharing plans, and other similar debts | |
| | • | | Cother. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | Yes | | | |
| 4.10 | · Citibank, N.A. | | Last 4 digits of account number 6693 | \$ <u>15,366.71</u> |
| | Nonpriority Creditor's Name | | - When was the debt incurred? | |
| | PO Box 790040 | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | | | |
| | Saint Louis MO City State | 63179 ZIP Code | | |
| | Who incurred the debt? Check one. | 211 0000 | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community deb | • | Debts to pension or profit-sharing plans, and other similar debts | |
| | | | Other. Specify Credit Card Debt | |
| | Is the claim subject to offset? | | | |
| | Yes | | | |
| 4.10 | Clinlab | | Last 4 digits of account number 0145 | 000.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | \$ <u>360.00</u> |
| | 763 S New Ballas Rd., Ste 160 | | | |
| | Number Street | | - | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Saint Louis MO City State | 63141 ZIP Code | | |
| | Who incurred the debt? Check one. | 0000 | Unliquidated Disputed | |
| | Debtor 1 only | | - | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | | that you did not report as priority claims | |
| | Check if this claim is for a community deb | it. | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services | |
| | Is the claim subject to offset? | | Cother. Specify | |
| | Ves | | | |

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| Par | t 2: List All of Your NONPRIORITY | Unsecured Claims | | |
| [| Do any creditors have nonpriority unsecu ☐ No. You have nothing to report in this par ☑ Yes | | | |
| ri | nonpriority unsecured claim, list the creditor | separately for each clair olds a particular claim, | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.10 | Curt Scott, II | | | Total claim |
| 4.10 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 220.05 |
| | 43 Kai Makani Loop Number Street | | When was the debt incurred? | * |
| | Apt 203 | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Kihei HI City State | 96753-5502 | | |
| | | ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | _ | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community d | ebt | ✓ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | V No | | | |
| — | | | | |
| 4.10 | Cynthia Logsdon | | Last 4 digits of account number | <u>\$1,617.50</u> |
| | Nonpriority Creditor's Name | | - When was the debt incurred? | |
| | 2478 W 2350 N | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Lehi UT | 84043-5757 | Contingent | |
| | City State | | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims | |
| | Check if this claim is for a community d | ebt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Other. specily the hastle workhant | |
| | V No | | | |
| <u> </u> | Yes | | | |
| 4.10 | Daisy Chen | | Last 4 digits of account number | _{\$} 200.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | * |
| | 338 Oak St | | | |
| | Number Street Apt 2 | | As of the date you file, the claim is: Check all that apply. | |
| | Mountain View CA | 94041-1262 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community d | ebt | that you did not report as priority claims | |
| | Is the claim subject to offset? | | ☑ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify The Plastic Merchant | |
| | | | | |
| | Yes | | | |

| Debt | or 1 | Cather Cather I | | Filed 10/03/19 | _Entered 10/0 <u>3/19 17 ເສລີ</u> 42 Main Docu 56 of 221 | iment |
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| Par | t 2: | List All of Your NON | IPRIORITY | 0 | | |
| [| | ny creditors have nonprid lo. You have nothing to rep ′es | | 0, | ? e court with your other schedules. | |
| ri | nonpi ncluc | riority unsecured claim, list | the creditor se | eparately for each claim | order of the creditor who holds each claim. If a creditor has a. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| | | nial Da Davandinia | | | | Total claim |
| 4.10 | • | niel DeBerardinis | | | Last 4 digits of account number | _{\$} 360.00 |
| | | Boltwood Ave | | | When was the debt incurred? | |
| | Num | ber Street | | | | |
| | City Who | stleton o incurred the debt? Check | NY State one. | 12033-1012 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a he claim subject to offset? No | | bt | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.10 | Da | Yes rnell Pettiford priority Creditor's Name | | | Last 4 digits of account number When was the debt incurred? | <u>\$220.05</u> |
| | | 47 Silver Star St | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | nderson o incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and | | 89002-6561 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ls th ✔ I | Check if this claim is for a the claim subject to offset? No Yes | community de | bt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.10 | Da | arren Otten | | | Last 4 digits of account number | \$1,355.00 |
| | | priority Creditor's Name 20 E. Dixileta Dr nber Street | | | When was the debt incurred? | ф <u>1,000.00</u> |
| | 0 | Qual | | 05001 0100 | As of the date you file, the claim is: Check all that apply. | |
| | City Wh | to incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 2 only | AZ State one. | 85331-6186 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | □ / Is th ✓ | At least one of the debtors and Check if this claim is for a he claim subject to offset? | | bt | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

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| Par | t 2: List All of Your NONPRIORITY U | Jnsecured Claims | | |
| [[| No. You have nothing to report in this part. ✓ Yes | | | |
| r | nonpriority unsecured claim, list the creditor se | parately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.10 | David Lee | | | Total claim |
| 4.10 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 1,750.00 |
| | 10444 Rockville Pike Number Street | | When was the debt incurred? | * |
| | Apt 401 | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Rockville MD City State | 20852-3329 | | |
| | | ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | _ | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community del | bt | ✓ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | V No | | | |
| | L Yes | | | |
| 4.110 | David Newman | | Last 4 digits of account number | <u>\$694.50</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 1853 Serene Way | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Lancaster PA | 17602-7001 | | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims | |
| | Check if this claim is for a community del | ot | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Coner. Specity The Hastie Merchant | |
| | No | | | |
| | Yes | | | |
| 4.11 | David Piper | | Last 4 digits of account number | _{\$} 237.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | \$207.00 |
| | 911 Pretense Way | | | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Pittsburgh PA | 15203-1214 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community del | ht | that you did not report as priority claims | |
| | • | <i></i> | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | ✓ No | | | |
| 1 | Yes | | | |

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| De | | • | 8 of 221 | |
| Pa | rt 2: List All of Your NONPRIORITY Unsec | cured Claims | | |
| | Do any creditors have nonpriority unsecured clain No. You have nothing to report in this part. Subm | • • | | |
| | nonpriority unsecured claim, list the creditor separate | ely for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.11 | z David Wallisch | | | Total claim |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 40.50 |
| | 3210 Summit St Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | | 4111-2711 ZIP Code | Contingent Unliquidated | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and another Check if this claim is for a community debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Coner. Specify The Flacke Molenant | |
| 4.11 | Dawn Bloomingdale | | Last 4 digits of account number | \$ <u>1,107.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 714 Springton Circle Number Street | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Upper Chichester PA 19 | 9014-3025 | Contingent | |
| | City State 2 Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? No Yes | | | |
| 4.11 | Derek Wright | | Last 4 digits of account number | _{\$} 546.00 |
| | Nonpriority Creditor's Name 707 Beverley Rd | | When was the debt incurred? | |
| | Number Street Apt 2K | | As of the date you file, the claim is: Check all that apply. | |
| | , | 1218-3332 | Contingent | |
| | City State 2 Who incurred the debt? Check one. Debtor 1 only | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | Is the claim subject to offset? No Yes | | ✓ Other. Specify The Flashe Merchant | |

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| | | • | 69 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| [| Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su Yes | • • | | |
| r i | nonpriority unsecured claim, list the creditor separ | rately for each clair | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.11 | Derrick Ozuna | | | Total claim |
| 4.11 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 305.50 |
| | 4500 Steiner Ranch Blvd Number Street | | When was the debt incurred? | ¢ |
| | Apt 2605 | | | |
| | Austin TX | 78732-2346 | As of the date you file, the claim is: Check all that apply. | |
| | City State Who incurred the debt? Check one. | ZIP Code | Contingent Unliquidated | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is far a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | | Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | ✓ No Yes | | | |
| 4 4 4 | | | | _{\$} 729.00 |
| 4.11 | Demokree | | Last 4 digits of account number | \$129.00 |
| | Nonpriority Creditor's Name | | - When was the debt incurred? | |
| | 688 110th Ave NE | | | |
| | Number Street Apt S2003 | | As of the date you file, the claim is: Check all that apply. | |
| | Bellevue WA | 98004-8448 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | | ✓ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | ✓ No | | | |
| | Yes | | | |
| 4.11 | Diana Nguyen | | Last 4 digits of account number | _{\$} 124.50 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | φ |
| | 112 McNamee Dr | | | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Folsom CA | 95630-3292 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | \Box Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | V Other. Specify | |
| | ✓ No | | | |
| | Yes | | | |

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| Par | t 2: List All of Your NONPRIORITY Unsec | ured Claims | | |
| [| Do any creditors have nonpriority unsecured clair No. You have nothing to report in this part. Submi Yes | • • | | |
| i i | nonpriority unsecured claim, list the creditor separatel | y for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.11 | Dino Feliciano | | | Total claim |
| 4.11 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 896.00 |
| | 8248 Kenton Ave Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | | 076-2612 | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | Ves | | | |
| 4.11 | | | Last 4 digits of account number 9244 | _{\$} 17.16 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | * |
| | c/o McCarthy, Burgess & Wolff, Inc. | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | 26000 Cannon Road | | _ | |
| | | 146 IP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | IP Code | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Conter. Specify | |
| | ✓ No | | | |
| <u> </u> | Yes | | | |
| 4.12 | Discover Bank | | Last 4 digits of account number 9112 | _{\$} 33,038.77 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | * |
| | PO Box 3008 | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | New Albany OH 430 | 054 | | |
| | City State Z Who incurred the debt? Check one. | IP Code | | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Student loans | |
| | _ | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Specify | |
| | Is the claim subject to offset? | | Cother. Specify Credit Card Debt | |
| | Yes | | | |

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| | | | Fy | 71 of 221 | |
| Par | t 2: List All of Your NONPRIC | ORITY Ur | nsecured Claims | | |
| | Do any creditors have nonpriority u ☐ No. You have nothing to report in ✓ Yes | | | | |
| r | nonpriority unsecured claim, list the cr | reditor sepa reditor hold | arately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.12 ⁻ | Distressed Asset Portfolio III, LLC | | | | Total claim |
| 4.12 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 26,287.27 |
| | 10625 Techwoods Circle Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Cincinnati City | OH State | 45242 ZIP Code | | |
| | Who incurred the debt? Check one. | State | ZIP Code | | |
| | Debtor 1 only | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and anothe | er | | that you did not report as priority claims | |
| | Check if this claim is for a comm | unity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card Debt | |
| | Is the claim subject to offset? | | | | |
| | V No | | | | |
| 4.12 | | | | Last 4 digits of account number | _{\$} 280.00 |
| | | | | When was the debt incurred? | φ |
| | Nonpriority Creditor's Name 40 Waterside Plz | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Apt 23J | | | · | |
| | New York | NY | 10010-2633 | Contingent Unliquidated | |
| | City Who incurred the debt? Check one. | State | ZIP Code | Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and anothe | er | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a comm | unity dobt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | unity debt | | Cther. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| | Yes | | | | |
| 4.12 | Dominik Buszko | | | Last 4 digits of account number | _{\$} 294.50 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | · |
| | 1369 Sago Ln | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Weston | FL | 33327-1628 | Contingent | |
| | City Who incurred the debt? Check one. | State | ZIP Code | Unliquidated | |
| | Debtor 1 only | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and anothe | er | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a comm | unity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | V No | | | | |
| 1 | | | | | |

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| | | Ŭ | 72 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Ur | nsecured Claims | | |
| | Do any creditors have nonpriority unsecured ☐ No. You have nothing to report in this part. S ☑ Yes | | | |
| r ii | nonpriority unsecured claim, list the creditor sepa | arately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.124 | Donna Grooms | | | Total claim |
| | Nonpriority Creditor's Name | ····· | Last 4 digits of account number | _{\$} 204.00 |
| | 296 Hooker Rd Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Chatworth GA | 30705-5904 | | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | V No | | | |
| | Ves | | | 007.00 |
| 4.12 | Donna Walker | | Last 4 digits of account number | <u>\$237.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 9353 Lotus Elan Dr | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | | | |
| | Las Vegas NV City State | 89117-7103 ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | | Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | Vo Yes | | | |
| 4.12 | | | | |
| 4.12 | Duong Huynh | | Last 4 digits of account number | \$3,930.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 408 Athol Ave | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Oakland CA | 94606-1418 | | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | _ | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | V No Ves | | | |
| 1 | | | | |

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| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| | Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su ☑ Yes | | | |
| r ii | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.12 | Dustin Hatton | | | Total claim |
| 4.12 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 884.50 |
| | 900 Hargrove Rd Number Street | | When was the debt incurred? | * |
| | Apt 36 | | | |
| | Tuscaloosa AL | 35401-4858 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | □ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | ✓ No | | | |
| | Yes | | | |
| 4.12 | Edward Jason Francisco | | Last 4 digits of account number | _{\$} 874.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 3648 Fountain St | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | | _ | |
| | Camarillo CA | 93012-7713 | Contingent Unliquidated | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | ✓ Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | V No | | | |
| | Yes | | | |
| 4.12 | Ehsanul Haque | | Last 4 digits of account number | _{\$} 120.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | 5120.00 |
| | 3727 S 19th Street | | | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Grand Forks ND City State | 58201-3445 ZIP Code | | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | □ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | No | | | |
| | Yes | | | |

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| Par | t 2: List All of Your NONPRIOF | RITY Un | secured Claims | | |
| [| Do any creditors have nonpriority uns No. You have nothing to report in thi Yes | | | | |
| i | nonpriority unsecured claim, list the crec | litor sepa litor holds | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.13 | Ehtesham Qamar | | | | Total claim |
| 4.13 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 42.00 |
| | 5508 Pyramid Ct Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Stockton | CA | 95219-7152 | | |
| | City | State | ZIP Code | | |
| | Who incurred the debt? Check one. | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | $\hfill\square$ At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | , | | Other. Specify The Plastic Merchant | |
| | V No Yes | | | | |
| 4.13 | · Elizabeth Funk | | | Last 4 digits of account number | <u>\$357.00</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 3707 N. Darwin Ave | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Tampa | FL | 33603-4607 | Contingent | |
| | City | State | ZIP Code | | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Cther. Specify The Plastic Merchant | |
| | ✓ No | | | | |
| — I | Yes | | | | |
| 4.13 | Eric Dai | | | Last 4 digits of account number | _{\$} 40.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | \$ <u>10100</u> |
| | 9001 Markville Dr | | | | |
| | Number Street Apt 1037 | | | As of the date you file, the claim is: Check all that apply. | |
| | Dallas | ТХ | 75243-9372 | Contingent | |
| | City | State | ZIP Code | | |
| | Who incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | $\hfill\square$ At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | \Box Check if this claim is for a commun | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Yes | | | | |

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| Par | t 2: List All of Your NONPRIOR | ITY Un | secured Claims | | |
| | Do any creditors have nonpriority uns ☐ No. You have nothing to report in this ☑ Yes | | | | |
| r ii | nonpriority unsecured claim, list the cred | itor sepa itor holds | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4 1 24 | Eric Theil | | | | Total claim |
| 4.13 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 3,960.00 |
| | 10531 4S Commons Dr # 232 Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | San Diego | CA | 92127-3517 | | |
| | 5 | State | ZIP Code | | |
| | Who incurred the debt? Check one. | | | Disputed | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a commun | ity dobt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | ity debt | | Cother. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| 4.13 | Erik Fund | | | Last 4 digits of account number | <u>\$320.00</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 1342 38th ave | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | San Fransico | CA | 94122-1337 | Contingent | |
| | City | State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a commun | ity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | - | | Other. Specify The Plastic Merchant | |
| | ✓ No Yes | | | | |
| 4.13 | Erik Peterson | | | Last 4 digits of account number | _{\$} 818.55 |
| | Nonpriority Creditor's Name 5908 Kabaye CV | | | When was the debt incurred? | Ŧ |
| | Number Street | | | | |
| | | | 70740 405- | As of the date you file, the claim is: Check all that apply. | |
| | Austin City | TX State | 78749-1927 ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | State | 211 0006 | | |
| | Debtor 1 only | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | | | that you did not report as priority claims | |
| | Check if this claim is for a commun | ity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | V No | | | | |
| | Yes | | | | |

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| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| | Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su ☑ Yes | • • | | |
| r i | conpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has h. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| | Fatafania Zanata Caraia | | | Total claim |
| 4.136 | Estefania Zapata-Garcia | | Last 4 digits of account number | _{\$} 1,212.50 |
| | 2300 Pleasant Ave | | When was the debt incurred? | φ |
| | Number Street | · · · · · · · · · · · · · · · · · · · | | |
| | Apt 211 | | As of the date you file, the claim is: Check all that apply. | |
| | Minneapolis MN | 55404-3241 | | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | □ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | ✓ No | | | |
| 4.13 | L Yes Eugene Chung | | | s480.00 |
| 4.13 | <i>. .</i> | | Last 4 digits of account number When was the debt incurred? | <u>5-100.00</u> |
| | Nonpriority Creditor's Name 1796 Grape St | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | | · | |
| | Denver CO City State | 80220-1351 ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Cther. Specify The Plastic Merchant | |
| | ✓ No | | | |
| 4.40 | Yes | | | |
| 4.13 | Floyd Ferrer | | Last 4 digits of account number | _{\$} 573.25 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | * |
| | 18620 Palo Verde Ave | | | |
| | Unit B | | As of the date you file, the claim is: Check all that apply. | |
| | Cerritos CA | 90703-9235 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community debt | | that you did not report as priority claims | |
| | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | | | | |

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| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| 3. [| Do any creditors have nonpriority unsecured o | • • | | |
| Ī | · Yes | | | |
| r | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has b. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.13 | Frank Napolitano | | | Total claim |
| 4.13 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 2,375.00 |
| | 88 Emma Way Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Poughquag NY | 12570-5662 | | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | □ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | ✓ No | | | |
| | Yes | | | |
| 4.14 | Gabby Foster | | Last 4 digits of account number | <u>\$3,034.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 401 Little Texas Lane | | | |
| | Number Street Apt 2331 | | As of the date you file, the claim is: Check all that apply. | |
| | Austin TX | 78745-4551 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Other. Specing The Flashe Merchant | |
| | Vo Yes | | | |
| 4.14 | L Yes | | | |
| | Osha Dava Oʻz | | | \$ <u>980.50</u> |
| 4.14 | Gabe Perez-Giz | | Last 4 digits of account number | |
| 4.14 | Nonpriority Creditor's Name 2025 Broadway | | Last 4 digits of account number When was the debt incurred? | |
| 4.14 | Nonpriority Creditor's Name | | • | |
| 4.14 | Nonpriority Creditor's Name 2025 Broadway Number Street | 10023-5038 | When was the debt incurred? As of the date you file, the claim is: Check all that apply. | |
| 4.14 | Nonpriority Creditor's Name 2025 Broadway Number Street Apt 4F New York NY City State | 10023-5038 ZIP Code | When was the debt incurred? | |
| 4.14 | Nonpriority Creditor's Name 2025 Broadway Number Street Apt 4F New York NY | | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| 4.14 | Nonpriority Creditor's Name 2025 Broadway Number Street Apt 4F New York NY City State Who incurred the debt? Check one. Image: Debtor 1 only Debtor 2 only | | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | |
| 4.14 | Nonpriority Creditor's Name 2025 Broadway Number Street Apt 4F New York NY City State Who incurred the debt? Check one. Image: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| 4.14 | Nonpriority Creditor's Name 2025 Broadway Number Street Apt 4F New York NY City State Who incurred the debt? Check one. Image: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | |
| 4.14 | Nonpriority Creditor's Name 2025 Broadway Number Street Apt 4F New York NY City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtrs and another Check if this claim is for a community debt | | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| 4.14 | Nonpriority Creditor's Name 2025 Broadway Number Street Apt 4F New York NY City State Who incurred the debt? Check one. Image: Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |

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| Par | t 2: List All of Your NONPRIORI | TY Un | secured Claim | S | |
| | Do any creditors have nonpriority unse ☐ No. You have nothing to report in this ☑ Yes | | | | |
| r ii | nonpriority unsecured claim, list the credit | or sepa or holds | rately for each cla | I order of the creditor who holds each claim. If a creditor has im. For each claim listed, identify what type of claim it is. Do no , list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.142 | Gabriel Ifems | | | | Total claim |
| 7.17 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 2,640.00 |
| | 3214 Cloverleaf Ct Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Manvel T | x | 77578-7824 | | |
| | City Si | tate | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | | Unliquidated Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | | | that you did not report as priority claims | |
| | Check if this claim is for a communit | y debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | i |
| | Is the claim subject to offset? | | | | |
| | V No | | | | |
| | | | | | 070.00 |
| 4.14 | Gaurav Aggarwal | | | Last 4 digits of account number | <u>\$679.00</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 7525 Tree Ln | | | _ | |
| | Number Street Apt. 325 H | | | As of the date you file, the claim is: Check all that apply. | |
| | | | | | |
| | | VI | 53717-2066 ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | laic | 211 0000 | Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | that you did not report as priority claims | |
| | Check if this claim is for a communit | y debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | i |
| | Is the claim subject to offset? | | | | |
| | No | | | | |
| 4 4 4 | Yes | | | | |
| 4.14 | Gaurav Panwar | | | Last 4 digits of account number | _{\$} 1,244.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | Ψ |
| | 18660 N. Cave Creek Rd | | | | |
| | Number Street Apt 203 | | | As of the date you file, the claim is: Check all that apply. | |
| | | λZ | 85024-4609 | Contingent | |
| | City S Who incurred the debt? Check one. | state | ZIP Code | Unliquidated | |
| | Debtor 1 only | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a communit | y debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | ✓ No | | | | |
| | Yes | | | | |

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| | | | . | 79 of 221 | |
| Par | rt 2: List All of Your NO | NPRIORITY Ur | nsecured Claims | | |
| [| Do any creditors have nonpr No. You have nothing to re Yes | - | | u? e court with your other schedules. | |
| ri | nonpriority unsecured claim, lis | t the creditor sepa | arately for each clair | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4 1 4 | Glen Stansberry | | | | Total claim |
| 4.14 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 690.10 |
| | 534 Kansas St Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Lawrence City Who incurred the debt? Check | KS State | 66046-4822 ZIP Code | Contingent Unliquidated | |
| | Debtor 1 only Debtor 2 only Debtor 2 only | k one. | | Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors an Check if this claim is for a Is the claim subject to offset | a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.14 | Yes | | | | _{\$} 617.55 |
| <u> </u> | <u> </u> | | | Last 4 digits of account number - When was the debt incurred? | \$ <u>017.00</u> |
| | Nonpriority Creditor's Name 1613 Parkway Dr | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Rohnert Park | CA | 94928-4733 | | |
| | City Who incurred the debt? Chec | State | ZIP Code | Unliquidated | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors an | d another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | i |
| | Is the claim subject to offset | ? | | | |
| 4.14 | Gregory Young | | | Last 4 digits of account number | \$ <u>280.00</u> |
| | Nonpriority Creditor's Name 56 E 8th Ave Number Street | | | When was the debt incurred? | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Gloversville | NY | 12078-2236 | Contingent | |
| | City Who incurred the debt? Chec | State k one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors an | d another | | Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a | • | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | ; |
| | Is the claim subject to offset | ? | | Other. Specify The Plastic Merchant | |

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| Par | t 2: List All of Your NONPRI | ORITY U | nsecured Claims | | |
| | Do any creditors have nonpriority No. You have nothing to report in Yes | | • • | e court with your other schedules. | |
| r ii | nonpriority unsecured claim, list the c | reditor sep | parately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.14 | Hanlong Wang | | | | Total claim |
| 4.14 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 720.00 |
| | 2715 Alma St Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Palo Alto City Who incurred the debt? Check one. | CA State | 94306-2305 ZIP Code | Contingent | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | | Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and anoth Check if this claim is for a comr Is the claim subject to offset? | | t | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4 1 4 | Ves Harshit Patel | | | | \$301.00 |
| 4.14 | | | | Last 4 digits of account number When was the debt incurred? | \$ <u>301.00</u> |
| | Nonpriority Creditor's Name 4010 Griffin Trail Way Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | · | | | | |
| | Cumming City | GA State | 30041-3202 ZIP Code | | |
| | Who incurred the debt? Check one. | State | | Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and anoth | ier | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a comr | nunity debt | t | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| 4.15(| Harsh Shah | | | Last 4 digits of account number | _{\$} 2,278.00 |
| | Nonpriority Creditor's Name 1Hermann Park Ct | | | When was the debt incurred? | |
| | Number Street Apt 351 | | | As of the date you file, the claim is: Check all that apply. | |
| | Houston | ТХ | 77021-2288 | | |
| | City Who incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and anoth | ner | | Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a comr | nunity deb | t | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |

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| Par | t 2: | List All of Your NONPRIOR | RITY Uns | 0 | | |
| [| _ | ny creditors have nonpriority un lo. You have nothing to report in th ′es | | • • | | |
| ri | nonpi ncluc | riority unsecured claim, list the cred | ditor separ ditor holds | rately for each claim. | rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not at the other creditors in Part 3.If you have more than three no | t list claims already |
| | | ath an Aslance | | | | Total claim |
| 4.15 | - | eather Adams priority Creditor's Name | | | Last 4 digits of account number | _{\$} 150.37 |
| | | 348 Apline Cove Dr | | | When was the debt incurred? | |
| | Num | ber Street | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Alp City | pine | UT State | ZIP Code | Contingent | |
| | , | o incurred the debt? Check one. | olulo | 2 | Unliquidated | |
| | | Debtor 1 only | | | | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ~ | he claim subject to offset? No Yes | | | | |
| 4.15 | | nry Truong | | | Last 4 digits of account number | \$ <u>300.05</u> |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | | 0 W San Marcos Blvd | | | | |
| | Num | nber Street it 150 | | | As of the date you file, the claim is: Check all that apply. | |
| | Sa | n Marcos | CA | 92069-5640 | Contingent | |
| | City | | State | ZIP Code | | |
| | _ | o incurred the debt? Check one. Debtor 1 only | | | | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | _ | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ~ | he claim subject to offset? No Yes | | | | |
| 4.15 | | roki Watarai | | | Last 4 digits of account number | \$2,439.05 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | _φ <u>-</u> ,-του.ου |
| | 83 | Woodland Park Dr | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Te | enafly | NJ | 07670-3029 | | |
| | City | | State | ZIP Code | | |
| | _ | Debtor 1 only | | | Disputed | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls ti ✔ | he claim subject to offset? No | | | Other. Specify The Plastic Merchant | |
| | | Yes | | | | |

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| Par | t 2: List All of Your NONPRIORITY U | Insecured Claims | | |
| [| Do any creditors have nonpriority unsecure ☐ No. You have nothing to report in this part. Yes | | | |
| ri | nonpriority unsecured claim, list the creditor se | parately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.10 | Hrvoje Santic | | | Total claim |
| 4.15 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 240.00 |
| | 3213 River Park Ln S | | When was the debt incurred? | ۴ |
| | Number Street | | | |
| | Apt 1226 | | As of the date you file, the claim is: Check all that apply. | |
| | Fort Worth TX | 76116-1127 | | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community deb | ot | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | V No | | | |
| 4.15 | U Yes Hunter Threadgill | | | _{\$} 420.05 |
| 7.13 | | | Last 4 digits of account number When was the debt incurred? | <u></u> |
| | Nonpriority Creditor's Name 2719 6th Ave | | | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Tuscaloosa AL | 35401-5805 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community deb | ot | ✓ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | | | | |
| 4.15 | lgor Khislavsky | | Last 4 digits of account number | _{\$} 474.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | φ |
| | 68 Pheasant Landing Rd | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Needham MA | 02492-1000 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | □ Check if this claim is for a community det | ot | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | V No | | | |
| 1 | Yes | | | |

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| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| I | Do any creditors have nonpriority unsecured o No. You have nothing to report in this part. Su ✓ Yes | | | |
| i | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has a. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.15 | Irina Krasnikova | | | Total claim |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 436.70 |
| | 3140 Oak Rd Number Street | | When was the debt incurred? | |
| | Apt 407 | | | |
| | Walnut Creek CA | 94597-7791 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | • | | Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | Vo Yes | | | |
| 4.15 | | | | _{\$} 120.00 |
| 4.13 | | | Last 4 digits of account number | \$120.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 1024 Brunes Blvd | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | | | |
| | Brownsburg IN City State | 46112-7983 ZIP Code | | |
| | Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Cother. Specify The Plastic Merchant | |
| | | | | |
| | Yes | | | |
| 4.15 | Jackson Gor | | Last 4 digits of account number | |
| | | | When was the debt incurred? | \$ <u>200.00</u> |
| | Nonpriority Creditor's Name | | | |
| | 1083 Melrose Ave Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Alameda CA | 94502-7066 | | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Other. Specify | |
| | V No | | | |
| | Yes | | | |

| Debt | or 1 | Caster Debc | 1 File | ed 10/03/19 | _Entered 10/0 <u>3/19 17 ເສລີ,42 Main Docu</u> 4 of 221 | iment |
|------|----------------|-----------------------------------------------------------------------------------|----------------------------|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | t 2: | List All of Your NONPRIOR | RITY Uns | 0 | | |
| [| | ny creditors have nonpriority una lo. You have nothing to report in thi res | | | | |
| r | nonpr ncluc | riority unsecured claim, list the cred | ditor separ ditor holds | ately for each claim. | rder of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.16 | | ckson Peterson priority Creditor's Name | | | Last 4 digits of account number | _{\$} 172.00 |
| | | 10 Old Chapel Hill Rd | | | When was the debt incurred? | Ψ |
| | Num | ber Street | | | | |
| | Apt | t 437 | | | As of the date you file, the claim is: Check all that apply. | |
| | - | rham | NC | 27707-9102 | _ | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | _ | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | nitv debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | inty doot | | Other. Specify The Plastic Merchant | |
| | ~ I | • | | | | |
| 4.16 | | cky Lau | | | Last 4 digits of account number | _{\$} 354.00 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | | 9 Hovey Ave | | | | |
| | Num | nber Street | | · · · · · · · · · · · · · · · · · · · | As of the date you file, the claim is: Check all that apply. | |
| | | | | | - | |
| | | n Gabriel | CA | 91776-3206 ZIP Code | Contingent Unliquidated | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | - 14 | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commun | nity debt | | ✓ Other. Specify The Plastic Merchant | |
| | | he claim subject to offset? | | | | |
| | | Yes | | | | |
| 4.16 | Jao | cob Etscheid | | | Last 4 digits of account number | _{\$} 118.50 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | | 06 9th St. | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | las | salle | IL | 61301-1973 | | |
| | City | | State | ZIP Code | Contingent | |
| | _ | to incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ls th | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | | | | | |
| | <u> </u> | Yes | | | | |

| Debt | or 1 | Caline Middle Name | 1 File | ed 10/03/19 | _Entered 10/0 <u>3/19៣17;រ32;;</u> 42 Main Docu 5 of 221 | ument |
|------|------------|--------------------------------------------------------------------------------|----------------------------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| Par | 't 2: | List All of Your NONPRIOR | RITY Uns | . | 5 61 221 | |
| [| _ | ny creditors have nonpriority un o. You have nothing to report in thi es | | • • | | |
| r | nonpr | riority unsecured claim, list the cred | ditor separ litor holds | ately for each claim. | rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do no st the other creditors in Part 3.If you have more than three no | t list claims already |
| | | | | | | Total claim |
| 4.16 | | cob Levy priority Creditor's Name | | | Last 4 digits of account number | _{\$} 190.00 |
| | | Montecito Ct | | | When was the debt incurred? | φ |
| | Num | ber Street | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | rra Madre | CA | 91024-1972 | _ | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | _ | b incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ls th | ne claim subject to offset? | | | Uther. Specify The Hastie Weichant | |
| | / I | | | | | |
| 4.16 | | Yes nes Austin | | | | \$22,325.00 |
| 4.10 | - | | | | Last 4 digits of account number When was the debt incurred? | \$_22,020.00 |
| | | oriority Creditor's Name Sierra St. | | | | |
| | Num | | | | As of the date you file the claim is Check all that apply | |
| | Apt | t E103 | | | As of the date you file, the claim is: Check all that apply. | |
| | | n Francisco | CA | 94107-2868 | Contingent Unliquidated | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | Disputed | |
| | _ | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | ne claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | • | | | | |
| | | Yes | | | | |
| 4.16 | Jar | mes Duchnowski | | | Last 4 digits of account number | _{\$} 275.00 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | 720 Num | 06 Thannas Way | | | | |
| | Num | Juli Slitet | | | As of the date you file, the claim is: Check all that apply. | |
| | Au | stin | ТΧ | 78744-5020 | | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | Unliquidated | |
| | | Debtor 1 only | | | | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | | aitu dabt | | that you did not report as priority claims | |
| | | Check if this claim is for a commu | my debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is th | ne claim subject to offset? No | | | | |
| | | Yes | | | | |

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| Dor | | • | 0001221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | ecured Claims | | |
| | No. You have nothing to report in this part. Sut ✓ Yes | • • | | |
| ri | nonpriority unsecured claim, list the creditor separa | ately for each claim | order of the creditor who holds each claim. If a creditor has b. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.10 | James Durkin | | | Total claim |
| 4.16 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 1,614.00 |
| | 6704 N. Ionia Ave Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago IL City State Who incurred the debt? Check one. | 60646-2837 ZIP Code | Contingent Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another Check if this claim is for a community debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? No Yes James Fulmer | | | 6 204 10 |
| 4.16 | James Fuiner | | Last 4 digits of account number | <u>\$6,304.10</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 11988 Barrel Cooper Ct Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Reston VA | 20191-2319 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt Is the claim subject to offset? | | Debts to pension of professioning plans, and other similar debts Other. Specify The Plastic Merchant | |
| | No Yes | | | |
| 4.16 | James O'Dwyer | | Last 4 digits of account number | \$ <u>120.00</u> |
| | Nonpriority Creditor's Name 2255 Sheridan Blvd Number Street | | When was the debt incurred? | |
| | Unit C PMB 321 | | As of the date you file, the claim is: Check all that apply. | |
| | Edgewater CO | 80214-1313 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts The Plactic Marchant | |
| | Is the claim subject to offset? Image: No Image: Yes | | Decision of pronosinaling plans, and other similar decis Other. Specify The Plastic Merchant | |

| Debto | or 1 Casten and Cast Name Middle Name Last Name | ed 10/03/19 | | ument |
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| Der | | 0 | 37 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| Γ | Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Su | • • | | |
| r ii | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has a. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.10 | James Thompson | | | Total claim |
| 4.16 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 645.00 |
| | 368 7th Ave Number Street | | When was the debt incurred? | · |
| | Apt 1 | | As of the date you file, the claim is: Check all that apply | |
| | San Fransico CA City State | 94118-2381 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt Is the claim subject to offset? No Yes | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.17(| Jane Schwalm | | Last 4 digits of account number | \$ <u>2,090.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 213 Meadowbrook Rd Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Staunton VA City State Who incurred the debt? Check one. Debtor 1 only Debtor 2 only | 24401-3561 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| 4.17 [.] | Jason Dietrich | | Last 4 digits of account number | \$ <u>2,971.50</u> |
| | Nonpriority Creditor's Name 2310 Quiet Place Dr Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Walnut Creek CA City State Who incurred the debt? Check one. | 94598-4333 ZIP Code | Contingent Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community debt Is the claim subject to offset? | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ✓ No ✓ Yes | | | |

| Deb | tor 1 | First Name Middle Name | c 1 Fil | ed 10/03/19 | _Entered 10/0 <u>3/19 17 ເສລີ,</u> 42 Main Docເ 8 of 221 | ument |
|------|-------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Pa | rt 2: | List All of Your NONPRIC | ORITY Un | 0 | | |
| | _ | ny creditors have nonpriority u No. You have nothing to report in Yes | | • • | | |
| | nonp incluc | riority unsecured claim, list the ci | reditor separ editor holds | rately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | t list claims already |
| | L 1 | | | | | Total claim |
| 4.17 | - | son Rubinstein priority Creditor's Name | | | Last 4 digits of account number | _{\$} 3,904.20 |
| | | 68 Lindale St | | | When was the debt incurred? | |
| | City Whe C | | | 11793-2309 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.17 | (Jef | Yes ff Perkins priority Creditor's Name | | | Last 4 digits of account number When was the debt incurred? | \$ <u>1,653.00</u> |
| | 560 Num | 05 Central Ave | | | As of the data you file the algins in Oberly slithet each. | |
| | City Wh | to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a comm he claim subject to offset? | | 91902-2821 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.17 | í Je | ffrey Goetz | | | Last 4 digits of account number | \$80.00 |
| | 10 Num We City Wh | priority Creditor's Name 11 Lawler Rd 11 Lawler Rd 15 Street est Hartford 16 incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | CT State | 06117-2620 ZIP Code | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce | |
| | □ Is ti ✓ | Check if this claim is for a comm he claim subject to offset? | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

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| Par | | 0 | 59 01 221 | |
| Fai | | secured claims | | |
| C | Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su ☐ Yes | • • | | |
| n ir | onpriority unsecured claim, list the creditor sepa | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| | leftrou Cum | | | Total claim |
| .17 | Jeffrey Gunn Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 1,150.00 |
| | 124 South Ave SE Number Street | | When was the debt incurred? | Ψ |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Atlanta GA City State | 30315-1506 ZIP Code | | |
| | Who incurred the debt? Check one. | | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | | Chter. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | Ves | | | |
| .17 | Jennifer Branson | | Last 4 digits of account number | \$170.00 |
| <u> </u> | | | When was the debt incurred? | * |
| | Nonpriority Creditor's Name 1825 Honey Mesquite In | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Flower Mound TX | 75028-8221 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Cother. Specify The Plastic Merchant | |
| | ✓ No Yes | | | |
| 17 | Jennifer Schroeder | | Last 4 digits of account number | _{\$} 652.05 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 2040 W Belmont Ave | | | |
| | Apt 301 | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago IL | 60618-6486 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Student loans | |
| | _ | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Decision of points and grant and other similar decision Other. Specify The Plastic Merchant | |
| | Yes | | | |

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| | | • | 90 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| I | Do any creditors have nonpriority unsecured c No. You have nothing to report in this part. Su ✓ Yes | | | |
| i i | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has b. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.17 | Jen Stark | | | Total claim |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 1,320.50 |
| | 3631 N. Halsted St Number Street | | When was the debt incurred? | |
| | Apt 512 | | | |
| | Chicago IL | 60613-4598 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | ✓ No | | | |
| | Yes | | | |
| 4.17 | Jeremy Bass | | Last 4 digits of account number | <u>\$</u> 184.50 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 6201 Twin Oaks Cir | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Dallas TX | 75040 5045 | | |
| | Dallas TX City State | 75240-5345 ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | _ | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | | ✓ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | ✓ No ☐ Yes | | | |
| 4.18 | | | | |
| - . 10 | Jeremy Fox | | Last 4 digits of account number | \$ <u>433.80</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 1514 Walnut St | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | South Milwaukee WI | 53172-1547 | | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community debt | | that you did not report as priority claims | |
| | • | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | | | | |

| Debt | or 1 Caster and Cast Cast Name Middle Name Last Name | | _Entered 10/0 <u>3/19 17;32 42 Main Docu</u> 91 of 221 | iment |
|-------------------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Dev | | • | 1 01 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | ecured Claims | | |
| [| Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su ✓ Yes | • • | | |
| r i | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.18 ⁻ | · Jody Medford | | | Total claim |
| 4.10 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 318.91 |
| | 3735 Lakewood Dr Number Street | | When was the debt incurred? | * |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Waterford MI City State | 48329-3949 ZIP Code | Contingent | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only | | Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | □ Check if this claim is for a community debt Is the claim subject to offset? ✓ No ○ Yes | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.18 | | | Last 4 digits of account number | \$ <u>410.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 11800 SE 68th PI | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Bellevue WA | 98006-6420 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt Is the claim subject to offset? | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ✓ No ☐ Yes | | | |
| 4.18 | John Farley | | Last 4 digits of account number | <u>\$124.50</u> |
| | Nonpriority Creditor's Name 2144 N. Franklin St Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Denver CO | 80205-5359 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |

| Debte | or 1 Castena Caste | Last Nam | | Entered 10/Q3(19)17(#32::42 Main Docu の2 cf 221 | ument |
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| | | | • | 92 of 221 | |
| Par | t 2: List All of Your NONPRIORI | IY Un | secured Claims | S | |
| [| Do any creditors have nonpriority unse No. You have nothing to report in this Yes | | | | |
| r | nonpriority unsecured claim, list the credite | or sepa or holds | rately for each cla | I order of the creditor who holds each claim. If a creditor has im. For each claim listed, identify what type of claim it is. Do not , list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.18 | John King | | | | Total claim |
| | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 875.00 |
| | 3211 Hemlock Ave Number Street | | | When was the debt incurred? | |
| | | | | - | |
| | Austin T | X | 78722-1630 | As of the date you file, the claim is: Check all that apply. | |
| | City St | ate | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | | Unliquidated Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | | | that you did not report as priority claims | |
| | Check if this claim is for a communit | y debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| | V No | | | | |
| | L Yes | | | | |
| 4.18 | John McDermott | | | Last 4 digits of account number | <u>\$554.65</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 4122 Cottage Wood Trail | | | _ | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | | 00011 1157 | Contingent | |
| | | tate | 32311-4157 ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | luic | | Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community | y debt | | Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| | ✓ No Yes | | | | |
| 4.18 | | | | | |
| 4.10 | John Mostenan | | | Last 4 digits of account number | _{\$} 170.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 118 Riverside Dr | | | _ | |
| | Number Street Apt 8D | | | As of the date you file, the claim is: Check all that apply. | |
| | | IY | 10024-3708 | Contingent | |
| | City S Who incurred the debt? Check one. | tate | ZIP Code | | |
| | Debtor 1 only | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community | y debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | ✓ No | | | | |
| | Yes | | | | |

| Debte | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
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| | | | | 5 | 93 of 221 | |
| Par | t 2: | List All of Your NONPRIOF | RITY Uns | secured Claims | | |
| [| | ny creditors have nonpriority un o. You have nothing to report in thi es | | | | |
| ri | nonpri nclud | iority unsecured claim, list the cred | litor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.18 | Joh | n Pilafas | | | | Total claim |
| 4.10 | | riority Creditor's Name | | | Last 4 digits of account number | _{\$} 31,890.95 |
| | | S Villa Ave | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Villa City | a Park | IL State | 60181-3366 ZIP Code | Contingent Unliquidated | |
| | _ | b incurred the debt? Check one. | | | | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ✓ N | Yes | | | | |
| 4.18 | Jon | athan Dittmar | | | Last 4 digits of account number | <u>\$</u> 2,916.50 |
| | Nonp | priority Creditor's Name | | | When was the debt incurred? | |
| | | 5 Mountain Magnolia Dr | | | | |
| | Numb | ber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Rive | erview | FL | 33578-8676 | Contingent | |
| | City | | State | ZIP Code | Unliquidated | |
| | | Discurred the debt? Check one. Debtor 1 only | | | | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | LA | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | r N | ne claim subject to offset? No ⁄es | | | | |
| 4.18 | Jon | nathan Wang | | | Last 4 digits of account number | \$ <u>246.00</u> |
| | 225 | priority Creditor's Name 5 E 36th St | | | When was the debt incurred? | |
| | Numb Apt | | | | As of the date you file, the claim is: Check all that apply. | |
| | | w York | NY | 10016-3666 | Contingent | |
| | City Who | o incurred the debt? Check one. | State | ZIP Code | | |
| | v c | Debtor 1 only | | | | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | | مامام الم | | that you did not report as priority claims | |
| | | Check if this claim is for a commun | nty debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is th | ne claim subject to offset? No | | | | |
| | | Yes | | | | |

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| Der | | • | 94 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| [| Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su ✓ Yes | • • | | |
| i i | nonpriority unsecured claim, list the creditor separ | ately for each clain | order of the creditor who holds each claim. If a creditor has h. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.40 | Jon Nickel-D'Andrea | | | Total claim |
| 4.19 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 1,010.00 |
| | 6758 35th Ave SW Number Street | | When was the debt incurred? | Ψ |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Seattle WA City State Who incurred the debt? Check one. | 98126-3045 ZIP Code | Contingent Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | | Obligations ansing out of a separation agreement of divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | VNO Yes | | | |
| 4.19 | Jordan Lee | | Last 4 digits of account number | <u>\$200.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 392 Christopher Dr Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | San Francisco CA | 94131-1014 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| 4.19 | Joseph Robertson | | Last 4 digits of account number | \$ <u>1,357.00</u> |
| | Nonpriority Creditor's Name 211 Turf Ct | | When was the debt incurred? | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Saint Louis MO | 63119-4531 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |

| Debt | or 1 | Cathena Chestopher Dean First Name Middle Name | C 1 Fil | | _Entered 10/0 <u>3/19 17 ເສລີ</u> ,42 Main Docu 5 of 221 | ument |
|------|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| Par | t 2: | List All of Your NONPRI | ORITY Un | • | 0 01 221 | |
| [| | by creditors have nonpriority to b. You have nothing to report in es | | • • | ? court with your other schedules. | |
| ri | nonpri nclud | iority unsecured claim, list the c | reditor sepa reditor holds | rately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.40 | | hua Schuman | | | | Total claim |
| 4.19 | | riority Creditor's Name | | | Last 4 digits of account number | <u>_117.00</u> |
| | | 7 Logmill Ln | | | When was the debt incurred? | |
| | Numb | er Street | | | | |
| | City Who City City City City City City City City | thersburg o incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim is for a comm the claim subject to offset? No | | 20879-3263 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.19 | Jud | y Tonnu | | | Last 4 digits of account number | <u>\$166.00</u> |
| | | riority Creditor's Name | | | When was the debt incurred? | |
| | 545 | 3 Plumeria Ln | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | press | CA | 90630-7912 | Contingent | |
| | | incurred the debt? Check one. | State | ZIP Code | Disputed | |
| | _ | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and anoth | er | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a comn | nunity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls th | e claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | lo ⁄es | | | | |
| 4.19 | | tin Pope | | | Last 4 digits of account number | |
| | | riority Creditor's Name | | | When was the debt incurred? | <u>\$1,303.40</u> |
| | | 1 Esperanza Xing | | | | |
| | Num | ber Street 244 | | | As of the date you file, the claim is: Check all that apply. | |
| | Aus | | ТХ | 78758-7863 | Contingent | |
| | City | o incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and anoth | er | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims | |
| | | Check if this claim is for a comm | nunity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ls th ✔ ⊾ | e claim subject to offset? | | | | |
| | | /es | | | | |

| Debt | or 1 | First Name Middle Name | C 1 Fil | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | iment |
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| | | | | 9 | 96 of 221 | |
| Par | 't 2: | List All of Your NONPRIC | DRITY Un | secured Claims | | |
| [| | ny creditors have nonpriority u No. You have nothing to report in t Yes | | | J? e court with your other schedules. | |
| ri | nonp | priority unsecured claim, list the cr | editor sepa editor holds | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.19 | (Ka | ui-Wen Hsueh | | | | Total claim |
| 4.13 | • | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 124.50 |
| | | 0 W. 41st St. | | | When was the debt incurred? | * |
| | Ap | ot 8L | | | | |
| | | w York | NY | 10036-6829 | As of the date you file, the claim is: Check all that apply. | |
| | | | State | ZIP Code | | |
| | | o incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and anothe | er | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a comm | unity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | | unity debt | | Cother. Specify The Plastic Merchant | |
| | ~ | he claim subject to offset? No Yes | | | | |
| 4.19 | Ka | Ilpesh Nandu | | | Last 4 digits of account number | <u></u> \$120.00 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | | 5 Goodwin Dr | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Во | lingbrook | IL | 60440-2079 | Contingent | |
| | City | · · · · · · · · · · · · · · · · · · · | State | ZIP Code | Unliquidated | |
| | | to incurred the debt? Check one. Debtor 1 only | | | | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and anothe | r | | that you did not report as priority claims | |
| | | Check if this claim is for a comm | unity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls ti | he claim subject to offset? | - | | Other. Specify The Plastic Merchant | |
| | ~ | • | | | | |
| | | Yes | | | | |
| 4.19 | Ka | an Fu | | | Last 4 digits of account number | \$ <u>760.00</u> |
| | | npriority Creditor's Name 300 Beaumont Dr | | | When was the debt incurred? | |
| | | nber Street ot 811D | | | As of the date you file, the claim is: Check all that apply. | |
| | No | orman | OK | 73071-2288 | Contingent | |
| | City Wh | no incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and anothe | er | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a comm | unity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ~ | | | | Other. Specify The Plastic Merchant | |
| | | Yes | | | | |

| Debto | or 1 Caste And Cast Name Middle Name Last Name | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
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| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| | Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su ☑ Yes | | | |
| r ii | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has a. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.19 | Karen Reeves | | | Total claim |
| 4.13: | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 1,910.00 |
| | 11816 Soft Rush Ter Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Lakewood Ranch FL | 34202-2086 | | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | No | | | |
| | Ves Ves | | | 005.00 |
| 4.20(| Karl Kristiansen | | Last 4 digits of account number | <u>\$285.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 8914 Stickney Ave | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | | | |
| | Wauwatosa WI City State | 53226-2737 ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | | ☑ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | Vo Ves | | | |
| 4.20 | | | | |
| 7.20 | Karl Swank | | Last 4 digits of account number | \$ <u>247.09</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 7630 Deercreek Dr | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Columbus OH | 43085-4749 | · · · · · · · · · · · · · · · · · · | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community debt | | that you did not report as priority claims | |
| | • | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | Ves | | | |
| | | | | |

| Debt | or 1 | Catena Catera First Name Mi | BOR DEBOC | 1 File | | _Entered 10/0 <u>3/19 17 ເສລີ,42 Main Doc</u> u 18 of 221 | iment |
|--------|----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|---------------------------|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| Par | 't 2: | List All of You | r NONPRIOR | ITY Uns | ecured Claims | | |
| [| _ | ny creditors have n lo. You have nothing les | | | • • | ? court with your other schedules. | |
| i i | nonpr | riority unsecured clai | m, list the cred than one cred | litor separ itor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.00 | | rthikeyan Ramasamy | , | | | | Total claim |
| 4.20 | | priority Creditor's Name | | | | Last 4 digits of account number | <u>\$</u> 170.00 |
| | | 330 N. 79th Ave | | | | When was the debt incurred? | |
| | Numb Apt | ber Street t 2173 | | | | | |
| | | | Check one. only ors and another of for a commun | AZ State | 85308-8365 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.20 | Kai | Yes ustubh Rudrawar | | | | Last 4 digits of account number When was the debt incurred? | \$ <u>100.05</u> |
| | 143 Num Sar City Who I I I I I I I I I I I I I I I I I I | nta Clara o incurred the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 of At least one of the debto Check if this claim is ne claim subject to o | only ors and another for a commun | CA State | 95050-4603 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | No Yes | | | | | |
| 4.20 | Non | nny Oyama priority Creditor's Name 39 W Eastwood Ave | | | | Last 4 digits of account number When was the debt incurred? | \$ <u>560.00</u> |
| | | | only | IL State | 60625-4441 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce | |
| | ls th ✔ | Check if this claim is h e claim subject to o No Yes | | iity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

| Debt | or 1 Caster 2 Chose Por Debc 2 | L Fil | | _Entered 10/0 <u>3/1917;:32;;42 Main Docu</u> 99 of 221 | ument |
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| Dee | | | • | 99 01 221 | |
| Par | t 2: List All of Your NONPRIOR | ITY Un | secured Claims | | |
| 1 | Do any creditors have nonpriority uns No. You have nothing to report in this Yes | | | | |
| i i | nonpriority unsecured claim, list the credi | tor sepai tor holds | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.20 | Kimberly Isaacs | | | | Total claim |
| 4.20 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 170.00 |
| | 4695 Watson Dr | | | When was the debt incurred? | |
| | Number Street | | · · · · · · · · · · · · · · · · · · · | | |
| | | | | As of the date you file, the claim is Check all that apply | |
| | Doylestown | PA | 18902-1840 | As of the date you file, the claim is: Check all that apply. | |
| | City | State | ZIP Code | | |
| | Who incurred the debt? Check one. | | | Unliquidated Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | | |
| | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a communi | ity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | V Other. Specify The Plastic Merchant | |
| | V No | | | | |
| | Yes | | | | |
| 4.20 | Kristina Wojtowecz | | | Last 4 digits of account number | <u>\$950.00</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 35 Gage Ave | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | | | | |
| | | NY State | 12801-2917 ZIP Code | | |
| | Who incurred the debt? Check one. | Sidle | ZIF Code | | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a communi | ty debt | | ✓ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| | ✓ No □ Yes | | | | |
| 4.20 | | | | | |
| 1.20 | Kungen Lin | | | Last 4 digits of account number | <u>\$1,279.00</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 2410 Grant Circle | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Ames | IA | 50010-3972 | Contingent | |
| | City | State | ZIP Code | | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a communi | ity dabt | | that you did not report as priority claims | |
| | | iy uebi | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | Is the claim subject to offset? | | | | |
| | Yes | | | | |

| Debt | | File | ed 10/03/19 | | ument |
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| | | | • | .00 of 221 | |
| Pai | rt 2: List All of Your NONPRIORIT | Y Uns | ecured Claims | | |
| | Do any creditors have nonpriority unsec No. You have nothing to report in this part Yes | | | | |
| i | nonpriority unsecured claim, list the creditor | r separa r holds a | ately for each clain | order of the creditor who holds each claim. If a creditor han n. For each claim listed, identify what type of claim it is. Do no list the other creditors in Part 3.If you have more than three not | t list claims already |
| 4.20 | Kyle Hartley | | | | Total claim |
| 4.20 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 601.05 |
| | 15308 Cadoz Dr Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Austin TX | (| 78728-3521 | _ | |
| | City Stat | te | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | 3 |
| | Check if this claim is for a community | debt | | ✓ Other. Specify The Plastic Merchant | , |
| | Is the claim subject to offset? | | | | |
| | V No | | | | |
| 4.20 | | | | | s 300.00 |
| 4.20 | | | | Last 4 digits of account number When was the debt incurred? | \$_000.00 |
| | Nonpriority Creditor's Name 1701 N. Kent St | | | | |
| | Number Street | | ······ | | |
| | Apt 1003 | | | As of the date you file, the claim is: Check all that apply. | |
| | Arlington VA | 4 | 22209-2108 | Contingent | |
| | City Sta | | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community | debt | | Debts to pension or profit-sharing plans, and other similar debts | \$ |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | | | | |
| | Yes | | | | |
| 4.21 | Leandro Taveras | | | Last 4 digits of account number | . 200 00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | \$ <u>200.00</u> |
| | 510 Bogert Rd | | | | |
| | Number Street | | | | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | River Edge NJ | | 07661-2133 | Contingent | |
| | City Sta Who incurred the debt? Check one. | ale | ZIP Code | | |
| | Debtor 1 only | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Student loans Obligations out of a constration agreement or diverses | |
| | | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community | debt | | Debts to pension or profit-sharing plans, and other similar debts | \$ |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | V No | | | | |
| 1 | Yes | | | | |

| Debt | or 1 | Caline Middle Name | DC 1 Fil Last Nam | ed 10/03/19 | _Entered 10/0 <u>3/19 17 ເສລີ, 42 Main Docເ</u> 01 of 221 | ument |
|------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | t 2: | List All of Your NONPRI | ORITY Un | 0 | | |
| [| | ny creditors have nonpriority lo. You have nothing to report in es | | • • | ? court with your other schedules. | |
| ri | nonpi ncluc | riority unsecured claim, list the c | reditor sepa reditor holds | rately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.04 | | ela Senthil Nathan | | | | Total claim |
| 4.21 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 404.50 |
| | | 07 Boylston Ave | | | When was the debt incurred? | |
| | Numl Apt | ber Street t 209 | | | | |
| | City Who | attle o incurred the debt? Check one. Debtor 1 only | WA State | 98122-2204 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: | |
| | □ ↓ □ ↓ Is th ☑ ↓ | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim is for a comm he claim subject to offset? No Yes | | | Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.21 | | onardo Mocci | | | Last 4 digits of account number | \$ <u>852.00</u> |
| 4.21 | | it 1 ermore o incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anoth Check if this claim is for a comm he claim subject to offset? No Yes | | 94551-6420 ZIP Code | When was the debt incurred? | |
| 4.21 | | gan Robinson | | | Last 4 digits of account number | <u>\$1,408.00</u> |
| | 293 Num | | TV | 70702 2410 | When was the debt incurred? | |
| | City Wh | Istin Io incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | TX State | 78702-2419 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | □ / Is th ✓ | At least one of the debtors and anoth Check if this claim is for a comm he claim subject to offset? | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

| Debt | or 1 | First Name Middle Name | 1 Fil | ed 10/03/19 | _Entered 10/0 <u>3/19៣៦7;រ3242 Main Docu</u> D2 of 221 | ument |
|---------|------------|---------------------------------------------------------------------------------|----------------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | 't 2: | List All of Your NONPRIOF | RITY Uns | • | | |
| [| _ | ny creditors have nonpriority une o. You have nothing to report in thi es | | • • | | |
| ri | nonpr | riority unsecured claim, list the cred | ditor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.21 | | gesh Govindan priority Creditor's Name | | | Last 4 digits of account number | _{\$} 948.00 |
| | | 20 W Mission Ln | | | When was the debt incurred? | φ |
| | Num | | | | | |
| | Apt | t 2063 | | | As of the date you file, the claim is: Check all that apply. | |
| | | penix | AZ | 85021-2895 | _ | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | _ | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls th | he claim subject to offset? | - | | Other. Specify The Plastic Merchant | |
| | • | No | | | | |
| | | Yes | | | | |
| 4.21 | IVIA | rio Bianucci | | | Last 4 digits of account number | <u>\$200.00</u> |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | 143 Num | 30 Summit Ave | | | | |
| | | t 309 | | | As of the date you file, the claim is: Check all that apply. | |
| | Sea | attle | WA | 98122-3555 | Contingent | |
| | City | o incurred the debt? Check one. | State | ZIP Code | Unliquidated | |
| | _ | Debtor 1 only | | | Disputed Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | | Student loans | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commur | nity debt | | Other. Specify The Plastic Merchant | |
| | | ne claim subject to offset? | | | | |
| | / 1 | No Yes | | | | |
| 4.21 | Ма | ark Montalette | | | Last 4 digits of account number | |
| | | priority Creditor's Name | | | When was the debt incurred? | \$ <u>360.00</u> |
| | | 00 Dickson Dr | | | | |
| | Num | | | | | |
| | | t 119 | TV | | As of the date you file, the claim is: Check all that apply. | |
| | City | | TX State | ZIP Code | Contingent | |
| | _ | o incurred the debt? Check one. | | | Unliquidated Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commur | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | - | | Other. Specify The Plastic Merchant | |
| | | | | | | |
| | <u> </u> | Yes | | | | |

| Debt | or 1 Cate Store Der Des Der Des Der 1 Fill First Name Middle Name Last Nam | | Entered 10/03/19 17:32:42 Main Docu | ument |
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| | | 0 | 03 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Un | secured Claims | | |
| [| No. You have nothing to report in this part. Su ✓ Yes | | | |
| ri | nonpriority unsecured claim, list the creditor sepa | rately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.21 | Mark Schilling | | | Total claim |
| 4.21 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 120.00 |
| | 209 Woodview Ln Number Street | | When was the debt incurred? | * |
| | | | As of the date you file the slaim is the slaim is the state | |
| | Woostock GA | 30188-6074 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | | Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | V No | | | |
| 4.04 | L Yes Mark Schneider | | | 604 70 |
| 4.21 | Mark Schneider | | Last 4 digits of account number | <u>\$634.70</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 2224 County Road 541 Number Street | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Gardener CO | 81040-9730 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | • | | Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | | | | |
| 4.21 | Marty Garcia | | Last 4 digits of account number | \$ <u>237.00</u> |
| | Nonpriority Creditor's Name 392 State St. | | When was the debt incurred? | |
| | Number Street Apt 101 | | As of the date you file, the claim is: Check all that apply. | |
| | North Haven CT | 06473-3121 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | \square At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts The Deptie Merchant | |
| | Is the claim subject to offset? | | Decision perison of pronesnaming plans, and other similar decision Other. Specify | |
| | ₩ No | | | |
| | Yes | | | |

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| Par | t 2: List All of Your NONPRIORITY Uns | ecured Claims | | |
| | Do any creditors have nonpriority unsecured c No. You have nothing to report in this part. Sul Yes | | | |
| n ir | onpriority unsecured claim, list the creditor separate | ately for each claim | order of the creditor who holds each claim. If a creditor has h. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.22(| Mary Ann Mastri | | | Total claim |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | <u>\$89,994.42</u> |
| | 2400 Yorktown St | | When was the debt incurred? | |
| | Apt. 60 | | As of the date you file, the claim is: Check all that apply | |
| | Houston TX City State | 77056-4534 ZIP Code | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? ✓ No ─ Yes | | Other. Specify The Plastic Merchant | |
| 4.22 [.] | Maryna Danielian | | Last 4 digits of account number | _{\$} 264.00 |
| | | | When was the debt incurred? | * |
| | Nonpriority Creditor's Name 1 Curley Mesquite Cv | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Sunset Valley TX | 78745-2561 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | ✓ No Yes | | | |
| 4.22 | Mats Karlsson | | Last 4 digits of account number | _{\$} 9,671.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 4381 E Killarney St | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Gilbert AZ | 85298-4149 | · · · · · · · · · · · · · · · · · · | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | \square Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? ✓ No | | ✓ Other. Specify The Plastic Merchant | |
| | Yes | | | |

| Debto | or 1 | First Name Middle Name | 1 Fil | ed 10/03/19 | Entered 10/03/19 17:32 42 Main Docu | ument |
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| | | | | • | 05 of 221 | |
| Par | t 2: | List All of Your NONPRIOF | RITY Uns | secured Claims | | |
| | _ | ny creditors have nonpriority unsolo. You have nothing to report in thi Yes | | | | |
| r ii | nonpi ncluc | riority unsecured claim, list the crec | litor sepaı litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.00 | Ma | atthew Ender | | | | Total claim |
| 4.22 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 318.50 |
| | | 00 Beacon St. | | | When was the debt incurred? | • |
| | | t 412 | | | | |
| | | ookline | MA | 02446-2224 | As of the date you file, the claim is: Check all that apply. | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | _ | | | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commur | nity debt | | ☑ Other. Specify The Plastic Merchant | |
| | ~ | he claim subject to offset? No Yes | | | | |
| 4.22 | | atthew Garcia | | | Last 4 digits of account number | \$380.00 |
| | | | | | When was the debt incurred? | Ψ |
| | | priority Creditor's Name 45 Greenwood Ave N | | | | |
| | Num | | | | | |
| | Ap | t 403 | | | As of the date you file, the claim is: Check all that apply. | |
| | Se | attle | WA | 98103-3651 | Contingent | |
| | City | | State | ZIP Code | | |
| | | o incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | • | | Cother. Specify The Plastic Merchant | |
| | v | • | | | | |
| | | Yes | | | | |
| 4.22 | Ma | atthew Gessford | | | Last 4 digits of account number | _{\$} 562.00 |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | | 09 Whiffletree Ln | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Mie | dland | MI | 48642-0002 | _ | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | _ | to incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commur | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | ~ | No | | | | |
| | <u> </u> | Yes | | | | |

| Debt | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | _Entered 10/0 <u>3/19 17;រ32;</u> 42 Main Docu 06 of 221 | iment |
|----------|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | 't 2: | List All of Your NONPRIOR | RITY Uns | 0 | 50 01 221 | |
| | | ny creditors have nonpriority un lo. You have nothing to report in thi es | | 0, | | |
| i | nonpi incluc | riority unsecured claim, list the cred | ditor separ litor holds | ately for each claim | rder of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | Marca Million and | | | | Total claim |
| 4.22 | • | tthew Willman priority Creditor's Name | | | Last 4 digits of account number | _{\$} 474.00 |
| | |) S. Kendall Ave | | | When was the debt incurred? | |
| | Numl | ber Street | | | | |
| | City Who | ependence o incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | MO State | 64056-1733 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce | |
| | Is th | Check if this claim is for a commun he claim subject to offset? No Yes | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | - 100.00 |
| 4.22 | , ivia | x Bareiss | | | Last 4 digits of account number When was the debt incurred? | <u>\$5,190.00</u> |
| | | priority Creditor's Name 3 Ridge Ct. S. | | | | |
| | Num | | | | As of the date you file, the claim is: Check all that apply. | |
| | | | | | - | |
| | He City | ndersonville | TN State | 37075-3721 ZIP Code | Contingent Unliquidated | |
| | Wh | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls th | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | v 1 | | | | | |
| | <u> </u> | Yes | | | | |
| 4.22 | Me | ei Li | | | Last 4 digits of account number | _{\$} 340.00 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | <u> </u> |
| | 512 | 2 W Sycamore Cir | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | uisville | СО | 80027-2260 | | |
| | City | | State | ZIP Code | Contingent | |
| | | o incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | No Yes | | | | |

| Debto | or 1 Caster | ne Middle Name | Last Nam | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
|---------|-------------------------------------|------------------------------------------------------|---------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | | | | • | 107 of 221 | |
| Par | t 2: List Al | I of Your NONPRIO | RITY Un | secured Claims | | |
| Ľ | _ | rs have nonpriority un ve nothing to report in th | | | u? ne court with your other schedules. | |
| n ir | nonpriority unse ncluded in Part | cured claim, list the cre | ditor sepa ditor holds | rately for each clai | order of the creditor who holds each claim. If a creditor has m. For each claim listed, identify what type of claim it is. Do no list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.22 | Melanie Siebe | eneck | | | | Total claim |
| | Nonpriority Credito | r's Name | | | Last 4 digits of account number | _{\$} 257.65 |
| | 711 Colt Dr Number St | reet | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Findlay | | ОН | 45840-6478 | | |
| | City | | State | ZIP Code | | |
| | | the debt? Check one. | | | | |
| | Debtor 1 onl | - | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and | - | | | Student loans | |
| | | of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if th | iis claim is for a commu | nitv debt | | Debts to pension or profit-sharing plans, and other similar debts | ; |
| | | ubject to offset? | ,, | | Other. Specify The Plastic Merchant | |
| | ✓ No ✓ Yes | | | | | |
| 4.23(| Michael Belis | le | | | Last 4 digits of account number | <u>\$</u> 263.05 |
| | Nonpriority Credito | or's Name | | ····· | When was the debt incurred? | |
| | 2547 Anacap | | | | | |
| | Number Si Apt 107 | treet | | | As of the date you file, the claim is: Check all that apply. | |
| | Costa Mesa | | CA | 92626-6824 | Contingent | |
| | City | the debt? Obesite and | State | ZIP Code | Unliquidated | |
| | Debtor 1 onl | the debt? Check one. | | | | |
| | Debtor 2 onl | • | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and | d Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one | of the debtors and another | | | that you did not report as priority claims | |
| | Check if th | is claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | i - |
| | Is the claim su | ubject to offset? | | | Cother. Specify The Plastic Merchant | |
| | ✓ No | | | | | |
| | Yes | | | | | |
| 4.23 | Michael Cher | ng | | | Last 4 digits of account number | _{\$} 3,015.00 |
| | Nonpriority Credito | or's Name | | | When was the debt incurred? | \$ <u>0,010100</u> |
| | 11011 NE 12 | | | | _ | |
| | Number S Unit 502 | treet | | | As of the date you file, the claim is: Check all that apply. | |
| | Bellevue | | WA | 98004-4556 | Contingent | |
| | City Who incurred | the debt? Check one. | State | ZIP Code | | |
| | Debtor 1 onl | | | | Disputed | |
| | Debtor 2 onl | ly | | | Type of NONPRIORITY unsecured claim: | |
| | | d Debtor 2 only | | | Student loans | |
| | At least one | of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if th | is claim is for a commu | nity debt | | Debts to pansion or profit sharing plans, and other similar debts | ; |
| | Is the claim su | ubject to offset? | | | C Other. Specify The Plastic Merchant | |
| | Yes | | | | | |

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|------|-----------------------------------------------------------------------------------------------------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| | | • | 08 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | ecured Claims | | |
| [| Do any creditors have nonpriority unsecured c No. You have nothing to report in this part. Su ✓ Yes | | | |
| ri | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has a. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.23 | Michael Doyle | | | Total claim |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | <u>\$</u> 474.00 |
| | 193 27th St Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | San Francisco CA | 94110-4364 | | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | ☐ Yes | | | |
| 4.23 | Michael Hamilton | | Last 4 digits of account number | <u>\$2,109.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 111 Mildred Ct | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Richmond KY | 40475-1322 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | • | | Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | ✓ No Yes | | | |
| 4.23 | Michael Isoe | | Last 4 digits of account number | _{\$} 594.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | _₽ 007.00 |
| | 2922 W Trade Ave | | | |
| | Number Street | <u></u> | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Miami FL City State | 33133-3764 ZIP Code | | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify | |
| | Yes | | | |

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| | | • | 09 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Un | secured Claims | | |
| [| Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Su ✓ Yes | | | |
| i i | nonpriority unsecured claim, list the creditor sepa | rately for each claim | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.23 | Michael Ladin | | | Total claim |
| 1.20 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 170.00 |
| | 620 Main St. N Number Street | | When was the debt incurred? | |
| | Apt 119 | | | |
| | Stillwater MN | 55082-4094 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is far a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | | Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | ✓ No | | | |
| 4.00 | U Yes Michael Linowski | | | 474.00 |
| 4.23 | Michael Linowski | | Last 4 digits of account number | <u>\$474.30</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 75 Dogwood Lakes Dr | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Hampton GA | 302282876 | | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Uther. Specity The Plastic Merchant | |
| | ✓ No | | | |
| <u> </u> | Yes | | | |
| 4.23 | Michael Pranivong | | Last 4 digits of account number | _{\$} 1,295.45 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | ₽ <u>1,200.70</u> |
| | 4225 Shores Ct | | | |
| | Number Street | · · · · · · · · · · · · · · · · · · · | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Fort Worth TX | 76137-3878 | Contingent | |
| | City State State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community debt | | that you did not report as priority claims | |
| | Is the claim subject to offset? | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ✓ No | | | |
| | Yes | | | |

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|---------|----------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Par | t 2: | List All of Your NONPRIC | ORITY Un | . | | |
| | _ | ny creditors have nonpriority u lo. You have nothing to report in t es | | • • | | |
| r ii | nonpr ncluc | riority unsecured claim, list the cr | editor sepa editor holds | rately for each claim | rder of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.23 | - | chael Prodanovich priority Creditor's Name | | | Last 4 digits of account number | _{\$} 163.50 |
| | | 3 Via Campobello | | | When was the debt incurred? | |
| | Num | ber Street | | | | |
| | | nta Barbara o incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anothe Check if this claim is for a comm | | 93111-1225 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.23 | | h e claim subject to offset? No Yes chelle Shen | | | Last 4 digits of account number | <u>\$</u> 779.00 |
| | | priority Creditor's Name 45 Eddy St | | | When was the debt incurred? | |
| | Num Ant | iber Street t 410 | | | As of the date you file, the claim is: Check all that apply. | |
| | | n Francisco | CA | 94115-4172 | Contingent | |
| | City Who | o incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and anothe | r | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a comm | unity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | - | ne claim subject to offset? No Yes | | | ☑ Other. Specify The Plastic Merchant | |
| 4.24 | Mic | dland Funding LLC | | | Last 4 digits of account number 4751 | _{\$} 9,852.79 |
| | | priority Creditor's Name D Box 51319 | | | When was the debt incurred? | \$ <u>0,002.70</u> |
| | Num | iber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Los | s Angeles | CA | 90051 | | |
| | City Wh | o incurred the debt? Check one. Debtor 1 only | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and anothe | | | Student loans | |
| | _ | At least one of the debtors and anothe Check if this claim is for a comm | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ls th ✔ | he claim subject to offset? | unity dept | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Other. Credit Card Debt | |

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| Par | t 2: List All of Your NONPRIO | RITY Ur | secured Claims | | |
| [| Do any creditors have nonpriority un ☐ No. You have nothing to report in th ☑ Yes | | | | |
| ri | nonpriority unsecured claim, list the cre | ditor sepa | arately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.24 [.] | Mike Skarda | | | | Total claim |
| 4.24 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 258.00 |
| | 117 8th St Number Street | | | When was the debt incurred? | |
| | | | | | |
| | Pacific Grove | CA | 93950-2908 | As of the date you file, the claim is: Check all that apply. | |
| | Who incurred the debt? Check one. | State | | Unliquidated | |
| | Debtor 1 only | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| 4.24 | Mikhall Galbmillion | | | Last 4 digits of account number | <u>\$</u> 600.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 109 S. Broadleigh Rd | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Columbus | ОН | 43209-1903 | Contingent | |
| | City Who incurred the debt? Check one. | State | ZIP Code | | |
| | Debtor 1 only | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Cther. Specify The Plastic Merchant | |
| | ✓ No | | | | |
| - | Yes | | | | |
| 4.24 | Milap Shah | | | Last 4 digits of account number | _{\$} 617.61 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | * |
| | 3476 Woodhaven Rd | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Philadelphia | PA | 19154-1900 | · · · · | |
| | City | State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | ✓ No | | | | |
| 1 | Yes | | | | |

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|------|------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Dee | | 0 | 12 01 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | ecured Claims | | |
| | Do any creditors have nonpriority unsecured c ☐ No. You have nothing to report in this part. Sul ☑ Yes | • • | | |
| i | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has 1. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.24 | ∠ Minhthu Nguyen | | | Total claim |
| 4.24 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 475.00 |
| | 5102 Hillingworth Ct Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Houston TX City State | 77084-7575 ZIP Code | Contingent Unliquidated | |
| | Debtor 1 only | | Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Uner. Specity The Flacke Molenalk | |
| 4.24 | ų Moiz Aly Manji | | Last 4 digits of account number | <u>\$2,848.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 8054 Exchange Dr Number Street | | | |
| | Apt 607 | | As of the date you file, the claim is: Check all that apply. | |
| | Austin TX | 78754-4750 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| 4.24 | Murtuza Cutleriwala | | Last 4 digits of account number | \$ <u>207.00</u> |
| | Nonpriority Creditor's Name 422 Tortola Way Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | San Jose CA | 95133-2342 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | Is the claim subject to offset? | | Uner. Specity | |

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|----------|-------------------------------------------------------------------------------------------------------|------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| Des | | • | | |
| Par | rt 2: List All of Your NONPRIORITY | Unsecured Claims | | |
| | Do any creditors have nonpriority unsecure ☐ No. You have nothing to report in this part. ✔ Yes | | | |
| i | nonpriority unsecured claim, list the creditor se | eparately for each clair olds a particular claim, | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.24 | Nabeel Kirmani | | | Total claim |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | <u></u> \$_4.35 |
| | 4201 Massachusetts Ave NW Number Street | | When was the debt incurred? | |
| | Unit A391 | | | |
| | Washington DC | 20016-4701 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | ☐ Check if this claim is for a community de | bt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | V No | | | |
| <u> </u> | | | | 4 405 00 |
| 4.24 | Nancy Oliphant | | Last 4 digits of account number | <u>\$1,495.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 23303 Sunnyvale Ct | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Valencia CA | 91354-1469 | | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community de | ht | Debts to pension or profit-sharing plans, and other similar debts | |
| | • | DI . | Cther. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | | | | |
| 4.24 | Natalia Cruz | | Last 4 digits of account number | 000.00 |
| | | | When was the debt incurred? | \$ <u>600.00</u> |
| | Nonpriority Creditor's Name 3440 Queensbury Rd | | | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Clarksville TN | 37042-8135 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community de | bt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | V No | | | |
| | Yes | | | |

| Debt | | Filed 1 | | _Entered 10/0 <u>3/1917;;32;;42 Main Docu</u> 14 of 221 | ument |
|------|---------------------------------------------------------------------------------------------|------------------------------|---------------|------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| Pa | t 2: List All of Your NONPRIORIT | Vilneoour | • | 14 01 221 | |
| Pa | t 2: List All of Your NONPRIORITY | runsecun | | | |
| | Do any creditors have nonpriority unsection No. You have nothing to report in this part Yes | | | | |
| i | nonpriority unsecured claim, list the creditor | separately for holds a parti | or each claim | order of the creditor who holds each claim. If a creditor has been been been been been been been been | t list claims already |
| 4.25 | (Nathan Escott | | | | Total claim |
| 0 | Nonpriority Creditor's Name | | | Last 4 digits of account number | <u>\$</u> 200.00 |
| | 72 Walnut Dr W Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Bernville PA | | 6-9523 | | |
| | City Stat | e ZIP C | ode | | |
| | Who incurred the debt? Check one. | | | Disputed | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community | debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | • | | | Cother. Specify The Plastic Merchant | |
| | Is the claim subject to offset? Image: No Image: Yes | | | | |
| 4.25 | · Nethan Roitman | | | Last 4 digits of account number | <u>\$980.50</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 318 Rindge Ave | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Unit 202 | | | _ | |
| | Cambridge MA | 0214 | 0-3149 | | |
| | City Stat Who incurred the debt? Check one. | te ZIP C | Code | Unliquidated Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | | |
| | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a community | debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | Conter. Specify The Plastic Merchant | |
| | No | | | | |
| | Yes | | | | |
| 4.25 | Nicholas Abel | | | Last 4 digits of account number | _{\$} 121.50 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | * |
| | 6369 Meadowview Dr | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Whitestown | 4607 | 5-4449 | | |
| | City Sta | | | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | Disputed | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community | debt | | that you did not report as priority claims | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | | | | |
| | | | | | |

| Debt | or 1 | First Name Middle Name | 1 Fil | ed 10/03/19 | | iment |
|------|--------------|------------------------------------------------------------------------------------|----------------------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| | | | | 0 | 15 of 221 | |
| Par | rt 2 | List All of Your NONPRIOF | RITY Uns | secured Claims | | |
| [| | any creditors have nonpriority una No. You have nothing to report in thi Yes | | | | |
| ri | non inclu | priority unsecured claim, list the cred | litor sepaı litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has b. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| | | inte Manutin | | | | Total claim |
| 4.25 | | lick Martin | | | Last 4 digits of account number | _{\$} 360.00 |
| | | 01 Dey St | | | When was the debt incurred? | * |
| | | mber Street pt 161 | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | arrison | NJ State | 07029-1867 ZIP Code | Contingent | |
| | - | ho incurred the debt? Check one. | State | | | |
| | _ | Debtor 1 only | | | Disputed Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | | Student loans | |
| | | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | - | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commun | nity debt | | Cother. Specify The Plastic Merchant | |
| | _ | the claim subject to offset?] No] Yes | | | | |
| 4.25 | ∠ N | lick Vladislavic | | | Last 4 digits of account number | <u>\$</u> 243.00 |
| | No | onpriority Creditor's Name | | | When was the debt incurred? | |
| | _ | 26 F St | | | | |
| | NU | umber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | R | edwood City | CA | 94063-1040 | Contingent | |
| | Cit | ty /ho incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | _ | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 2 only | | | Student loans | |
| | | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | _] Check if this claim is for a commur | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | the claim subject to offset? | inty debt | | Cother. Specify The Plastic Merchant | |
| | | | | | | |
| | _ | Yes | | | | |
| 4.25 | N | likolas Larsen | | | Last 4 digits of account number | \$ <u>2,849.50</u> |
| | | onpriority Creditor's Name | | | When was the debt incurred? | |
| | _ | 835 Forest Trail Dr umber Street | | ····· | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | F Cit | indlay | OH State | 45840-8204 ZIP Code | Contingent | |
| | W | /ho incurred the debt? Check one. | ciaic | 2.11 00000 | Unliquidated Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | the claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ~ | No | | | | |
| 1 | | Yes | | | | |

| Debte | or 1 Castehan Children Dealoc First Name Middle Name | 1 Fil | ed 10/03/19 | Entered 10/03/19 17 :: 32: 42 Main Docu | ument |
|-------|-------------------------------------------------------------------------------------------------|---------------------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | | | 5 | 16 of 221 | |
| Par | t 2: List All of Your NONPRIOR | KIIY UN | secured Claims | | |
| [| Do any creditors have nonpriority un ☐ No. You have nothing to report in th Yes | | | | |
| ri | nonpriority unsecured claim, list the cred | ditor sepa ditor holds | rately for each claim | order of the creditor who holds each claim. If a creditor has a. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.05 | Nirav Desai | | | | Total claim |
| 4.25 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 2,285.50 |
| | 13305 Kinder Pass Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Austin City | TX State | 78727-3415 ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | | | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | a thu a la la f | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a commun | nity dept | | Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| 4.25 | Nissei Agus | | | Last 4 digits of account number | \$ <u>2,666.50</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 3766 W 176th St Number Street | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Torrance | CA | 90504-3348 | | |
| | City Who incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | - itu daht | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a commu | πτγ αθοτ | | ☑ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| | Yes | | | | |
| 4.25 | Nithya Loganathan | | | Last 4 digits of account number | \$ <u>2,663.00</u> |
| | Nonpriority Creditor's Name 4355 Grimmer Blvd | | | When was the debt incurred? | |
| | Number Street Apt H171 | | | As of the date you file, the claim is: Check all that apply. | |
| | Fremont | CA | 94538-6606 | Contingent | |
| | City Who incurred the debt? Check one. | State | ZIP Code | | |
| | Debtor 1 only | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a commu | nitv debt | | that you did not report as priority claims | |
| | Is the claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ✓ No | | | | |
| | Yes | | | | |

| Debt | or 1 Caster 9 4 5 9 0 P 9 0 C 1 Fill | ed 10/03/19 | | iment |
|------|------------------------------------------------------------------------------------------------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| | | . | 17 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| [| Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su Yes | • • | | |
| i | nonpriority unsecured claim, list the creditor separ | rately for each claim | order of the creditor who holds each claim. If a creditor has b. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.05 | Oliver Carlson | | | Total claim |
| 4.25 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 437.00 |
| | 2739 Stuart St Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Berkeley CA City State | 94705-1302 ZIP Code | Contingent Unliquidated | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations | |
| | At least one of the debtors and another Check if this claim is for a community debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? No Yes Paul Chouy | | | 0.040.00 |
| 4.26 | Paul Chouy | | Last 4 digits of account number | \$ <u>3,040.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 3101 N. J. St Number Street | | | |
| | Apt 42 | | As of the date you file, the claim is: Check all that apply. | |
| | Mcallen TX | 78501 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| 4.26 | Paul Welden | | Last 4 digits of account number | _{\$} 249.00 |
| | Nonpriority Creditor's Name 932 E. Leeward Ln Number Street | | When was the debt incurred? | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Tempe AZ | 85283-1940 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | \Box Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Uther. Specify | |

| Debt | or 1 Caste 12 Caste 1 | 1 Fil | ed 10/03/19 | Entered 10/03/19 17 :: 32: 42 Main Docu | ument |
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| | | | 0 | 18 of 221 | |
| Par | rt 2: List All of Your NONPRIOR | lity Un | secured Claims | | |
| [| Do any creditors have nonpriority uns No. You have nothing to report in this Yes | | | | |
| i i | nonpriority unsecured claim, list the cred | litor sepa itor holds | rately for each claim | order of the creditor who holds each claim. If a creditor has b. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.26 | 2 Phil Evans | | | | Total claim |
| 7.20 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 2,391.50 |
| | 902 Morningside Dr Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Knoxville City Who incurred the debt? Check one. | TN State | 37915-2714 ZIP Code | Contingent Unliquidated | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | | Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and another Check if this claim is for a commun Is the claim subject to offset? | iity debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.00 | V No Yes Phuc Nguyen | | | | . 019 55 |
| 4.26 | | | | Last 4 digits of account number | <u>\$218.55</u> |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 2750 W. Madison Circle Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Anaheim | CA | 92801-4997 | | |
| | City Who incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a commun | ity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| 4.26 | ⁴ Pooja Bhatia | | | Last 4 digits of account number | \$ <u>170.00</u> |
| | Nonpriority Creditor's Name 129 Banwell Ln | | | When was the debt incurred? | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Mount Laurel | NJ | 08054-3341 | | |
| | City Who incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a commun | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |

| Debt | or 1 | First Name Middle Name | BOC 1 F | Filed 10/03/19 | _Entered 10/0 <u>3/19 17 ເສລີ,</u> 42 Main Docເ 19 of 221 | ument |
|------|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Par | t 2: | List All of Your NONF | RIORITY U | • | 19 01 221 | |
| | | | - | • • | ? court with your other schedules. | |
| r | nonpr nclud | iority unsecured claim, list th | e creditor se e creditor hol | parately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.00 | Bro | bekeren Beiendren | | | | Total claim |
| 4.26 | | bakaran Rajendran | | | Last 4 digits of account number | _{\$} 1,555.00 |
| | 231 | 8 Harpoon Ct | | | When was the debt incurred? | |
| | | | | | | |
| | | nrico b incurred the debt? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a | | 23294-4903 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Description of the second secon | |
| 4.00 | Is th | Check if this claim is for a co ne claim subject to offset? No Yes ween Veluswamy | ommunity deb | ot | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | \$240.00 |
| 4.26 | | | | | Last 4 digits of account number When was the debt incurred? | <u>\$240.00</u> |
| | | priority Creditor's Name 660 N. Cave Creek Rd | | | | |
| | Numl Ant | ber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | penix | AZ | 85024-4606 | Contingent | |
| | City Who | o incurred the debt? Check or | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and a | nother | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a co | mmunity deb | t | Debts to pension or profit-sharing plans, and other similar debts | |
| | ~ N | ne claim subject to offset? No Yes | | | C Other. Specify The Plastic Merchant | |
| 4.26 | | evention First LLC | | | Last 4 digits of account number 5PRF | _{\$} 136.72 |
| | | priority Creditor's Name | | | When was the debt incurred? | \$ <u>130.72</u> |
| | 763 Num | 3 S New Ballas Rd, Ste 350 ber Street | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | City Who | int Louis o incurred the debt? Check or Debtor 1 only | MO State | 63141 ZIP Code | Contingent Unliquidated Disputed | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and a | nother | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a co | ommunity deb | ot | Debts to pension or profit-sharing plans, and other similar debts | |
| | • | ne claim subject to offset? No Yes | | | ✓ Other. Specify Weucal Services | |

| Deb | tor 1 | First Name Middle Name | 1 File | | Entered 10/03/10 17:32:42 Main Do | cument |
|------|----------------|----------------------------------------------------------------------------------|----------------------------|-----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
| Ра | rt 2: | List All of Your NONPRIOF | RITY Uns | 0 | | |
| | | ny creditors have nonpriority uns lo. You have nothing to report in thi es | | | | |
| | nonp includ | riority unsecured claim, list the crec | litor separ litor holds | ately for each claim. | rder of the creditor who holds each claim. If a creditor h For each claim listed, identify what type of claim it is. Do r st the other creditors in Part 3.If you have more than three | not list claims already |
| | | | | | | Total claim |
| 4.26 | | ogress West Hospital | | | Last 4 digits of account number 8042 | s 200.00 |
| | | priority Creditor's Name Progress Point Parkway | | | When was the debt incurred? | <u>\$200.00</u> |
| | Num | ° , | | | | |
| | | | | | | |
| | O'F | allon | MO | 63368 | As of the date you file, the claim is: Check all that apply. | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | | o incurred the debt? Check one. | | | | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity dobt | | Debts to pension or profit-sharing plans, and other similar del | ots |
| | | | iity debt | | Other. Specify Medical Services | |
| | | he claim subject to offset? No | | | | |
| | | Yes | | | | |
| 4.26 | (Ps | ych Care Consultants LLC | | | Last 4 digits of account number 6233 | <u>\$</u> 425.00 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | 500 | 00 Cedar Plaza Pkw #350 | | | | |
| | Num | iber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | 6. | int Louis | MO | 63128 | | |
| | City | | State | ZIP Code | Unliquidated | |
| | | o incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other similar del | ots |
| | ls ti | he claim subject to offset? | | | Other. Specify Medical Services | |
| | • | | | | | |
| 4 07 | | Yes | | | | |
| 4.27 | Qi | ao Lin | | | Last 4 digits of account number | _{\$} 3,254.50 |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | 56 Num | 0 Riverside Dr | | | | |
| | | t 19L | | | As of the date you file, the claim is: Check all that apply. | |
| | Ne | ew York | NY | 10027-3238 | | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | └ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar del | ots |
| | | he claim subject to offset? | | | Cher. Specify The Plastic Merchant | |
| | ~ | | | | | |
| 1 | | Yes | | | | |

| Debto | or 1 Calichan Calicha | POC 1 F | iled 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
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| | | | • | 21 of 221 | |
| Par | t 2: List All of Your NONPR | IORITY U | nsecured Claims | | |
| | Do any creditors have nonpriorit ☐ No. You have nothing to report ☑ Yes | - | | u? e court with your other schedules. | |
| r ii | nonpriority unsecured claim, list the | creditor sep | arately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.27 [.] | Rachel Le | | | | Total claim |
| 4.27 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 455.50 |
| | 10407 Carolyndale Dr Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Richmond | TX | ZIP Code | | |
| | City | State | ZIP Code | | |
| | Who incurred the debt? Check one Debtor 1 only | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and and | other | | that you did not report as priority claims | |
| | Check if this claim is for a con | nmunity debt | t | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| 4.27 | Rajesh Reddy | | | Last 4 digits of account number | <u>\$</u> 3,820.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 95 Milland Dr | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Mill Valley | CA | 94941-4910 | | |
| | City | State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one Debtor 1 only | <i>!</i> . | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and and | other | | that you did not report as priority claims | |
| | Check if this claim is for a con | nmunity debt | t | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| 4.27 | Rambaby Tanguturu | | | Last 4 digits of account number | _{\$} 172.00 |
| | Nonpriority Creditor's Name 1480 US Highway 46 | | | When was the debt incurred? | |
| | Number Street Apt 343B | | | As of the date you file, the claim is: Check all that apply. | |
| | Parsippany | NJ | 07054-5905 | | |
| | City Who incurred the debt? Check one | State | ZIP Code | | |
| | Debtor 1 only | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and and | othor | | Student loans | |
| | _ | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a con | nmunity debt | t | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | V No | | | | |

| Debte | or 1 Calific hand California Cali | 1 Fi | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | iment |
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| | | | • | 22 of 221 | |
| Par | t 2: List All of Your NONPRIOR | RITY Un | secured Claims | | |
| [| Do any creditors have nonpriority una ☐ No. You have nothing to report in thi ☑ Yes | | | | |
| r | nonpriority unsecured claim, list the cred | litor sepa litor holds | rately for each claim | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| | Devilled | | | | Total claim |
| 4.27 | Rani Hod Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 195.00 |
| | 172 Mason Ter | | | When was the debt incurred? | ۴ |
| | Number Street | | | | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Brookline | MA | 02446-2772 | | |
| | City | State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a commu | nity debt | | ☑ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| 4.27 | | | | | _{\$} 86.00 |
| 7.27 | | | | Last 4 digits of account number When was the debt incurred? | <u>300.00</u> |
| | Nonpriority Creditor's Name 1000 E 46th St. | | | | |
| | Number Street | | | | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Austin | ТΧ | 78751-4126 | Contingent | |
| | City Who incurred the debt? Check one. | State | ZIP Code | | |
| | Debtor 1 only | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Cother. Specify The Plastic Merchant | |
| | ✓ No | | | | |
| | Yes | | | | |
| 4.27 | Rayne Knudson | | | Last 4 digits of account number | _{\$} 1,560.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | \$ <u>.,</u> |
| | 811 Debut Ct | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | San Jose | CA | 95134-2619 | · · · · | |
| | City | State | ZIP Code | | |
| | Who incurred the debt? Check one. | | | Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a commu | nity daht | | that you did not report as priority claims | |
| | | nty uebt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | | |
| | Yes | | | | |

| Debto | or 1 Castenare Middle N | er Debo 1 Fi | led 10/03/19 | _Entered 10/03/19 17;32;42 Main Docu | ument |
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| | | | • | .23 of 221 | |
| Par | t 2: List All of Your N | ONPRIORITY Un | secured Claims | | |
| | Do any creditors have nonp No. You have nothing to r Yes | - | | ม? e court with your other schedules. | |
| n ir | onpriority unsecured claim, I | ist the creditor sepa in one creditor holds | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| 407 | Rebecca Peters | | | | Total claim |
| 4.27 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 361.50 |
| | 3721 Faulkner Dr | | | When was the debt incurred? | • |
| | Number Street Apt 202 | | | | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Lincoln | NE | 68516-4764 | | |
| | Who incurred the debt? Che | | ZIP Code | | |
| | Debtor 1 only | ck one. | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors a | and another | | Obligations arising out of a separation agreement or divorce | |
| | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for | • | | ☑ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offse No Yes | st? | | | |
| 4.27 | Rebecca Scheer | | | Last 4 digits of account number | <u></u> \$_1,075.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 9405 Charter Dr Number Street | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Indianapolis | IN | 46250-3443 | Contingent | |
| | City Who incurred the debt? Che | State | ZIP Code | | |
| | Debtor 1 only | ck one. | | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors a | nd another | | Obligations arising out of a separation agreement or divorce | |
| | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for | | | ☑ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offse | t? | | | |
| | Yes | | | | |
| 4.27 | Rene Sequeria | | | Last 4 digits of account number | _{\$} 1,817.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | · |
| | 1205 La Mesa Dr Number Street | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Richardson | ТХ | 75080-3732 | Contingent | |
| | City Who incurred the debt? Che | State eck one. | ZIP Code | | |
| | Debtor 1 only | | | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors a | ind another | | Student loans Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for | a community debt | | that you did not report as priority claims | |
| | Is the claim subject to offse | • | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | No | | | | |
| | Yes | | | | |

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| | | . | .24 of 221 | |
| Par | t 2: List All of Your NONPRIORITY | Unsecured Claims | | |
| [| Do any creditors have nonpriority unsecu No. You have nothing to report in this par ✓ Yes | | | |
| ri | nonpriority unsecured claim, list the creditor s | separately for each clair olds a particular claim, | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.00 | Doniu Noir | | | Total claim |
| 4.28 | Renju Nair Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 325.00 |
| | 4952 W Marcus Dr | | When was the debt incurred? | ¥ |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Phoenix AZ | 85083-5423 | | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community d | ebt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Cother. Specify The Plastic Merchant | |
| | Vo Ves | | | |
| 4.28 | Richard Kho | | Last 4 digits of account number | _{\$} 318.50 |
| — | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 2555 31st Ave | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | San Francisco | CA | Contingent | |
| | City State | | Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community d | ebt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | ✓ No □ Yes | | | |
| 4.28 | Richmond Wu | | Last 4 digits of account number | _{\$} 619.50 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | \$ <u>019.30</u> |
| | 1706 NE 24th St | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Renton WA | 98056-2263 | | |
| | City State | | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | \square Check if this claim is for a community d | ebt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | ; |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | V No | | | |
| | Yes | | | |

| Debt | or 1 | Ca Michael Ch (S20) First Name Mid | gher Deanc 1 | L File | ed 10/03/19 | <u>Entered 10/03/19 17 ເກີລີ 42 Main Docu</u> 25 of 221 | iment |
|--------|-------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------|------------------------|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Par | 't 2: | List All of Your | NONPRIOR | ITY Uns | • | | |
| | | | | | • • | ? e court with your other schedules. | |
| i i | nonpi incluc | riority unsecured clair | n, list the credi than one credit | tor separ tor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.00 | (Di+ | a May Dumaguing | | | | | Total claim |
| 4.28 | | priority Creditor's Name | | | | Last 4 digits of account number | _{\$} 2,743.05 |
| | 220 | 0 Greenwood Ave | | | | When was the debt incurred? | |
| | Numl | ber Street | | | | | |
| | City Who I | oklyn o incurred the debt? (Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debto Check if this claim is he claim subject to of No Yes | Check one. hly rs and another for a communi | NY State | 11218-1028 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.28 | | esh Gaba | | | | Last 4 digits of account number | <u>\$</u> 404.00 |
| 4 29 | 60 Num Sar City Wh I I I I I I I I I I I I I | it 3119 n Jose to incurred the debt? of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debtor Check if this claim is the claim subject to of No Yes | Check one. nly rs and another for a communi | CA State ty debt | 95134-1824 ZIP Code | When was the debt incurred? | |
| 4.28 | Ro | bert Duke | | | | Last 4 digits of account number | \$ <u>2,375.00</u> |
| | 32 ⁻ Num | | | NO. | | When was the debt incurred? | |
| | City Wh | to incurred the debt? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 or At least one of the debto Check if this claim is he claim subject to of | Check one. nly rs and another for a communi | NC State | 28209-1201 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | No Yes | | | | | |

| Debto | or 1 Castehag Cha | Middle Name | Last Nam | led 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
|---------|----------------------------------------------------|-----------------------------------------------|----------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | | | | • | 126 of 221 | |
| Par | t 2: List All of Yo | our NONPRIORI | TYUn | secured Claims | | |
| | Do any creditors have No. You have nothi Yes | | | | u? e court with your other schedules. | |
| r ii | nonpriority unsecured of | claim, list the credit ore than one credit | tor sepa or holds | rately for each clair | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.000 | Robert Mun | | | | | Total claim |
| 4.28 | Nonpriority Creditor's Name | | | | Last 4 digits of account number | _{\$} 3,820.00 |
| | 770 S. Grand Ave | | | | When was the debt incurred? | * |
| | Number Street Apt 6035 | | | | | |
| | Αρι 6035 | | | | As of the date you file, the claim is: Check all that apply. | |
| | Los Angeles | (| CA | 90017-3954 | _ | |
| | City | | state | ZIP Code | Contingent | |
| | Who incurred the deb | t? Check one. | | | Disputed | |
| | Debtor 1 only Debtor 2 only | | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor | 2 only | | | Student loans | |
| | At least one of the de | ebtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim | n is for a communi | ty debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to | o offset? | - | | Other. Specify The Plastic Merchant | |
| | ✓ No Yes | | | | | |
| 4.28 | Robert Stephenson | | | | Last 4 digits of account number | <u>\$</u> 120.00 |
| | Nonpriority Creditor's Name | | | | When was the debt incurred? | |
| | 3240 Kinross Cir | | | | | |
| | Number Street | | | | As of the date you file, the claim is: Check all that apply. | |
| | Oak Hill | | VA | 20171-3320 | Contingent | |
| | City | | State | ZIP Code | Unliquidated | |
| | Who incurred the deb | ot? Check one. | | | | |
| | Debtor 2 only | | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor | , | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the de | ebtors and another | | | that you did not report as priority claims | |
| | Check if this claim | is for a communit | ty debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to | o offset? | | | | |
| | ✓ No □ Yes | | | | | |
| 4.28 | Rodrigo Lopez | | | | Last 4 digits of account number | |
| | Nonpriority Creditor's Name | | | | When was the debt incurred? | \$ <u>4,479.00</u> |
| | 8323 229th Dr. NE | | | | | |
| | Number Street | | | | As of the date you file, the claim is: Check all that apply. | |
| | Redmond | | NA | 98053-1963 | | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the det | DE Check one. | | | | |
| | Debtor 2 only | | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor | - | | | Student loans | |
| | At least one of the de | ebtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim | n is for a communi | ty debt | | | |
| | Is the claim subject to | o offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ✓ No | | | | | |
| | Yes | | | | | |

| Debte | or 1 | First Name Middle Name | 1 Fil | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
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| | | | | . | 27 of 221 | |
| Par | 't 2: | List All of Your NONPRIO | RITY Un | secured Claims | | |
| [| | ny creditors have nonpriority un o. You have nothing to report in th es | | | | |
| ri | nonpr | iority unsecured claim, list the cre | ditor sepa ditor holds | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.00 | | nit Kedia | | | | Total claim |
| 4.28 | • | riority Creditor's Name | | | Last 4 digits of account number | _{\$} 340.00 |
| | | 29 Falling Acorn Cir | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | e Mary | FL | 32746-4756 | | |
| | City | | State | ZIP Code | | |
| | _ | b incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | ne claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | ~ N | • | | | | |
| 4.29 | (Roh | hit Rajiv Sane | | | Last 4 digits of account number | <u>\$1,080.00</u> |
| | Nonn | priority Creditor's Name | | | When was the debt incurred? | |
| | | 60 W Taylor St | | | | |
| | Numb | | | | As of the date you file, the claim is: Check all that apply. | |
| | Apt | : 2R | | | · | |
| | | icago | IL | 60607-4213 | Contingent Unliquidated | |
| | City Who | o incurred the debt? Check one. | State | ZIP Code | | |
| | _ | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | | Student loans | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ЦС | Check if this claim is for a commu | nity debt | | Debits to pension or pront-sharing plans, and other similar debits Other. Specify The Plastic Merchant | |
| | | ne claim subject to offset? | | | | |
| | | No Yes | | | | |
| 4.29 | | nald Harvey | | | Last 4 digits of account number | _{\$} 950.00 |
| | Nonp | priority Creditor's Name | | | When was the debt incurred? | |
| | | 4 Stargate Dr | | | | |
| | Numl | ber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Ma | dison | AL | 35758-3020 | · · · · | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | _ | o incurred the debt? Check one. Debtor 1 only | | | | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ls th | ne claim subject to offset? | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | ~ N | | | | | |
| | <u> </u> | Yes | | | | |

| Debto | or 1 Casten and Cast Name Middle Name Last Name | ed 10/03/19 | | iment |
|--------|-----------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | | • | 28 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| | Do any creditors have nonpriority unsecured o No. You have nothing to report in this part. Su ✓ Yes | | | |
| r i | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.292 | Ruslan Kras | | | Total claim |
| 4.232 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 1,720.00 |
| | 3102 Sitio Isadora Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Carlsbad CA | 92009-7123 | Contingent | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | ✓ No ☐ Yes | | | |
| 4.29 | Russell Horan | | Last 4 digits of account number | \$ <u>1,105.55</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 1116B 21st Ave S | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Seattle WA | 98144-2928 | Contingent | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Cother. Specify The Plastic Merchant | |
| | ✓ No | | | |
| | Yes | | | |
| 4.29 | Ryan Flanigan | | Last 4 digits of account number | _{\$} 120.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | \$120.00 |
| | 8241 Peaceful Canyon Dr | | | |
| | Number Street | · · · · · · · · · · · · · · · · · · · | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Las Vegas NV City State | 89128-7924 ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | 2.1 0000 | Unliquidated Disputed | |
| | Debtor 1 only | | • | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community debt | | that you did not report as priority claims | |
| | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | Yes | | | |

| Debt | or 1 | Cade Charles Charles De First Name Middle Name | DC 1 F | iled 10/03/19 | _Entered 10/0 <u>3/19 17 ເສລີ</u> ,42 Main Docu 29 of 221 | ument |
|------|----------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Par | rt 2: | List All of Your NONP | RIORITY U | 5 | | |
| | | ny creditors have nonpriorit lo. You have nothing to report es | • | • • | ? e court with your other schedules. | |
| i | nonpi incluc | riority unsecured claim, list the | e creditor sep e creditor hold | arately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.29 | • • | an Fox priority Creditor's Name | | | Last 4 digits of account number | _{\$} 381.00 |
| | 692 Num | 22 Crockett Ridge Dr ber Street | | | When was the debt incurred? | |
| | | chmond o incurred the debt? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Check if this claim is for a col | other | 77406-5253 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.29 | | he claim subject to offset? No Yes an North | | | Last 4 digits of account number | <u>\$237.00</u> |
| | 472 Numm Apri City Wh I I I I I I I I I I I I I | t 604 rsey City o incurred the debt? Check on Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and an Check if this claim is for a con- he claim subject to offset? | other | 07302-7076 ZIP Code | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.29 | | ran Smith | | | Last 4 digits of account number | _{\$} 1,039.50 |
| | Non 13 Num | priority Creditor's Name 562 San Georgio Dr Iber Street | | | When was the debt incurred? | \$ <u>1,</u> 009.00 |
| | | tero o incurred the debt? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an Check if this claim is for a con he claim subject to offset? | other | 33928-6465 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ~ | • | | | | |

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| | | • | 30 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Un | secured Claims | | |
| [| No. You have nothing to report in this part. So Yes | | | |
| r | nonpriority unsecured claim, list the creditor sepa | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.29 | Ryo Takano | | | Total claim |
| 7.23 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 1,348.00 |
| | 127 Greyrock Plz Number Street | | When was the debt incurred? | |
| | Apt PL3 | | | |
| | Stamford CT | 06901-3106 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated | |
| | Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | \Box Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | ✓ Other. Specify The Plastic Merchant | |
| | ✓ No ✓ Yes | | | |
| 4.29 | | | Last 4 digits of account number | _{\$} 200.50 |
| | | | When was the debt incurred? | Ŷ |
| | Nonpriority Creditor's Name 955 Lawrence Rd | | | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Lawrenceville NJ | 08648-3898 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | | | | |
| | Yes | | | |
| 4.30 | Sam Tallam | | Last 4 digits of account number | _{\$} 1,432.50 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 135 Fallen Leaf Ct | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Aplharetta GA | 30005-6795 | · · · · · · · · · · · · · · · · · · | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community debt | | that you did not report as priority claims | |
| | Is the claim subject to offset? | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | V No | | | |
| | Yes | | | |

| Debt | or 1 Casteha Chromos Per Deboc 1 | -iled 10/03/19 | Entered 10/03/19 17:32 42 Main Docu | ument |
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| | | • | 31 of 221 | |
| Par | t 2: List All of Your NONPRIORITY L | Insecured Claims | | |
| | Do any creditors have nonpriority unsecure ☐ No. You have nothing to report in this part. Yes | • • | | |
| i | nonpriority unsecured claim, list the creditor se | parately for each claim | order of the creditor who holds each claim. If a creditor has b. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.20 | Scott Gruber | | | Total claim |
| 4.30 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 791.00 |
| | 1065 Crown Pointe Circle Number Street | | When was the debt incurred? | * |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Suamico WI City State | 54173-8077 ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community del | ot | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? No Yes | | | |
| 4.30 | Scott Rowe | | Last 4 digits of account number | <u>\$160.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 820 Casanova Ave | | | |
| | Apt 28 | | As of the date you file, the claim is: Check all that apply. | |
| | Monterey CA | | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Description | |
| | Check if this claim is for a community deb | ot | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? Vo Yes | | | |
| 4.30 | Scott Stephan | | Last 4 digits of account number | \$ <u>950.00</u> |
| | Nonpriority Creditor's Name 1870 Larkspur Dr | | When was the debt incurred? | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Golden CO | 80401-9114 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ☐ Check if this claim is for a community del | ot | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ✓ Other. Specify The Plastic Merchant | |

| Debt | or 1 Castien and Caston Of Performance Last Name Middle Name Last Name | | Entered 10/03/19 17:32 42 Main Docu | iment |
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| | | 0 | 32 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Un | secured Claims | | |
| [| Do any creditors have nonpriority unsecured on No. You have nothing to report in this part. Survey Yes | | | |
| ri | nonpriority unsecured claim, list the creditor separation | rately for each claim | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.30 | Sean Blair | | | Total claim |
| 4.50 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 124.50 |
| | 1660 21st Rd N Number Street | | When was the debt incurred? | |
| | Apt 10 | | | |
| | Arlington VA | 22209-1159 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | _ | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | L Check if this claim is for a community debt | | ☑ Debis to periston of profits and grans, and other similar debis ☑ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | └ No Yes | | | |
| 4.30 | | | Last 4 divite of account number | s840.00 |
| 7.00 | | | Last 4 digits of account number When was the debt incurred? | \$ <u>010.00</u> |
| | Nonpriority Creditor's Name 803 Harrell Ave | | | |
| | Number Street | | | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Woodbridge NJ | 07095-3240 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | | |
| | Debtor 1 only | | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchant | |
| | V No | | | |
| | Yes | | | |
| 4.30 | Shao Liu Epstein | | Last 4 digits of account number | _{\$} 347.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | φ |
| | 11124 Sceptre Ridge Ter | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Germantown MD | 20876-6342 | · · · · · · · · · · · · · · · · · · | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | \square At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | \square Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | ☑ Debts to perison of profestialing plans, and other similar debts ☑ Other. Specify | |
| | V No | | | |
| | Yes | | | |

| Debto | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | _Entered 10/0 <u>3/19 17;រ32;</u> 42 Main Docu 33 of 221 | iment |
|-------|---------|------------------------------------------------------------------------------------|----------------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Par | 't 2: | List All of Your NONPRIOF | RITY Uns | 0 | 55 01 221 | |
| | _ ' | y creditors have nonpriority un . You have nothing to report in thi s | | • • | | |
| r | nonprio | prity unsecured claim, list the crea | litor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | 0 | Des du | | | | Total claim |
| 4.30 | | on Brady | | | Last 4 digits of account number | _{\$} 1,868.50 |
| | | '6 Sydenham Rd | | | When was the debt incurred? | * |
| | Numbe | er Street | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | ker Heights | ОН | 44122-2930 | | |
| | City | | State | ZIP Code | Unliquidated | |
| | | incurred the debt? Check one. | | | Disputed | |
| | | ebtor 1 only ebtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | ebtor 2 only ebtor 1 and Debtor 2 only | | | Student loans | |
| | _ | least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Πc | heck if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | | ity debt | | Cother. Specify The Plastic Merchant | |
| | | e claim subject to offset? | | | | |
| | | | | | | |
| 4.30 | Shav | wn Coomer | | | Last 4 digits of account number | <u>\$820.00</u> |
| | | ority Creditor's Name | | | When was the debt incurred? | |
| | 5237 | Pack Creek Ct | | | | |
| | NUMDE | er Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Nort | h Las Vegas | NV | 89031-3425 | Contingent | |
| | City | | State | ZIP Code | | |
| | | incurred the debt? Check one. ebtor 1 only | | | Disputed | |
| | _ | ebtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | 🗖 De | ebtor 1 and Debtor 2 only | | | Student loans | |
| | 🗖 At | least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | heck if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the | claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | 🖌 No | | | | | |
| 4.00 | Ye | | | | | |
| 4.30 | Shih | I Chiang Teng | | | Last 4 digits of account number | _{\$} 319.50 |
| | Nonpri | iority Creditor's Name | | | When was the debt incurred? | |
| | | 2 E. Ashurst Dr | | | | |
| | Numbe | er Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Pho | enix | AZ | 85048-0128 | _ | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | | incurred the debt? Check one. ebtor 1 only | | | Disputed | |
| | | ebtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | ebtor 1 and Debtor 2 only | | | Student loans | |
| | 🗖 At | least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | □ c | heck if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | e claim subject to offset? | - | | ✓ Other. Specify The Plastic Merchant | |
| | | | | | | |
| | Ye | | | | | |

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| | | Ŭ | 34 of 221 | |
| Par | t 2: List All of Your NONPRIORITY U | nsecured Claims | | |
| L [| Do any creditors have nonpriority unsecured No. You have nothing to report in this part. S Yes | | | |
| i i | nonpriority unsecured claim, list the creditor sep | arately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.31 | Shih Wang | | | Total claim |
| | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 1,462.00 |
| | 7420 Newcastle Gulf Club Rd | | When was the debt incurred? | |
| | Unit G | | | |
| | Newcastle WA | 98059-9144 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | that you did not report as priority claims | |
| | Check if this claim is for a community deb | t | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Uther. Specify The Flashe Werenant | |
| | V No | | | |
| | Yes | | | |
| 4.31 | Shimei Zhang | | Last 4 digits of account number | <u>\$1,168.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 8703 Hovey St | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Rosemead CA | 91770-1343 | Contingent | |
| | City State | ZIP Code | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community deb | r | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Cother. Specify The Plastic Merchant | |
| | No | | | |
| | Yes | | | |
| 4.31 | Sivaprasad Mokkapati | | Last 4 digits of account number | _{\$} 2,070.10 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 3907 Hidden Grove Ln | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Conceord CA | 94519-1161 | · · · · | |
| | City State | ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim is for a community deb | t | that you did not report as priority claims | |
| | Is the claim subject to offset? | | ☑ Debts to person of pone-sname plans, and other similar debts ☑ Other. Specify | |
| | V No | | | |
| | Yes | | | |

| Debto | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | _Entered 10/0 <u>3/19 17;រ32;</u> 42 Main Docu 35 of 221 | iment |
|-------|----------------|---------------------------------------------------------------------------------|----------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | t 2: | List All of Your NONPRIOF | RITY Uns | 0 | 55 01 221 | |
| | | ny creditors have nonpriority un lo. You have nothing to report in thi es | | | | |
| r | nonpi ncluc | riority unsecured claim, list the cred | litor separ litor holds | ately for each claim | rder of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.31 | • • | ectrum priority Creditor's Name | | | Last 4 digits of account number 3271 | _{\$} 200.94 |
| | | 00 Dublin Rd | | | When was the debt incurred? | ۰ |
| | Num | ber Street | | | | |
| | Col | lumbus | ОН | 43215 | As of the date you file, the claim is: Check all that apply. | |
| | City | | State | ZIP Code | Contingent | |
| | Who | o incurred the debt? Check one. | | | Unliquidated Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | aity dobt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | ity debt | | Other. Specify Telephone / Internet services | |
| | • | No | | | | |
| 4.31 | | Yes encer Ferrero | | | | _{\$} 120.00 |
| 4.01 | | | | | Last 4 digits of account number When was the debt incurred? | \$ <u>120100</u> |
| | | priority Creditor's Name 35 Brockton Ave | | | | |
| | Num | iber Street | | <u> </u> | As of the date you file, the claim is: Check all that apply. | |
| | Apt | t 3 | | | | |
| | | s Angeles | CA State | 90025-3737 ZIP Code | Contingent Unliquidated | |
| | | o incurred the debt? Check one. | State | ZIP Code | Disputed | |
| | _ | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls th | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | • | No | | | | |
| 4.31 | | Yes | | | | |
| 4.51 | Sri | ikanth Mutyala | | | Last 4 digits of account number | \$ <u>738.00</u> |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | 444 Num | 45 Alvin Dark Ave | | | | |
| | Ap | t 108 | | | As of the date you file, the claim is: Check all that apply. | |
| | | ton Rouge | LA | 70820-3053 | Contingent | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | | |
| | _ | Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | | At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | Check if this claim is for a commur | nity debt | | that you did not report as priority claims | |
| | | | iity uebt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | he claim subject to offset? No | | | | |
| | | Yes | | | | |

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| Par | t 2: List All of Your NONPRIORITY Unsecured Claims | | |
| [| Do any creditors have nonpriority unsecured claims against yo ☐ No. You have nothing to report in this part. Submit this form to th Yes | | |
| r | ist all of your nonpriority unsecured claims in the alphabetical nonpriority unsecured claim, list the creditor separately for each clair ncluded in Part 1. If more than one creditor holds a particular claim, claims fill out the Continuation Page of Part 2. | n. For each claim listed, identify what type of claim it is. Do not | list claims already |
| | | | Total claim |
| 4.31 | Srinivas Guttala Nonpriority Creditor's Name | _ Last 4 digits of account number | _{\$} 1,304.50 |
| | 22623 Shining Harness St | When was the debt incurred? | |
| | Number Street | | |
| | Clarksburg MD 20871-5324 City State ZIP Code Who incurred the debt? Check one. ZIP Code ☑ Debtor 1 only Debtor 2 only □ Debtor 2 only Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.31 | Srinivasu Seelam | Last 4 digits of account number | \$ <u>2,184.00</u> |
| | Nonpriority Creditor's Name 2709 Trappers Cove Trail Number Street Apt 1B Lansing MI 48910-5781 City State ZIP Code Who incurred the debt? Check one. IP Code Ø Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.31 | Srinivas Vajhala | Last 4 digits of account number | \$ <u>43.50</u> |
| | Nonpriority Creditor's Name 7317 Joshua Tree Trail Number Street McKinney TX 75070-4423 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debter and eacther | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? ✓ No Yes | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

| Debte | or 1 (| First Name Middle Name | 2 Fil | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
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| | | | | 0 | 37 of 221 | |
| Par | t 2: | List All of Your NONPRIC | RITY Un | secured Claims | | |
| | - | y creditors have nonpriority u . You have nothing to report in t s | | | e court with your other schedules. | |
| r | nonpric nclude | prity unsecured claim, list the cre | editor sepa | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| | | | | | | Total claim |
| 4.319 | | I Health St. Joseph Hostpital - S | t. Chanes | | Last 4 digits of account number 1683 | _{\$} 3,206.40 |
| | | Box 776236 | | | When was the debt incurred? | φ |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Chica City | ago | IL State | 60677 ZIP Code | Contingent | |
| | | incurred the debt? Check one. | | | | |
| | | ebtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | ebtor 2 only ebtor 1 and Debtor 2 only | | | Student loans | |
| | | least one of the debtors and anothe | r | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | heck if this claim is for a comm | unity dobt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | | unity debt | | Conter. Specify Medical Services | |
| | | | | | | |
| 4.32 | St. C | Charles County Circuit Court | | | Last 4 digits of account number | _{\$} 275.19 |
| | Nonpri | ority Creditor's Name | | | When was the debt incurred? | |
| | 300 | N. 2nd Street | | | | |
| | Numbe | er Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Saint | t Charles | MO | 63301 | Contingent | |
| | City | incurred the debt? Check one. | State | ZIP Code | | |
| | | ebtor 1 only | | | Disputed Type of NONPRIORITY unsecured claim: | |
| | | ebtor 2 only | | | Student loans | |
| | _ | ebtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | L At | least one of the debtors and another | r | | that you did not report as priority claims | |
| | 🗆 CI | heck if this claim is for a commu | unity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Municipal Fine | |
| | | claim subject to offset? | | | | |
| | V No | | | | | |
| 4.32 [.] | | es ohen Ennis | | | Last 4 digits of account number | 45.75 |
| | | iority Creditor's Name | | | When was the debt incurred? | \$ <u>45.75</u> |
| | | Woodstock Ln | | | | |
| | Numbe | er Street | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Gree City | er | SC State | 29650-3918 ZIP Code | | |
| | Who | incurred the debt? Check one. | | 1000 | Unliquidated Disputed | |
| | | ebtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | ebtor 2 only ebtor 1 and Debtor 2 only | | | | |
| | _ | least one of the debtors and anothe | r | | Obligations arising out of a separation agreement or divorce | |
| | 🗆 ci | heck if this claim is for a comm | unity debt | | that you did not report as priority claims | |
| | Is the | e claim subject to offset? | | | Decision of point stating plans, and other similar decision Other. Specify The Plastic Merchant | |
| | Ye | es | | | | |

| Debto | or 1 | First Name Middle Name | DOC 1 F | Filed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu .38 of 221 | iment |
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| Part | t 2: | List All of Your NONP | PRIORITY U | 0 | | |
| | | | • | • • | a? e court with your other schedules. | |
| n ir | ionpr nclud | riority unsecured claim, list th | ne creditor sep le creditor hole | parately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| | 01.5 | akar Daaraalla | | | | Total claim |
| 4.32 | | phen Pascarella | | | Last 4 digits of account number | _{\$} 818.55 |
| | 520 Numb | 02 W 121st St ber Street | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply | |
| | | erland Park o incurred the debt? Check on Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Check if this claim is for a co ne claim subject to offset? No | nother | 66209-3500 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.32 | | Yes phen Pepper | | | Last 4 digits of account number | _{\$} 200.00 |
| 4 22 | 4111 Numm #13 Gree City Who City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City City | 3210 een Cove Springs o incurred the debt? Check or Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Check if this claim is for a co ne claim subject to offset? No Yes | nother | 32043-3443 ZIP Code | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.32 | | ephen Thompson | | | Last 4 digits of account number | \$ <u>80.00</u> |
| | | t 305 o incurred the debt? Check or Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Check if this claim is for a co ne claim subject to offset? | nother | 38103-3635 ZIP Code | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

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| De | | Pg 139 of 221 | |
| Pa | rt 2: List All of Your NONPRIORITY Unsecure | | |
| | Do any creditors have nonpriority unsecured claims a No. You have nothing to report in this part. Submit this Yes | | |
| | nonpriority unsecured claim, list the creditor separately for | phabetical order of the creditor who holds each claim. If a creditor has r each claim. For each claim listed, identify what type of claim it is. Do not I cular claim, list the other creditors in Part 3.If you have more than three non | ist claims already |
| 4.32 | Steven Holland | | Total claim |
| 4.52 | Nonpriority Creditor's Name | Last 4 digits of account number | 127.50 |
| | 3942 45th Street Number Street | When was the debt incurred? | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Sunnyside NY 11104- City State ZIP Cod Who incurred the debt? Check one. State State | | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt Is the claim subject to offset? No Yes | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.32 | Steven Lee | Last 4 digits of account number | \$78.00 |
| | Nonpriority Creditor's Name | When was the debt incurred? | |
| | 1490 Dorner Dr Number Street | | |
| | Nulliber Street | As of the date you file, the claim is: Check all that apply. | |
| | Monterey Park CA 91754- | | |
| | City State ZIP Co Who incurred the debt? Check one. | | |
| | Debtor 1 only | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | |
| 4.32 | Steven Matthews | Last 4 digits of account number | _{\$} 42.00 |
| | Nonpriority Creditor's Name 15450 Sandfield Loop | When was the debt incurred? | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | Winter Garden FL 34787- | -9809 Contingent | |
| | City State ZIP Co Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | Is the claim subject to offset? | Uther. Specify | |

| Debt | or 1 Caster Caster Caster Deboc 1 File C | | Entered 10/03/19 17 32. | 42 Main Docu | ment |
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| Par | t 2: List All of Your NONPRIORITY Unsee | 9 | | | |
| ļ | Do any creditors have nonpriority unsecured clain No. You have nothing to report in this part. Subm Yes | | | | |
| ri | ist all of your nonpriority unsecured claims in the nonpriority unsecured claim, list the creditor separate ncluded in Part 1. If more than one creditor holds a p claims fill out the Continuation Page of Part 2. | ely for each claim. | For each claim listed, identify what typ | be of claim it is. Do not | list claims already |
| 4.32 | St. Louis Childrens Hospital | | | | Total claim |
| 4.52 | Nonpriority Creditor's Name | | Last 4 digits of account number | | _{\$} 421.68 |
| | 1 Childrens Place | | When was the debt incurred? | | |
| | Number Street | | | | |
| | Saint Louis MO 6 | 2110 | As of the date you file, the claim is: C | Check all that apply. | |
| | | 3110 ZIP Code | Contingent | | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | | Disputed Type of NONPRIORITY unsecured | claim: | |
| | Debtor 2 only | | | | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation | | |
| | _ | | that you did not report as priority claim Debts to pension or profit-sharing plan | | |
| | Check if this claim is for a community debt | | ✓ Other. Specify Medical Services | | |
| | Is the claim subject to offset? | | | | |
| | | | | | |
| 4.32 | St. Louis Women's Surgery Center | | Last 4 digits of account number 378 | 33 | <u>\$</u> 540.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | | |
| | 864 Woods Mill Rd. | | | | |
| | Number Street | | As of the date you file, the claim is: C | Check all that apply. | |
| | Ballwin MO 6 | 3011 | | | |
| | City State | ZIP Code | Unliquidated | | |
| | Who incurred the debt? Check one. | | Disputed | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans Obligations arising out of a separation | agroomont or divorco | |
| | At least one of the debtors and another | | that you did not report as priority claim | | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plan | s, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify Medical Services | | |
| | ✓ No | | | | |
| 4.33 | Yes | | | | |
| 4.55 | Sumit Talwar | | Last 4 digits of account number | | \$ <u>1,308.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | | |
| | 14 Glenview Dr Number Street | | | | |
| | | | As of the date you file, the claim is: C | Check all that apply. | |
| | Warren NJ 07 | 7059-5484 | | | |
| | City State State Who incurred the debt? Check one. | ZIP Code | Unliquidated | | |
| | Debtor 1 only | | Disputed | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured | claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | | |
| | ↓ At least one of the debtors and another | | Obligations arising out of a separation that you did not report as priority claim | | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plan | s, and other similar debts | |
| | Is the claim subject to offset? | | Other. Specify The Plastic Merchan | 111 | |
| | Ves | | | | |

| Debt | or 1 | First Name Middle Name | 1 Fil | ed 10/03/19 | Entered 10/03/19 17:32 42 Main Docu | ument |
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| Par | t 2: | List All of Your NONPRIOR | RITY Uns | secured Claims | | |
| [| | ny creditors have nonpriority una lo. You have nothing to report in thi res | | | | |
| ri | nonpi ncluo | riority unsecured claim, list the crea | litor sepaı litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has b. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.00 | - C | ndeep Meda | | | | Total claim |
| 4.33 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 1,129.00 |
| | | 22 215th PI SE | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | City | thell | WA State | 98021-7085 ZIP Code | Contingent Unliquidated | |
| | | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ~ | he claim subject to offset? No Yes | | | ✓ Other. Specify The Plastic Merchant | |
| 4.33 | Su | nil Saripalli | | | Last 4 digits of account number | <u></u> \$1,161.00 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | | 7 Turnpike Rd | | | | |
| | Num Apt | nber Street t 811 | | | As of the date you file, the claim is: Check all that apply. | |
| | We | estborough | MA | 01581-2825 | Contingent | |
| | City | | State | ZIP Code | Unliquidated | |
| | | to incurred the debt? Check one. Debtor 1 only | | | | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ~ | he claim subject to offset? No Yes | | | Other. Specify The Plastic Merchant | |
| 4.33 | Su | unit Pandya | | | Last 4 digits of account number | _{\$} 118.50 |
| | | priority Creditor's Name 3 N Sangamon St | | | When was the debt incurred? | * |
| | | nber Street ot 5S | | | As of the date you file, the claim is: Check all that apply. | |
| | | nicago | IL | 60642-6078 | | |
| | City Wh | no incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ~ | he claim subject to offset? No Yes | | | ✓ Other. Specify The Plastic Merchant | |

| Debto | or 1 | Caster State States Caster Descore | 1 Fil | ed 10/03/19 | <u>Entered 10/03/19 17:32:42 Main Docu</u> 42 of 221 | iment |
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| Par | t 2: | List All of Your NONPRIO | RITY Uns | 0 | | |
| | | ny creditors have nonpriority ur lo. You have nothing to report in th ′es | | • • | | |
| n ir | nonpr ncluc | riority unsecured claim, list the cre | ditor separ ditor holds | rately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | 2 | | | | Total claim |
| 4.33 | | san Osuilleabhain priority Creditor's Name | | | Last 4 digits of account number | _{\$} 120.00 |
| | 585 Numb | 56 Bedrock Dr Iber Street | | | When was the debt incurred? | |
| | | o incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commu he claim subject to offset? | | 75093-4660 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.33 | <u> </u> | lvia Moran | | | Last 4 digits of account number | <u>\$210.00</u> |
| | 103 Num Lass City What I t I t I t I t I t I t I t I | s Vegas to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commu the claim subject to offset? | | 89134-5140 ZIP Code | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.33 | Та | in Pham | | | Last 4 digits of account number | \$ <u>1,680.00</u> |
| | 4 SS Num FI 2 Wc City What I I I I I I I I I I I I I I I I I I I | 2 orcester to incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a commu he claim subject to offset? | | 01604-1123 ZIP Code | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

| Debt | or 1 Castehae | Middle Name | Last Nam | ed 10/03/19 | _Entered 10/03/19 17:32:42 Main Doc | ument |
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| | | | | Fyi | 43 of 221 | |
| Par | rt 2: List All of | Your NONPRIO | RIIYUn | secured Claims | | |
| 1 | Do any creditors ha ☐ No. You have no ☑ Yes | | | | e court with your other schedules. | |
| i | nonpriority unsecure | d claim, list the cre more than one cre | ditor sepa ditor holds | rately for each clain | order of the creditor who holds each claim. If a creditor han n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three n | ot list claims already |
| 4.22 | Tan Tran | | | | | Total claim |
| 4.33 | Nonpriority Creditor's Nar | ne | | | Last 4 digits of account number | _{\$} 2,134.00 |
| | 117Julia Martin Dr | | | | When was the debt incurred? | |
| | Number Street Apt E | | | | | |
| | <u>, , pr –</u> | | | | As of the date you file, the claim is: Check all that apply. | |
| | Bozeman City | | MT State | 59715-4960 ZIP Code | | |
| | Who incurred the d | obt? Chack and | State | ZIP Code | | |
| | Debtor 1 only | ebt: Check one. | | | | |
| | Debtor 2 only | | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | Debtor 1 and Deb | tor 2 only debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt | \$ |
| | Check if this cla | | inity debt | | ☑ Other. Specify The Plastic Merchant | |
| | Is the claim subjec | t to offset? | | | | |
| 4.33 | | | | | Last 4 digits of account number | _{\$} 390.55 |
| | Nonpriority Creditor's Na | me | | | When was the debt incurred? | |
| | 60 E 8th Ave | | | | | |
| | Number Street Apt 454 | | | | As of the date you file, the claim is: Check all that apply. | |
| | Columbus | | ОН | 43201-3864 | Contingent | |
| | City Who incurred the d | abt? Check and | State | ZIP Code | | |
| | Debtor 1 only | IEDLY CHECK ONE. | | | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | | Student loans | |
| | Debtor 1 and Debt | tor 2 only debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debt | e |
| | Check if this cla | | nity debt | | ✓ Other. Specify The Plastic Merchant | , |
| | Is the claim subject | t to offset? | | | | |
| | | | | | | |
| 4.33 | Terrence Donohue | 9 | | | Last 4 digits of account number | <u>\$170.00</u> |
| | Nonpriority Creditor's Na 2 Park Pl | me | | | When was the debt incurred? | |
| | Number Street Apt 21C | | | | As of the date you file, the claim is: Check all that apply. | |
| | Hartford | | СТ | 06106-5017 | Contingent | |
| | City Who incurred the c | lebt? Check one. | State | ZIP Code | | |
| | Debtor 1 only | | | | | |
| | Debtor 2 only Debtor 1 and Deb | tor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the | - | | | Obligations arising out of a separation agreement or divorce | |
| | Check if this cla | im is for a commu | nity debt | | that you did not report as priority claims | s |
| | Is the claim subjec | t to offset? | - | | Decision of period of period and period period of per | |
| | V No | | | | | |
| | Yes | | | | | |

| Debt | or 1 | First Name Middle Name | 1 Fil | ed 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | iment |
|------|-----------------|-----------------------------------------------------------------------------------|---------------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| | | | | 0 | 44 of 221 | |
| Par | rt 2: | List All of Your NONPRIOF | RITY Un | secured Claims | | |
| | | ny creditors have nonpriority uns lo. You have nothing to report in thi 'es | | | | |
| i | nonpi incluc | riority unsecured claim, list the crec | litor sepai itor holds | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.04 | | rry Mock | | | | Total claim |
| 4.34 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 560.00 |
| | | 0 Mar Vista Dr | | | When was the debt incurred? | * |
| | Numl Apt | | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | nterey | CA | 93940-4359 | Contingent | |
| | City | | State | ZIP Code | | |
| | _ | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ls tł | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | • | No | | | | |
| | | Yes | | | | 0.000.00 |
| 4.34 | · Ini | irulogachandar Medampalli | | | Last 4 digits of account number | \$ <u>3,280.00</u> |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | Num | 821 Northoak Sq | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Cu | pertino | CA | 95014-0521 | Contingent | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 2 only | | | Student loans | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commun | iity debt | | Other. Specify The Plastic Merchant | |
| | ls th ✔ | he claim subject to offset? | | | | |
| | | Yes | | | | |
| 4.34 | Th | omas Carnevale | | | Last 4 digits of account number | \$608.00 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | * |
| | | Smith Ave | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Gre | eenville | RI | 02828-1721 | | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | | |
| 1 | _ | Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| 1 | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ls ti ✔ | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | No Yes | | | | |

| Debto | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | _Entered 10/0 <u>3/19 17 ເສລີ</u> ,42 Main Docu 45 of 221 | ument |
|-------|----------------|---------------------------------------------------------------------------------|-----------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Par | t 2: | List All of Your NONPRIOF | RITY Uns | 0 | +5 01 221 | |
| | | ny creditors have nonpriority un lo. You have nothing to report in thi es | | • • | | |
| r | nonpi ncluc | riority unsecured claim, list the cred | litor separa litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | . T: | | | | | Total claim |
| 4.34 | | nothy Janssen priority Creditor's Name | | | Last 4 digits of account number | _{\$} 930.50 |
| | 248 | 33 Packard St | | | When was the debt incurred? | |
| | Numl Apt | | | | | |
| | <u> </u> | | | | As of the date you file, the claim is: Check all that apply. | |
| | Anr City | n Arbor | MI State | 48104-6386 ZIP Code | Contingent | |
| | | o incurred the debt? Check one. | | | Unliquidated | |
| | _ | Debtor 1 only | | | | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commur | nity debt | | ☑ Debts to persion of profitshaming plans, and other similar debts ☑ Other. Specify The Plastic Merchant | |
| | • | he claim subject to offset? No Yes | | | | |
| 4.34 | | n Rutherford | | | Last 4 digits of account number | _{\$} 1,007.90 |
| | Nonr | priority Creditor's Name | | | When was the debt incurred? | |
| | | 67 Deerhorn Ct | | | | |
| | Num | nber Street t 17 | | | As of the date you file, the claim is: Check all that apply. | |
| | | | | 00104 0104 | | |
| | City | rker | CO State | 80134-3104 ZIP Code | Unliquidated | |
| | | o incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | _ | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ls th | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | | | | | |
| 4.34 | | Yes | | | | |
| | | a Yang | | | Last 4 digits of account number | \$ <u>1,380.00</u> |
| | | priority Creditor's Name 7 White Spruce Dr | | | When was the debt incurred? | |
| | Num | | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Co Citv | ppell | TX | 75019-7972 ZIP Code | Contingent | |
| | Wh | o incurred the debt? Check one. | State | | | |
| | | Debtor 1 only | | | | |
| | _ | Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | Check if this claim is for a commur | nity debt | | that you did not report as priority claims | |
| | | | iity uebt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | he claim subject to offset? No | | | | |
| | | Yes | | | | |

| Debt | or 1 Cate Age And Cate Age And Cate Age Age Age Age Age Age Age Age Age Ag | ed 10/03/19 | | iment |
|------|-------------------------------------------------------------------------------------------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| | | • | 46 of 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| | Do any creditors have nonpriority unsecured o ☐ No. You have nothing to report in this part. Su ☑ Yes | | | |
| i | nonpriority unsecured claim, list the creditor separ | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already |
| 4.04 | Tommy Yu | | | Total claim |
| 4.34 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 250.00 |
| | 1776 S Norfolk St Number Street | | When was the debt incurred? | • |
| | | | | |
| | San Mateo CA | 94403-1153 | As of the date you file, the claim is: Check all that apply. | |
| | City State | ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Check if this claim is for a community debt | | ✓ Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | ✓ No Yes | | | |
| 4.34 | Trang Nguyen | | Last 4 digits of account number | _{\$} 449.10 |
| | | | When was the debt incurred? | * |
| | Nonpriority Creditor's Name 14918 Sandalfoot St | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | | | |
| | Houston TX City State | 77095-2819 ZIP Code | | |
| | Who incurred the debt? Check one. | 211 0000 | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | - , | | Cother. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| | Yes | | | |
| 4.34 | Troy Thornburg | | Last 4 digits of account number | _{\$} 120.00 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | ¥ |
| | 5707 Parkstone Dr | | | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Charlotte NC | 28104-0564 | Contingent | |
| | City State State | ZIP Code | | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce | |
| | \square Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | V No | | | |
| 1 | Yes | | | |

| Debt | or 1 Caskehae 24622080 PD PB0c 1 Filed | 10/03/19 | | iment |
|------|---------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| De | | • | 7 of 221 | |
| Pa | t 2: List All of Your NONPRIORITY Unsecu | Ired Claims | | |
| | Do any creditors have nonpriority unsecured claim ☐ No. You have nothing to report in this part. Submit ✔ Yes | • • | | |
| i | nonpriority unsecured claim, list the creditor separately | for each claim. | rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not at the other creditors in Part 3.If you have more than three no | list claims already |
| 4.34 | Tyler Lovellette | | | Total claim |
| 7.01 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 474.00 |
| | 511 Druid Ln Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | | 405-4039 ? Code | Contingent Unliquidated | |
| | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and another Check if this claim is for a community debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | 100.00 |
| 4.35 | (Tyson Scheidecker | | Last 4 digits of account number | <u>\$160.00</u> |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 5005 Aspen Dr Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | 265-2724 ^P Code | Contingent Unliquidated | |
| | Debtor 1 only | | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ✓ No Yes | | | |
| 4.35 | Umair Khalid | | Last 4 digits of account number | \$ <u>1,401.00</u> |
| | Nonpriority Creditor's Name 1633 Trailview Way NE Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | | 29-1537 | | |
| | City State ZIF Who incurred the debt? Check one. | P Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Uner. Specity | |

| Debto | or 1 Casten and Cast Name Middle Name Last Name | ed 10/03/19 | _Entered 10/0 <u>3/10 17;32 42 Main Docu</u> 48 of 221 | iment |
|--------|-----------------------------------------------------------------------------------------------------------|----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Der | | • | +0 01 221 | |
| Par | t 2: List All of Your NONPRIORITY Uns | secured Claims | | |
| | Do any creditors have nonpriority unsecured o No. You have nothing to report in this part. Su ☑ Yes | • • | | |
| r i | nonpriority unsecured claim, list the creditor separ | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.05 | Usama Makda | | | Total claim |
| 4.35 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 170.00 |
| | 9221 Linder Ave Number Street | | When was the debt incurred? | |
| | Skokie IL | 60077-1134 | As of the date you file, the claim is: Check all that apply. | |
| | City State Who incurred the debt? Check one. Check one. | ZIP Code | Contingent Unliquidated | |
| | Debtor 1 only Debtor 2 only | | Disputed Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Student loans Obligations arising out of a separation agreement or divorce | |
| | □ Check if this claim is for a community debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | Other. Specify The Hastic Merchant | |
| 4.35 | Vadim Ratner | | Last 4 digits of account number | <u>\$5,424.54</u> |
| | Nonpriority Creditor's Name 810 Gordon Ave | | When was the debt incurred? | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Belmont CA | 94002-2312 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? No Yes | | | |
| 4.35 | Vagmita Pabuwal | | Last 4 digits of account number | \$ <u>176.00</u> |
| | Nonpriority Creditor's Name 12716 SE 74th St | | When was the debt incurred? | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | Newcastle WA | 98056-1312 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | Is the claim subject to offset? | | Curer. Specity | |

| Debt | or 1 | Cate Age And Cate And | 1 File | ed 10/03/19 | _Entered 10/0 <u>3/19 17 ເສລີ</u> ,42 Main Docu 49 of 221 | ument |
|------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | t 2: | List All of Your NONPRIO | RITY Uns | 0 | +3 01 221 | |
| [| | ny creditors have nonpriority un lo. You have nothing to report in th ′es | | 0, | | |
| ri | nonpr ncluc | riority unsecured claim, list the creation | ditor separ ditor holds | ately for each claim | rder of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.35 | | nessa Velez priority Creditor's Name | | | Last 4 digits of account number | _{\$} 277.00 |
| | - | 92 Mitchell Ave | | | When was the debt incurred? | |
| | Numb Apt | ber Street t 118 | | | | |
| | | o incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | CA State | 92780-5643 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | □ / □ (Is th □ (| At least one of the debtors and another Check if this claim is for a commu he claim subject to offset? No Yes | nity debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.35 | Ver | rizon Wireless | | | Last 4 digits of account number 0001 | <u>\$238.09</u> |
| | | priority Creditor's Name 0 Technology Drive, Suite 550 | | | When was the debt incurred? | |
| | Num | | | | As of the date you file, the claim is: Check all that apply | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Sai City | int Charles | MO State | 63304 ZIP Code | Unliquidated | |
| | _ | o incurred the debt? Check one. Debtor 1 only | | | | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Telephone / Internet services | |
| | ~ I | he claim subject to offset? No Yes | | | | |
| 4.35 | Vir | ncent Tong | | | Last 4 digits of account number | \$1,900.00 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | ų_ <u>,</u> |
| | 142 Num | 221 Lutheria Way | | | | |
| | INUITI | | | | As of the date you file, the claim is: Check all that apply. | |
| | | ratoga | CA | 95070-5979 | Contingent | |
| | | o incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | ., | | Other. Specify The Plastic Merchant | |
| | | Yes | | | | |

| Debt | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | Entered 10/0 <u>3/1917;32;42 Main Docu</u> 50 of 221 | iment |
|------|-----------------|---------------------------------------------------------------------------------------------------------|----------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | rt 2: | List All of Your NONPRIOR | RITY Uns | 0 | 50 01 221 | |
| [| | ny creditors have nonpriority una lo. You have nothing to report in thi ′es | | • • | | |
| ri | nonpi incluc | riority unsecured claim, list the cred | ditor separ ditor holds | ately for each claim | rder of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | · \/: | rek Ravi | | | | Total claim |
| 4.35 | • | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 395.00 |
| | | 21 Tannehill Dr | | | When was the debt incurred? | |
| | Num Apt | ber Street t 2031 | | | | |
| | City | uston o incurred the debt? Check one. | TX State | 77008-3136 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Is ti | Yes | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.35 | ς Vya | acheslav Kraplin | | | Last 4 digits of account number | <u>\$994.00</u> |
| | | priority Creditor's Name 7 Turner Rd | | | When was the debt incurred? | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | it 108 Iliston | MA | 017646-1280 | | |
| | City | | State | ZIP Code | | |
| | | Debtor 1 only | | | Disputed Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ~ | he claim subject to offset? No Yes | | | Other. Specify The Plastic Merchant | |
| 4.36 | Wa | alter C Geckeler | | | Last 4 digits of account number | _{\$} 100.05 |
| | | priority Creditor's Name 18 College Ave | | | When was the debt incurred? | φ |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | rkley | CA | 94705-2506 | | |
| | _ | o incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans and other similar debts | |
| | ~ | he claim subject to offset? No Yes | | | Other. Specify The Plastic Merchant | |

| Debto | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | Entered 10/0 <u>3/19៣៦7;រ32</u> 42 Main Docu 51 of 221 | ument |
|---------|----------------|----------------------------------------------------------------------------------|----------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Par | t 2: | List All of Your NONPRIOF | RITY Uns | 0 | | |
| | _ | ny creditors have nonpriority una lo. You have nothing to report in thi es | | • • | | |
| r ii | nonpr ncluc | riority unsecured claim, list the cred | ditor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.36 | | angdong Chen priority Creditor's Name | | | Last 4 digits of account number | _{\$} 182.05 |
| | | 23 Playa Del Rey | | | When was the debt incurred? | • |
| | Num | | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Sar | n Jose | CA | 95123-1330 | _ | |
| | City | | State | ZIP Code | Contingent Unliquidated | |
| | Who | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only Debtor 1 and Debtor 2 only | | | Student loans | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | | Check if this claim is for a commun | nity debt | | ✓ Other. Specify The Plastic Merchant | |
| | ~ | he claim subject to offset? No Yes | | | | |
| 4.36 | | ashington University Physicians | | | Last 4 digits of account number 6007 | _{\$} 195.49 |
| | | ninit. On ditude Name | | | When was the debt incurred? | * |
| | | priority Creditor's Name D Box 505462 | | | | |
| | Num | | | | As a fifther date area file, the states in Obset with the state | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Sai | int Louis | МО | 63150 | | |
| | City | o incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | | |
| | 1 | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: Student loans | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls th | he claim subject to offset? | | | Cother. Specify Medical Services | |
| | 1 | No | | | | |
| | <u> </u> | Yes | | | | |
| 4.36 | We | ei-Chen Cheng | | | Last 4 digits of account number | _{\$} 1,541.05 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | φ |
| | 595 | 51 Gentle Call | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | arksville | MD | 21209-1233 | _ | |
| | City | | State | ZI209-1233 ZIP Code | Contingent | |
| | | o incurred the debt? Check one. | | | Unliquidated Disputed | |
| | _ | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | | |
| | _ | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims | |
| | | | my uebt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is th | he claim subject to offset? | | | | |
| | | Yes | | | | |

| Debto | or 1 Castehan Chestopher Deboo | 1 Fi | ed 10/03/19 | Entered 10/03/19 17; 32: 42 Main Doci | ument |
|---------|----------------------------------------------------------------------------------------|---------------------------|------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | | | 0 | 52 of 221 | |
| Par | t 2: List All of Your NONPRIO | RITY Un | secured Claims | | |
| | Do any creditors have nonpriority ur ☐ No. You have nothing to report in the Yes | | | | |
| r ii | nonpriority unsecured claim, list the cre | ditor sepa ditor holds | rately for each claim | order of the creditor who holds each claim. If a creditor has a. For each claim listed, identify what type of claim it is. Do no ist the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.364 | Wei Wang | | | | Total claim |
| 4.50 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 2,565.00 |
| | 23 Puchala Dr Number Street | | | When was the debt incurred? | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Parlin | NJ State | 08859-3141 ZIP Code | Contingent | |
| | | State | ZIP Code | | |
| | Who incurred the debt? Check one. | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | i |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| 4.36 | William Card | | | Last 4 digits of account number | <u></u> \$1,432.50 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 1543 Jeffries Way | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Midlothian | VA | 23114-4324 | | |
| | City Who incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | | Student loans | |
| | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | ; |
| | Is the claim subject to offset? | | | Coner. Specity The Hastic Merchant | |
| | V No | | | | |
| 4.00 | Yes | | | | |
| 4.36 | William Chen | | | Last 4 digits of account number | _{\$} 817.00 |
| | Nonpriority Creditor's Name 135 E 54th St | | | When was the debt incurred? | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | New York | NY | 10022-4539 | _ | |
| | City | State | ZIP Code | | |
| | Who incurred the debt? Check one. | | | Unliquidated Disputed | |
| | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | | |
| | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | ☐ Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | 3 |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | V No Yes | | | | |

| Debt | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | Entered 10/0 <u>3/19ា17;រ32;</u> 42 Main Docu 53 of 221 | ument |
|------|----------------|----------------------------------------------------------------------------------|----------------------------|------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | t 2: | List All of Your NONPRIOF | RITY Uns | 0 | 55 67 221 | |
| [| | ny creditors have nonpriority una lo. You have nothing to report in thi es | | 0, | | |
| r | nonpr ncluc | riority unsecured claim, list the cred | ditor separ litor holds | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.36 | | liam Curley priority Creditor's Name | | | Last 4 digits of account number | _{\$} 120.00 |
| | | 62 Blackwood St | | | When was the debt incurred? | ۹ |
| | Num | ber Street | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | erside | CA | 92506-6247 | | |
| | City | | State | ZIP Code | | |
| | _ | o incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ~ I | he claim subject to offset? No Yes | | | | |
| 4.36 | | liam Dewitt | | | Last 4 digits of account number | _{\$} 477.50 |
| | | priority Creditor's Name | | | When was the debt incurred? | · |
| | |) Terra Vista St | | | | |
| | Num | ber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | | | | | |
| | Citv | ghton | CO State | 80601-4170 ZIP Code | | |
| | _ | o incurred the debt? Check one. | | | Disputed | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commur | nity debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | ls th | ne claim subject to offset? | | | Cother. Specify The Plastic Merchant | |
| | ~ I | | | | | |
| 1 26 | | Yes | | | | |
| 4.36 | Wi | lliam Harrop | | | Last 4 digits of account number | <u>\$100.05</u> |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | 383 Num | 34 Red Hill Rd | | | | |
| | Num | | | | As of the date you file, the claim is: Check all that apply. | |
| | Ch | arlottesville | VA | 22903-7917 | Contingent | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | Unliquidated | |
| | | Debtor 1 only | | | | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims | |
| | | Check if this claim is for a commun | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is th | he claim subject to offset? | | | Uner. Specity | |
| | | Yes | | | | |

| Debt | or 1 | First Name Middle Name | 1 File | ed 10/03/19 | Entered 10/03/19 17 : 32 : 42 Main Docu | iment |
|------|-----------------|-----------------------------------------------------------------------------------|--------------------------|-----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
| Par | 't 2: | List All of Your NONPRIOR | ITY Uns | • | | |
| [| _ | ny creditors have nonpriority uns lo. You have nothing to report in this es | | • • | | |
| ri | nonpi incluc | riority unsecured claim, list the cred | itor separ itor holds | ately for each claim. | rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| | | | | | | Total claim |
| 4.37 | | omen's Care Consultants | | | Last 4 digits of account number 3817 | _{\$} 48.24 |
| | | oriority Creditor's Name 23 N Ballas, Ste 120D | | | When was the debt incurred? | \$ <u>+0.2</u> + |
| | Numl | · | | | | |
| | | | | | | |
| | Sai | int Louis | мо | 63131 | As of the date you file, the claim is: Check all that apply. | |
| | City | | State | ZIP Code | Contingent | |
| | Who | o incurred the debt? Check one. | | | | |
| | | Debtor 1 only | | | L Disputed Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | | Student loans | |
| | | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commun | ity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify Medical Services | |
| | • | he claim subject to offset? No Yes | | | | |
| 4.37 | · Xia | aotian Austin | | | Last 4 digits of account number | <u>\$120.00</u> |
| | Nonr | priority Creditor's Name | | | When was the debt incurred? | |
| | | 05 Matthew Dr | | | | |
| | Num | nber Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | | | | | |
| | | pomington | IL | 61704-8654 | Contingent Unliquidated | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | | Student loans | |
| | _ | Debtor 1 and Debtor 2 only At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | _ | | | | that you did not report as priority claims | |
| | | Check if this claim is for a commun | ity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | he claim subject to offset? | | | | |
| | | No Yes | | | | |
| 4.37 | | | | | | |
| | | aoyang Olson | | | Last 4 digits of account number | \$ <u>369.00</u> |
| | | priority Creditor's Name | | | When was the debt incurred? | |
| | 93. Num | 31 16th Dr W | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Ev | erett | WA | 98204-2147 | | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | | |
| | _ | Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | Check if this claim is for a commun | ity debt | | Debts to pension or profit-sharing plans and other similar debts | |
| | ls tł | he claim subject to offset? | | | ✓ Other. Specify The Plastic Merchant | |
| | • | | | | | |
| | | Yes | | | | |

| Debte | or 1 | First Name Middle Name | 1 Fil | ed 10/03/19 | Entered 10/03/19 17;32;42 Main Docu | ument |
|-------|-------------------------|---------------------------------------------------------------------------------|----------------------------|------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| | | | | • | 55 of 221 | |
| Par | 't 2: | List All of Your NONPRIOR | RITY Un | secured Claims | | |
| [| | ny creditors have nonpriority un lo. You have nothing to report in th ′es | | • • | | |
| ri | nonp | riority unsecured claim, list the crea | ditor sepai ditor holds | rately for each claim | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.37 | Xia | aoyi Yu | | | | Total claim |
| 4.57 | | priority Creditor's Name | | | Last 4 digits of account number | _{\$} 2,837.00 |
| | 109 Num | 9 Mountain Violet ber Street | | | When was the debt incurred? | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | Irvi _{City} | ine | CA State | 92620-3103 ZIP Code | Contingent Unliquidated | |
| | _ | o incurred the debt? Check one. | | | | |
| | | Debtor 1 only Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | П | Check if this claim is for a commu | nitv debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | he claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | ~ | - | | | | |
| 4.37 | , Xu | an Wang | | | Last 4 digits of account number | _{\$} 425.05 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | |
| | | 46 N. Willard Ave | | | | |
| | Num Ap | | | | As of the date you file, the claim is: Check all that apply. | |
| | Sa | n Gabriel | CA | 91776-1634 | | |
| | City Wh | o incurred the debt? Check one. | State | ZIP Code | Unliquidated Disputed | |
| | | Debtor 1 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 2 only | | | | |
| | _ | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce | |
| | | At least one of the debtors and another | | | that you did not report as priority claims | |
| | | Check if this claim is for a commu | nity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | ls ti | he claim subject to offset? | | | Uther. Specify The Plastic Merchant | |
| | ~ | | | | | |
| 4.0- | · | Yes | | | | |
| 4.37 | Yił | hao Wong | | | Last 4 digits of account number | _{\$} 320.00 |
| | Non | priority Creditor's Name | | | When was the debt incurred? | * |
| | | 50 N. Ridgewood St | | | | |
| | | nber Street ot 403 | | | As of the date you file, the claim is: Check all that apply. | |
| | | ichita | KS | 67220-4429 | | |
| | City | , | State | ZIP Code | | |
| | | to incurred the debt? Check one. Debtor 1 only | | | Disputed | |
| | | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | | Debtor 1 and Debtor 2 only | | | Student loans | |
| | | At least one of the debtors and another | | | Obligations arising out of a separation agreement or divorce | |
| | | Check if this claim is for a commu | nity debt | | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| | ls ti ✔ | he claim subject to offset? No | | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | | Yes | | | | |

| Debt | or 1 Caster 1 Caster Deb C 1 | Last Name | ed 10/03/19 | | ument |
|------|-------------------------------------------------------------------------------------------|----------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| | | | • | 156 of 221 | |
| Par | t 2: List All of Your NONPRIORI | TY Un | secured Claims | | |
| [| Do any creditors have nonpriority unse ☐ No. You have nothing to report in this Yes | | • • | | |
| ri | nonpriority unsecured claim, list the credit | or sepai or holds | rately for each clair | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.27 | Yi Xia | | | | Total claim |
| 4.37 | Nonpriority Creditor's Name | | | Last 4 digits of account number | _{\$} 650.05 |
| | 607 N. Cayuga St Number Street | | | When was the debt incurred? | * |
| | Apt 1R | | | | |
| | lithe op | IV. | 14050 0075 | As of the date you file, the claim is: Check all that apply. | |
| | | VY tate | 14850-3675 ZIP Code | Contingent | |
| | Who incurred the debt? Check one. | luic | | Unliquidated | |
| | Debtor 1 only | | | Disputed | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a communit | v debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | | | | | |
| | Yes | | | | |
| 4.37 | Yoa Li | | | Last 4 digits of account number | _{\$} 659.00 |
| | Nonpriority Creditor's Name | | | - When was the debt incurred? | |
| | 4008 Sloanwood Dr | | | | |
| | Number Street | | | | |
| | | | | As of the date you file, the claim is: Check all that apply. | |
| | Murrysville F | PA | 15668-1042 | Contingent | |
| | City S Who incurred the debt? Check one. | State | ZIP Code | | |
| | Debtor 1 only | | | | |
| | Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At least one of the debtors and another | | | that you did not report as priority claims | |
| | Check if this claim is for a communit | y debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | | Other. Specify The Plastic Merchant | |
| | ✓ No | | | | |
| | Yes | | | | |
| 4.37 | Youngjae Byun | | | Last 4 digits of account number | _{\$} 830.00 |
| | Nonpriority Creditor's Name | | | When was the debt incurred? | |
| | 432 Golden Meadows Circle | | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | |
| | Sunwanee | GA | 30024-2268 | - | |
| | | State | ZIP Code | | |
| | Who incurred the debt? Check one. | | | Unliquidated Disputed | |
| | Debtor 1 only | | | | |
| | Debtor 2 only Debtor 1 and Debtor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | _ | + امام ر | | that you did not report as priority claims | |
| | Check if this claim is for a communit | ly debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | Cother. Specify The Plastic Merchant | |
| | V No Yes | | | | |
| 1 | | | | | |

| Debt | or 1 Caster 19 4 5 20 0 Pr D 0 0 C 1 Finite Name Middle Name Last Name | led 10/03/19 | Entered 10/0 <u>3/1917;32;42 Main Docu</u> 57 of 221 | iment |
|------|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Bor | | 0 | 57 01 221 | |
| Par | t 2: List All of Your NONPRIORITY Un | secured Claims | | |
| | Do any creditors have nonpriority unsecured No. You have nothing to report in this part. So Yes | • • | | |
| i | nonpriority unsecured claim, list the creditor sepa | rately for each clain | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not ist the other creditors in Part 3.If you have more than three no | list claims already |
| 4.37 | Yuqing Peterson | | | Total claim |
| 4.37 | Nonpriority Creditor's Name | | Last 4 digits of account number | _{\$} 525.25 |
| | 180 Sylvian Way Number Street | | When was the debt incurred? | |
| | | | As of the date you file, the claim is: Check all that apply. | |
| | Los Altos CA City State | 94022-2254 ZIP Code | Contingent Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | Disputed Type of NONPRIORITY unsecured claim: Student loans | |
| | At least one of the debtors and another Check if this claim is for a community debt | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| 4.38 | Yu-Sheng Lo | | Last 4 digits of account number | <u>\$</u> 217.50 |
| | Nonpriority Creditor's Name | | When was the debt incurred? | |
| | 3500 Greystone Dr | | | |
| | Apt 251 | | As of the date you file, the claim is: Check all that apply. | |
| | Austin TX | 78731-2306 | | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the claim subject to offset? | | | |
| 4.38 | Zachary Finkelstein | | Last 4 digits of account number | \$ <u>240.00</u> |
| | Nonpriority Creditor's Name 425 Eashington Blvd. | | When was the debt incurred? | |
| | Number Street Apt 2204 | | As of the date you file, the claim is: Check all that apply. | |
| | Jersey City NJ | 07310-2051 | Contingent | |
| | City State Who incurred the debt? Check one. | ZIP Code | Unliquidated Disputed | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim is for a community debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify | |
| | Is the claim subject to offset? | | Uther. Specify | |

| Debte | or 1 Ca | High and Chostopher Dead C | Last Name | ed 10/03/19 | Entered 10/0 <u>3/19ា17;រ32;</u> 42 Main Docu 58 of 221 | ument |
|-------|--------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|
| Par | rt 2: Li | ist All of Your NONPRIO | RITY Uns | • | 50 01 221 | |
| [| _ ` | reditors have nonpriority un ou have nothing to report in th | | • • | ? court with your other schedules. | |
| r | nonpriority | unsecured claim, list the cre | editor separa | ately for each claim | order of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already |
| 4.00 | Zachan | (Koonta | | | | Total claim |
| 4.38 | - | / Koontz Creditor's Name | | | Last 4 digits of account number | _{\$} 136.50 |
| | 325 Ber | nt Creek Dr | | | When was the debt incurred? | |
| | Number | Street | | | | |
| | Garland ^{City} Who inc I Debto | urred the debt? Check one. | TX State | 75040-1137 ZIP Code | As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed | |
| | Debto Debto At lea Cheo | - | | | Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| 4.38 | | nson-Serotta | | | Last 4 digits of account number | \$ <u>270.55</u> |
| | 8715 1s Number Apt 127 Silver S City Who inc Debto Debto Debto At lea | Street C pring curred the debt? Check one. or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and another ck if this claim is for a commu | | 20910-3529 ZIP Code | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |
| | Is the cla No Yes | aim subject to offset? | | | | |
| 4.38 | Zhihen | g Xu | | | Last 4 digits of account number | _{\$} 357.00 |
| | Nonpriority 69 Dixo Number | / Creditor's Name on Dr Street | | | When was the debt incurred? | ¥ <u></u> |
| | Debto | curred the debt? Check one. | NY State | 14223-1834 ZIP Code | Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | | k if this claim is for a commu aim subject to offset? | unity debt | | Debts to pension or profit-sharing plans, and other similar debts Other. Specify The Plastic Merchant | |

| Debt | or 1 Ca | a Stehand Careston Der | DBOC1 F | iled 10/03/19 | Entered 10/03/19 17:32:42 Main Docu | ument |
|------|------------------------|----------------------------------------------------|-----------------------------------------|------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|
| | | First Name Middle Nam | | . | 159 of 221 | |
| Par | rt 2: L | ist All of Your NO | NPRIORITY U | nsecured Claims | | |
| 3. I | Do any c | reditors have nonpri | ority unsecured | l claims against you | u? | |
| | □ No. Y ☑ Yes | ou have nothing to rep | port in this part. S | Submit this form to th | e court with your other schedules. | |
| | res 🗠 | | | | | |
| i | nonpriorii included | ty unsecured claim, list | t the creditor sep one creditor hold | arately for each clair | order of the creditor who holds each claim. If a creditor has n. For each claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | t list claims already |
| 4.38 | Ł Zhi Zhe | ana | | | | Total claim |
| 4.50 | | y Creditor's Name | | | Last 4 digits of account number | _{\$} 237.00 |
| | | akeshore Dr | | | When was the debt incurred? | |
| | Number #6095 | Street | | | | |
| | #0035 | | | | As of the date you file, the claim is: Check all that apply. | |
| | New O | rleans | LA | 70122-3549 | | |
| | City | | State | ZIP Code | | |
| | _ | curred the debt? Check | one. | | Disputed | |
| | _ | tor 1 only tor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | tor 1 and Debtor 2 only | | | Student loans | |
| | _ | ast one of the debtors and | d another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 🗌 Che | ck if this claim is for a | community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | | laim subject to offset? | • | | Other. Specify The Plastic Merchant | |
| | No | and subject to onset? | | | | |
| | Yes | | | | | |
| | | | | | Last 4 digits of account number | \$ |
| | Nonpriorit | ty Creditor's Name | | | - When was the debt incurred? | |
| | | | | | | |
| | Number | Street | | | As of the date you file, the claim is: Check all that apply. | |
| | | | | | Contingent | |
| | City | | State | ZIP Code | Unliquidated | |
| | | curred the debt? Check or 1 only | cone. | | | |
| | _ | or 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | Debt | or 1 and Debtor 2 only | | | Student loans Obligations arising out of a separation agreement or divorce | |
| | At le | ast one of the debtors and | d another | | that you did not report as priority claims | |
| | 🗌 Che | ck if this claim is for a | community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the c | laim subject to offset? | • | | Other. Specify | |
| | No No | | | | | |
| | Yes | | | | | |
| | | | | | Last 4 digits of account number | \$ |
| | Nonpriori | ty Creditor's Name | | | When was the debt incurred? | |
| | Number | Street | | | | |
| | | | | | As of the date you file, the claim is: Check all that apply. | |
| | | | | | Contingent | |
| | City Who in | curred the debt? Check | State | ZIP Code | | |
| | Debt | tor 1 only | | | Disputed | |
| | _ | tor 2 only | | | Type of NONPRIORITY unsecured claim: | |
| | _ | tor 1 and Debtor 2 only ast one of the debtors and | danother | | Student loans Obligations arising out of a separation agreement or diverse | |
| | | | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | L Che | ck if this claim is for a | community debt | : | Debts to pension or profit-sharing plans, and other similar debts | |
| | | laim subject to offset? | 2 | | Other. Specify | |
| | | | | | | |
| 1 | Yes | | | | | |

| Debtor 1 | Casterne | 162300er DBOC 1 | L Filed | 10/03/19 | Entered | 10/03/10 17:32:42 | Main Document |
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| | First Name | Middle Name | Last Name | Pa 16 | 50 of 221 | | |

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| ARSI | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
|--------------------------------|-------------|---------------------|-------------------------------------------------------------------------------------------------|
| Name | | | |
| 555 St. Charles Drive, Suite | 100 | | Line <u>4.25</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Clai |
| These and Oales | | | Last 4 digits of account number |
| Thousand Oaks | CA | 2191360 ZIP Code | |
| | | ZIF Code | |
| Abbott Osborn Van Vliet PL | C | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 974 73rd Street | | | Line 4.24 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | |
| Suite 20 | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | |
| West Des Moines City | IA | ZIP Code | Last 4 digits of account number |
| • | | | |
| Alltran Financial, LP | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name | | | |
| PO Box 722929 | | | Line 4.80 of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | |
| Houston | TX | 77272 | Last 4 digits of account number 9816 |
| City | State | ZIP Code | |
| Alltran Financial, LP | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | Line 4.84 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| PO Box 722929 Number Street | | | |
| | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Houston | ТХ | 77272 | Last 4 divide of account number 5776 |
| City | State | ZIP Code | Last 4 digits of account number |
| Alltran Financial, LP | | | On which as the in Read 4 on Read 6 did on a list the entries I are dited. |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO Box 722929 | | | Line 4.79 of (Check one): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | Claims |
| Houston | τν | 77070 | 0070 |
| Houston | TX State | 77272 ZIP Code | Last 4 digits of account number 0079 |
| Alltran Financial, LP | UIC | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO Box 722929 | | | Line <u>4.85</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Phony Unsecured Claims |
| | | | Claims |
| Houston | ТХ | 77272 | Last 4 digits of account number 1651 |
| City | State | ZIP Code | Lust - aigits of account number |
| Alltran Financial, LP | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO Box 722929 | | | Line <u>4.25</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Phony Unsecured Claims |
| | | | Claims |
| Houston | ТХ | 77272 | 0000 |
| City | State | ZIP Code | Last 4 digits of account number 0000 |

| Debtor 1 | Caster 19 | 462300er DBOC 1 | Filed | | | 10/03/10 17 :32:42 | Main Document |
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| | First Name | Middle Name | Last Name | Pg 16 | 1 of 221 | | |

| Alltran Financial, LP | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
|-----------------------------------------------|-------------|-------------------|--------------------------------------------------------------------------------------------------------------------------------------------|
| Name | | | |
| PO Box 722929 | | | Line <u>4.77</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Clain |
| Houston | TX State | 77272 ZIP Code | Last 4 digits of account number |
| Alltran Financial, LP | | 2 0000 | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name PO Box 722929 | | | Line 4.81 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Claims |
| Houston | TX State | 77272 ZIP Code | Last 4 digits of account number |
| Alltran Financial, LP | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name PO Box 722929 | | | Line 4.83 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Claims |
| Houston | TX State | 77272 ZIP Code | Last 4 digits of account number |
| Alltran Financial, LP | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO Box 722929 Number Street | | | Line <u>4.78</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| | | | Claims |
| Houston | TX State | ZIP Code | Last 4 digits of account number |
| Alltran Financial, LP | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO Box 722929 Number Street | | | Line 4.10 of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims |
| Succet | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Houston | TX | 77272 | Last 4 digits of account number |
| ^{City} Blitt & Gaines, PC | State | ZIP Code | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name | | | |
| 707 N. 2nd Street, Suite 306 Number Street | | | Line <u>4.63</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| | | | Claims |
| Saint Louis | MO | 63102 ZIP Code | Last 4 digits of account number |
| Capital Management Service | | | On which entry in Dant 4 on Dant 9 did your list the entry of an discus |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO Box 120 | | | Line 4.10 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Claims |
| Buffalo | NY | 14206 | Last 4 digits of account number |
| City | State | ZIP Code | Last 4 digits of account number |

| Debtor 1 | Casterne | 16230 ^{0er D} BOC 1 | . Filed | 10/03/19 | Entered | 10/03/10 17:32:42 | Main Document |
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| | First Name | Middle Name | Last Name | Ρα 16 | 52 of 221 | | |

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| Capital Management Services | , LP | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
|---------------------------------------------------|-------------|-------------------|-------------------------------------------------------------------------------------------------|--|--|
| Name | | | | | |
| PO Box 120 | | | Line 4.41 of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claim | | |
| Buffalo | NY State | 14220 ZIP Code | Last 4 digits of account number | | |
| Citibank, N.A. | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| _{Name} PO Box 790040 | | | Line 4.12 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | | | |
| Succi | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| St. Louis ^{City} | MO | 63179 ZIP Code | Last 4 digits of account number 6765 | | |
| Consumer Collection Manager | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Vame | | | | | |
| PO Box 1839 | | | Line 4.36 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Maryland Heights | MO | 63043 ZIP Code | Last 4 digits of account number | | |
| Fifth Third Bank | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name | | | | | |
| 1830 East Paris SE | | | Line <u>4.24</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street MDRSCB3E-RV | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Grand Rapids | MI State | 49546 ZIP Code | Last 4 digits of account number 2354 | | |
| | | | | | |
| Financial Recovery Services, I Name | nc. | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| PO Box 385908 | | | Line <u>4.41</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | ✓ Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Minneapolis | MN | 55438 | Last 4 digits of account number | | |
| ^{City} Financial Recovery Services, I | State | ZIP Code | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name | | | | | |
| PO Box 385908 | | | Line 4.67 of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Minneapolis | MN | 55438 | Last 4 digits of account number | | |
| City | State | ZIP Code | | | |
| Firstsource Advantage, LLC | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name 205 Bryant Woods South | | | 4.01 — | | |
| 205 Bryant Woods South Number Street | | | Line <u>4.21</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | |
| | | | Claims | | |
| Amherst | NY State | 14228 ZIP Code | Last 4 digits of account number 7048 | | |
| City | | | | | |

| Debtor 1 | Caster 19 | Chester Der Der Der 1 | Filed | 10/03/19 | Entered | 10/03/19 17:32:42 | Main Document |
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| | First Name | Middle Name | Last Name | Pa 16 | 53 of 221 | | |

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| then list the collection agency | here. Simi | larly, if you hav | ou for a debt you owe to someone else, list the original creditor in Parts 1 or e more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. |
|---------------------------------|-------------|-------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Frontline Asset Strategies | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| lame | | | 4 07 ···· |
| 2700 Snelling Ave N. | | | Line <u>4.67</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Jumber Street Ste 250 | | | Part 2: Creditors with Nonpriority Unsecured Clair |
| Saint Paul | MN | 55113 | Last 4 digits of account number |
| Dity | State | ZIP Code | |
| GC Services Limited Partnership | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| lame | | | |
| 6330 Gulfton | | | Line 4.10 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims |
| lumber Street | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | Claims |
| Houston | ТХ | 77081 | Last 4 digits of account number 6737 |
| Sity | State | ZIP Code | |
| Glass Mountain Capital LLC | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| lame | | | |
| 1930 Thoreau Drive | | | Line 4.68 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims |
| lumber Street | | | Part 2: Creditors with Nonpriority Unsecured |
| Ste. 100 | | | Claims |
| Schaumburg | IL | 60173 | Last 4 digits of account number |
| ity | State | ZIP Code | |
| Global Credit & Collection Corp | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| lame | | | 4.10 |
| 4839 N. Elston Ave. | | | Line <u>4.12</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| lumber Street | | | ✓ Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago | IL | 60630 | |
| Dity | State | ZIP Code | Last 4 digits of account number |
| Hood & Stacy, P.A. | | | |
| lame | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| PO Box 271 | | | Line 4.24 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims |
| lumber Street | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | Claims |
| Bentonville | AR | 72712 | Last 4 digits of account number 3148 |
| Dity | State | ZIP Code | Last 4 digits of account number 3148 |
| Hood & Stacy, P.A. | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| lame | | | |
| PO Box 271 | | | Line <u>4.23</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| lumber Street | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | |
| | | | |
| Bentonville | AR State | 72712 ZIP Code | Last 4 digits of account number 3147 |

Line <u>4.35</u> of (*Check one*): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

PO Box 64437

Street

MN

State

55164

ZIP Code

Number

St. Paul

City

| Debtor 1 | Casterneg. | Chescoper Democ 1 | L Filed | 10/03/19 | Entered | 10/03/10 17:32:42 | Main Document |
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| | First Name | Middle Name | Last Name | Ρα 16 | 54 of 221 | | |

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| James Nathan Overstreet | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
|--------------------------------|-------|----------|----------------------------------------------------------------------------------------------|--|--|
| | | | | | |
| 8711 Highway 6 North | | | Line 4.22 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street Suite 230 | | | Part 2: Creditors with Nonpriority Unsecured Claim | | |
| Houston | ТХ | 77095 | Last 4 digits of account number | | |
| City | State | ZIP Code | | | |
| Lawson Hamilton & Associates | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name | | | | | |
| 610 N. Glenoaks Blvd Suite 101 | | | Line 4.26 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Burbank | СА | 91502 | 5700 | | |
| Dity | State | ZIP Code | Last 4 digits of account number 5798 | | |
| MRS BPO LLC | | | On which entry in Part 1 or Part 2 did you list the avisinal availabre? | | |
| lame | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| 1930 Olney Ave | | | Line 4.80 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | |
| lumber Street | | | Part 2: Creditors with Nonpriority Unsecured | | |
| | | | Claims | | |
| Cherry Hill | NJ | 08003 | Last 4 digits of account number | | |
| Sity MRS BPO LLC | State | ZIP Code | | | |
| lame | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| 1930 Olney Ave | | | Line 4.84 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured | | |
| | | | Claims | | |
| Cherry Hill | NJ | 08003 | Last 4 digits of account number | | |
| City | State | ZIP Code | | | |
| MRS BPO LLC | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| 1930 Olney Ave | | | Line 4.79 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | |
| lumber Street | | | Part 2: Creditors with Nonpriority Unsecured | | |
| | | | Claims | | |
| Cherry Hill | NJ | 08003 | Last 4 digits of account number | | |
| City | State | ZIP Code | | | |
| MRS BPO LLC | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| lame 1930 Olney Ave | | | Line <u>4.85</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Phony Unsecured Claims | | |
| | | | Claims | | |
| Cherry Hill | NJ | 08003 | Last 4 digits of account number | | |
| Dity | State | ZIP Code | | | |
| MRS BPO LLC | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| | | | | | |
| 1930 Olney Ave | | | Line 4.76 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured | | |
| Cherry Hill | NJ | 08003 | Claims | | |
| - | | | Last 4 digits of account number | | |
| City | State | ZIP Code | | | |

| Debtor 1 | Casterne | 2h62330er DBOC 1 | L Filed | 10/03/19 | Entered | 10/03/10 17 (* 32 · 42 | Main Document |
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| | First Name | Middle Name | Last Name | Pa 16 | 55 of 221 | | |

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| McCarthy, Burgess & Wolff | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
|--------------------------------|---------------------------------------|----------|----------------------------------------------------------------------------------------------------------|--|--|--|
| Name | | | | | | |
| 26000 Cannon Road | | | Line 4.35 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Clain | | | |
| Bedford | OH | 44146 | Last 4 digits of account number | | | |
| City | State | ZIP Code | | | | |
| McNeilePappas LLC | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name 14701 East 42nd Street | | | Line 4.12 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | · · · · · · · · · · · · · · · · · · · | | · · · · | | | |
| | | | Claims | | | |
| Independence | МО | 64055 | Last 4 digits of account number | | | |
| City | State | ZIP Code | | | | |
| Medicredit, Inc. | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name | | | | | | |
| PO Box 1629 | | | Line 4.31 of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | Claims | | | |
| Maryland Heights | MO | 63043 | Last 4 digits of account number 7848 | | | |
| City | State | ZIP Code | Last 4 digits of account number 7040 | | | |
| Medicredit, Inc. | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| | | | | | | |
| PO Box 1629 | | | Line 4.26 of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | Claims | | | |
| Maryland Heights | MO | 63043 | Last 4 digits of account number | | | |
| City | State | ZIP Code | Last 4 digits of account number | | | |
| Medicredit, Inc. | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name | | | 4.22 - | | | |
| PO Box 1629 | | | Line $\underline{4.32}$ of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | Claims | | | |
| Maryland Heights | MO | 63043 | | | | |
| City | State | ZIP Code | Last 4 digits of account number | | | |
| Municipal Services Bureau | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| Name | | | | | | |
| PO Box 16755 | | | Line 4.32 of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Austin | ТХ | 78761 | | | | |
| City | State | ZIP Code | Last 4 digits of account number | | | |
| Nationwide Credit, Inc. | | | On which entry in Dant 4 on Dant 9 did your list the entrying and it | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | | |
| PO Box 14581 | | | Line 4.80 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured | | | |
| | | | Claims | | | |
| Des Moines | IA | 50306 | Last 4 digits of account number 8819 | | | |
| City | State | ZIP Code | | | | |

| Debtor 1 | Caster 19. | Chescoper Democ 1 | L Filed | 10/03/19 | Entered | 10/03/10 17:32:42 | Main Document |
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| | First Name | Middle Name | Last Name | Pa 16 | 56 of 221 | | |

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| Nationwide Credit, Inc. | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
|---------------------------------|-------------|-------------------|----------------------------------------------------------------------------------------------|--|--|
| Name | | | | | |
| PO Box 14581 | | | Line 4.84 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claim | | |
| Des Moines | IA State | 50306 ZIP Code | Last 4 digits of account number 9262 | | |
| Nationwide Credit, Inc. | Sidle | ZIF Code | On which outroin Dout 4 on Dout 9 did you list the entries I are ditor? | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| PO Box 14581 | | | Line 4.79 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | |
| lumber Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Des Moines ^{Sity} | IA State | 50306 ZIP Code | Last 4 digits of account number 9437 | | |
| Nationwide Credit, Inc. | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| PO Box 14581 | | | Line 4.85 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Claims | | |
| Des Moines | IA State | 50306 ZIP Code | Last 4 digits of account number 1045 | | |
| Nationwide Credit, Inc. | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| _{Name} PO Box 14581 | | | Line 4.21 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Phone Unsecured Claims | | |
| | | | Claims | | |
| Des Moines | IA State | 50306 ZIP Code | Last 4 digits of account number 7353 | | |
| Nationwide Credit, Inc. | olulo | 2 0000 | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name PO Box 14581 | | | Line 4.76 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | ✓ Part 2: Creditors with Nonpriority Unsecured | | |
| | | | Claims | | |
| Des Moines | IA | 50306 | Last 4 digits of account number ¹³⁴² | | |
| City | State | ZIP Code | | | |
| One Advantage, LLC | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| ame 7650 Magna Drive | | | Line <u>4.26</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| | | | Claims | | |
| Belleville | IL | 62223 | Last 4 digits of account number | | |
| City | State | ZIP Code | | | |
| Pittenger Law Group, LLC | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name | | | | | |
| 6900 College Blvd, Suite 325 | | | Line <u>4.25</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| Overland Park | KS | 66211 | | | |
| City | State | ZIP Code | Last 4 digits of account number | | |

| Debtor 1 | Casterneg. | Chestopher Deso C | 1 Filed | 10/03/19 | Entered | 10/03/19 17 (;;32;42 | Main Document |
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| Premiere Credit of North Am | | | |
|-------------------------------|---------------|-------------------|----------------------------------------------------------------------------------------------|
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| | | | |
| PO Box 19309 | | | Line of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Cla |
| Indianapolis | IN | 46219 | Last 4 digits of account number |
| City | State | ZIP Code | |
| Receivables Performance M | anagement LLC |) | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name | | | 4 25 |
| 20818 44th Ave W, Suite 14 | 0 | | Line 4.35 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | Claims |
| Lynnwood | WA | 98036 | Last 4 digits of account number |
| City | State | ZIP Code | Lust + digits of decount number |
| Unifund CCR, LLC | | | On which entry in Daut 4 on Daut 0 did way list the entry of the O |
| Vame | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 10625 Techwoods Circle | | | Line 4.12 of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | |
| | | | Claims |
| | | | |
| Cincinnati | OH | 45242 | Last 4 digits of account number |
| City | State | ZIP Code | - |
| United Collection Bureau, In | C | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name | | | |
| 5620 Southwyck Blvd, Suite | 206 | | Line <u>4.77</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | Claims |
| Toledo | OH | 43614 | Last 4 digits of account number 9402 |
| City | State | ZIP Code | Last 4 digits of account number |
| United Collection Bureau, Ind | <u>`</u> | | On which entry in Part 4 or Part 2 did you list the original creditor? |
| Vame | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 5620 Southwyck Blvd, Suite | 206 | | Line 4.81 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | |
| | | | ✓ Part 2: Creditors with Nonpriority Unsecured Claims |
| | | | |
| Toledo | OH | 43614 | Last 4 digits of account number 8006 |
| City | State | ZIP Code | |
| United Collection Bureau, In | с. | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| Name | | | 4.00 — |
| 5620 Southwyck Blvd, Suite | 206 | | Line 4.83 of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | Claims |
| Toledo | ОН | 43614 | Last 4 digits of account number 7621 |
| City | State | ZIP Code | |
| United Collection Bureau, In | C. | | |
| Vame | | | On which entry in Part 1 or Part 2 did you list the original creditor? |
| 5620 Southwyck Blvd, Suite | 206 | | |
| Number Street | | | Line <u>4.78</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims |
| | | | Part 2: Creditors with Nonpriority Unsecured |
| | | | Claims |
| Toledo | OH | 43614 ZIP Code | Last 4 digits of account number 2048 |
| | State | | |

| Debtor 1 | Casterneg. | Apper Der Der Der Der Der Der Der Der Der D | . Filed | 10/03/19 | Entered | 10/03/10 17:32:42 | Main Document |
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| | First Name | Middle Name | Last Name | Pa 1 | 68 of 221 | | |

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| United Collection Bureau, Inc | с. | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
|-------------------------------|-------|----------|----------------------------------------------------------------------------------------------------------|--|--|
| Name | | | 4 00 — | | |
| 5620 Southwyck Blvd, Suite | 206 | | Line 4.86 of (<i>Check one</i>): \square Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Clair | | |
| Toledo | ОН | 43614 | Last 4 digits of account number 0007 | | |
| City | State | ZIP Code | | | |
| United Collection Bureau, In | с. | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name | 000 | | | | |
| 5620 Southwyck Blvd, Suite | 206 | | Line $\underline{4.82}$ of (<i>Check one</i>): \Box Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Claims | | |
| Toledo | ОН | 43614 | Last 4 digits of account number 2533 | | |
| City | State | ZIP Code | | | |
| Zwicker & Associates, P.C. | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| | | | | | |
| 80 Minuteman Rd | | | Line <u>4.23</u> of (<i>Check one</i>): Part 1: Creditors with Priority Unsecured Claims | | |
| Number Street | | | Claims | | |
| Andover | MA | 01810 | Last 4 digits of account number 6227 | | |
| City | State | ZIP Code | Lasi + uigits of account nulliber | | |
| | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name | | | | | |
| | | | Line of (Check one): | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured | | |
| | | | Claims | | |
| <u></u> | Ctata | ZID Code | Last 4 digits of account number | | |
| City | State | ZIP Code | | | |
| | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name | | | | | |
| Number Official | | | Line of (<i>Check one</i>): | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | |
| | | | νιαπτο | | |
| ~ | | 710.0 | Last 4 digits of account number | | |
| City | State | ZIP Code | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| Name | | | Line of (Check one): | | |
| Number Street | | | | | |
| | | | Claims | | |
| | | | | | |
| City | State | ZIP Code | Last 4 digits of account number | | |
| , | Cidio | 2 0000 | | | |
| Name | | | On which entry in Part 1 or Part 2 did you list the original creditor? | | |
| | | | Line of (Check one): | | |
| Number Street | | | Part 2: Creditors with Nonpriority Unsecured | | |
| | | | Claims | | |
| | | | | | |
| City | State | 715.0 | Last 4 digits of account number | | |
| ony | State | ZIP Code | | | |

| | dd the Amounts for Each Type of Unsecured Claim | |
|-------------------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| . Total the a Add the a | amounts of certain types of unsecured claims. This inform mounts for each type of unsecured claim. | nation is for statistical reporting purposes only. 28 U.S.C. § 159. |
| | | Total claim |
| Total claims | 6a. Domestic support obligations | 6a. <u>\$0.00</u> |
| rom Part 1 | 6b. Taxes and certain other debts you owe the government | 6b. <u>\$</u> 2,149.38_ |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. <u>\$0.00</u> |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | ^{6d.} + _{\$} 0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. <u>\$2,149.38</u> |
| | | Total claim |
| otal claims | 6f. Student loans | 6f. <u>\$ 0.00</u> |
| rom Part 2 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. \$0.00 |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. <u>\$</u> 0.00 |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. + <u>\$</u> 834,404.32 |
| | 6j. Total. Add lines 6f through 6i. | ^{6j.} \$ 834,404.32 |

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| Fill in this information to identify your case: | | | | | | | | |
|---------------------------------------------------------------------|----------------------------|-------------|-----------|--|--|--|--|--|
| Debtor | Michael Christopher Dean | | | | | | | |
| Debtoi | First Name | Middle Name | Last Name | | | | | |
| Debtor 2 | Meredith Leigh Miller Dean | | | | | | | |
| (Spouse If filing) | First Name | Middle Name | Last Name | | | | | |
| United States Bankruptcy Court for the Eastern District of Missouri | | | | | | | | |
| Case number | | | | | | | | |
| | | | | | | | | |

Check if this is an amended filing

Official Form 106G Schedule G: Executory Contracts and Unexpired Leases

12/15

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

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

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

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

| | Person or company with wh | iom you | have the contract or lease | State what the contract or lease is for | | |
|-----|------------------------------------|---------|----------------------------|------------------------------------------------------|--|--|
| 2.1 | Louisa Miller | | | Residential Lease - 3464 Charlestowne Crossing Drive | | |
| | Name 3464 Charlestowne Crossing | g Dr | | Lessee | | |
| | Street Saint Charles | МО | 63301 | | | |
| | City | State | ZIP Code | | | |
| 2.2 | | | | | | |
| | Name | | | | | |
| | Street | | | _ | | |
| | City | State | ZIP Code | | | |
| 2.3 | | | | | | |
| | Name | | | | | |
| | Street | | | _ | | |
| | City | State | ZIP Code | — | | |
| 2.4 | | | | | | |
| | Name | | | | | |
| | Street | | | — | | |
| | City | State | ZIP Code | _ | | |
| 2.5 | | | | | | |
| | Name | | | | | |
| | Street | | | — | | |
| | City | State | ZIP Code | | | |

| Fill in this in | formation to identify you | ur case: | |
|---------------------|-------------------------------|---------------------------|-----------|
| Debtor 1 | | | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Meredith Leigh Miller Dean | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: Eas | tern District of Missouri | |
| Case number | | | |
| (If known) | | | |
| | | | |

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

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

| 1. <u>D</u> | o you have any codebtor | s? (If you are filing a joint case, do not l | ist either spouse as | a codebtor.) |
|-------------|-----------------------------------------------|--------------------------------------------------------------------------------------|----------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | | | | |
| | - | ve you lived in a community property ouisiana, Nevada, New Mexico, Puerto | - | (Community property states and territories include ington, and Wisconsin.) |
| | ✓ No. Go to line 3. Yes. Did your spouse, for | ormer spouse, or legal equivalent live w | ith you at the time? | |
| | No Yes. In which comm | unity state or territory did you live? | | Fill in the name and current address of that person. |
| | Name of your spouse, for | mer spouse, or legal equivalent | | |
| | Number Street | | | |
| | City | State | ZIP Code | |
| s | shown in line 2 again as a | codebtor only if that person is a gua 106D), <i>Schedule E/F</i> (Official Form 1 | rantor or cosigner | if your spouse is filing with you. List the person r. Make sure you have listed the creditor on <i>le G</i> (Official Form 106G). Use <i>Schedule D,</i> |
| | Column 1: Your codebtor | | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.1 | | | | |
| | Name | | | Schedule D, line Schedule E/F, line |
| | Street | | | Schedule G, line |
| | City | State | ZIP Code | |
| 3.2 | | | | Schedule D, line |
| | Name | | | Schedule E/F, line |
| | Street | | | Schedule G, line |
| | City | State | ZIP Code | |
| 3.3 | Name | | | Schedule D, line |
| | | | | Schedule E/F, line |
| | Street | | | Schedule G, line |
| | City | State | ZIP Code | |

| Fill in this in | formation to ide | ntify your case: | | |
|---------------------------|----------------------|------------------------------|-----------|-------------------------------------------|
| Debtor 1 | | istopher Dean | | |
| Debtor 2 | Meredith Lei | igh Miller Dean | Last Name | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for | the: _ Eastern District of M | lissouri | |
| Case number (If known) | | | · · · | Check if this is: |
| (II KIOWII) | | | | An amended filing |
| | | | | A supplement showing postpetition chapter |
| ~~ | (| | | income as of the following date: |
| Official Fo | orm 1061 | | | MM / DD / YYYY |

Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

| If you have more than one job, attach a separate page with | | | | | • • |
|----------------------------------------------------------------|-------------------------------|---------------|-----------------------|------------------------------|----------------|
| information about additional employers. | ge with | | Employed | ed | |
| Include part-time, seasonal, or self-employed work. | 0 <i>1</i> | Assistant I | Manager - National Ac | Secretary | |
| Occupation may include student or homemaker, if it applies. | Occupation Employer's name | | an Cleaning Services | | n R-V School |
| | Employer's address | Number Street | h Fifth Street | 3489 Bosche Number Street | rtown Road |
| | | Suite 301 | | | |
| | | | les, MO 63301 | Saint Charles | |
| | | City | State ZIP Code | City | State ZIP Code |
| | How long employed the | re? 1 month | | 1 month | |
| | | | | | |
| art 2: Give Details About | Monthly Income | | | | |

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

| | | For Debtor 1 | For Debtor 2 or non-filing spouse |
|------------------------------------------------------------------------------------------------------------------------------------------------------|----|---------------------|-----------------------------------|
| 2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | 2. | \$3,159.65 | \$2,860.00 |
| 3. Estimate and list monthly overtime pay. | 3. | + \$0.00 | + \$0.00 |
| 4. Calculate gross income. Add line 2 + line 3. | 4. | \$ <u>3,159.6</u> 5 | \$2,860.00 |

12/15

Camichael Chastophe Deah Filed 10/03/19 Entered 10/03/19 17:32:42 Main Document

Debtor 1

| | | | F | or l | Debtor 1 | | | | ebtor 2 or ling spouse | | | | |
|-----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------|--------|------|---------------|-----|-------|-------------|---------------------------------------|---|-----|---------------|------------------|
| 5. | Copy line 4 here | ▶ 4. | \$ | 3 | 3,159.65 | | | \$ | 2,860.00 | | | | |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | \$ | | 341.38 | | | \$ | 202.20 | | | | |
| | 5b. Mandatory contributions for retirement plans | 5b. | τ. | | 0.00 | | | • \$ | 195.98 | | | | |
| | 5c. Voluntary contributions for retirement plans | 5c. | \$ | | 0.00 | | | \$ | 0.00 | | | | |
| | 5d. Required repayments of retirement fund loans | 5d. | \$ | | 0.00 | | | \$ | 0.00 | | | | |
| | 5e. Insurance | 5e. | \$ | | 0.00 | | | \$ | 26.92 | | | | |
| | 5f. Domestic support obligations | 5f. | \$ | | 0.00 | | | \$ | 0.00 | | | | |
| | 5g. Union dues | 5g. | \$ | | 0.00 | | | \$ | 0.00 | | | | |
| | 5h. Other deductions. Specify: | 5h. | +s | | | | + | \$ | | | | | |
| | | | \$ | | | | | \$ | | | | | |
| | | | \$ | | | | | \$ | · · · · · · · · · · · · · · · · · · · | | | | |
| | | | \$ | | | | | \$ | | | | | |
| 6. | Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h. | 6. | \$ | | 341.38 | | | \$ | 425.10 | | | | |
| 7. | Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 2 | 2,818.27 | | | \$ | 2,434.90 | | | | |
| 8. | List all other income regularly received: | | | | | | | | | | | | |
| | 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross | | | | | | | | | | | | |
| | receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | | 0.00 | | | \$ | 0.00 | | | | |
| | 8b. Interest and dividends | 8b. | \$ | | 0.00 | | | \$ | 0.00 | | | | |
| | 8c. Family support payments that you, a non-filing spouse, or a depende regularly receive | ent | | | | | | | | | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | | 0.00 | | | \$ | 0.00 | | | | |
| | 8d. Unemployment compensation | 8d. | \$ | | 0.00 | | | \$ <u> </u> | 0.00 | | | | |
| | 8e. Social Security | 8e. | \$ | | 0.00 | | | \$ | 0.00 | | | | |
| | 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistan that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | ¢ | | 0.00 | | | ¢ | 0.00 | | | | |
| | Specify: | 8f. | Φ. | | | | | ⊅ | | | | | |
| | 8g. Pension or retirement income | 8g. | \$ | | 0.00 | | | \$ | 0.00 | | | | |
| | 8h. Other monthly income. Specify: | 8h. | + \$ | | 0.00 | _ | + | \$ | 0.00 | | | | |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$ | | 0.00 | | | \$ | 0.00 | | _ | | |
| 10. | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10 | . \$ | 2 | 2,818.27 | + | | \$ | 2,434.90 | = | \$_ | 5, | 253.17 |
| 11. | State all other regular contributions to the expenses that you list in <i>Sched</i> Include contributions from an unmarried partner, members of your household, y friends or relatives. | | | nde | nts, your roc | mr | nate | s, a | nd other | | | | |
| | Do not include any amounts already included in lines 2-10 or amounts that are Specify: | not a | vailal | ole | to pay expe | nse | s lis | ted | | + | \$_ | | 0.00 |
| 12. | Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain S | | | | | | | | | | \$ | 5, | 253.17 |
| | whice and amount on the Summary of Tour Assets and Liabilities and Celtain c | Jalis | ucai I | | auon, 11 Il | app | 100 | | 12 | • | | ombi onthl | ned ly income |
| 13. | Do you expect an increase or decrease within the year after you file this f | | | | | | _ | | | - | | | |
| | No. After Debtor reaches the 90 day employment preserved in the second s | ng a | ppro | xir | nately \$30 | | | | | | | | |

| Fill in this in | formation to ide | entify your case: | | | | | | |
|---------------------------|------------------------------------------------------|----------------------------------------------------|-----------|---------|-------|-------------|-------------------------------------------|--|
| Debtor 1 | Michael Christoph First Name Meredith Leigh Mi | Middle Name | Last Name | | | if this is: | | |
| (Spouse, if filing) | First Name Bankruptcy Court for | Middle Name r the: Eastern District of Missouri | Last Name | (State) | 🗖 A s | | ng nowing postpeti the following da | |
| Case number (If known) | | | - | | MM | / DD / YYYY | _ | |
| Official F | orm 106J | | | | | | | |

Schedule J: Your Expenses

12/15

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

| | Part 1: Describe Your H | lousehold | | | |
|--------|-----------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|--------------------|--------------------------------------------------|
| 1. | Is this a joint case? No. Go to line 2. Yes. Does Debtor 2 live in No Yes. Debtor 2 mus | a separate household? t file Official Form 106J-2, <i>Expenses for</i> S | Separate Household of Debtor 2. | | |
| 2. | Do you have dependents? Do not list Debtor 1 and | ❑ No ✓ Yes. Fill out this information for | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? |
| | Debtor 2. Do not state the dependents' | each dependent | Daughter | 6 | □ No ✓Yes |
| | names. | | Daughter | 2 | No Ves No Ves No Ves No Ves |
| 3. | Do your expenses include expenses of people other tha yourself and your dependent | | | | |
| P | art 2: Estimate Your On | going Monthly Expenses | | | |
| e a | expenses as of a date after the applicable date. | our bankruptcy filing date unless you a bankruptcy is filed. If this is a supplem non-cash government assistance if you | ental Schedule J, check the box | - | |
| 10 | nciude expenses paid for with | non-cash government assistdnce il yot | | | |

| su | ch as | sistance and have included it on Schedule I: Your Income (Official Form 106I.) | | Your exp | benses |
|----|-------|--------------------------------------------------------------------------------------------------------------------------|-----|----------|--------|
| 4. | | rental or home ownership expenses for your residence. Include first mortgage payments and rent for the ground or lot. | 4. | \$ | 400.00 |
| | lf no | ot included in line 4: | | | 0.00 |
| | 4a. | Real estate taxes | 4a. | \$ | 0.00 |
| | 4b. | Property, homeowner's, or renter's insurance | 4b. | \$ | 20.00 |
| | 4c. | Home maintenance, repair, and upkeep expenses | 4c. | \$ | 100.00 |
| | 4d. | Homeowner's association or condominium dues | 4d. | \$ | 0.00 |

| Dr | Ύ | 7 | '5 | F |
|---------|------------|-----|----|---|
| . 5 | ر - | - 1 | 9 | |

Case number (if known)_

| Debtor 1 | Michael C | hristopher Dean |
|----------|------------|-----------------|
| | First Name | Middle Name |

Middle Name

Last Name

| | | | Your ex | penses |
|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|---------|--------|
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5. | \$ | 0.00 |
| 6 | Utilities: | | | |
| 0. | 6a. Electricity, heat, natural gas | 6a. | \$ | 170.00 |
| | 6b. Water, sewer, garbage collection | 6b. | \$ | 25.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 230.00 |
| | 6d. Other. Specify: | 6d. | \$ | 0.00 |
| 7. | Food and housekeeping supplies | 7. | \$ | 800.00 |
| 8. | Childcare and children's education costs | 8. | \$ | 780.00 |
| 9. | Clothing, laundry, and dry cleaning | 9. | \$ | 250.00 |
| 10. | Personal care products and services | 10. | \$ | 350.00 |
| 11. | Medical and dental expenses | 11. | \$ | 130.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$ | 350.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 250.00 |
| 14. | Charitable contributions and religious donations | 14. | \$ | 60.00 |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | 15a. Life insurance | 15a. | \$ | 88.00 |
| | 15b. Health insurance | 15b. | \$ | 0.00 |
| | 15c. Vehicle insurance | 15c. | \$ | 110.00 |
| | 15d. Other insurance. Specify: | 15d. | \$ | 0.00 |
| 6. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Personal Property Tax | 16. | \$ | 100.00 |
| 17. | Installment or lease payments: | | | |
| | 17a. Car payments for Vehicle 1 | 17a. | \$ | 0.00 |
| | 17b. Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | 17c. Other. Specify: | 17c. | \$ | 0.00 |
| | 17d. Other. Specify: | 17d. | \$ | 0.00 |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I). | 18. | \$ | 0.00 |
| 19. | Other payments you make to support others who do not live with you. | | | 0.00 |
| | Specify: | 19. | \$ | 0.00 |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom | ie. | | |
| | 20a. Mortgages on other property | 20a. | \$ | 0.00 |
| | 20b. Real estate taxes | 20b. | \$ | 0.00 |
| | 20c. Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| | 20d. Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| | 20e. Homeowner's association or condominium dues | 20e. | \$ | 0.00 |

| | | | | | Pg 176 of 2 | 221 | | | |
|-----|----------|---------------|-----------------------------|---------------------|---------------------------------------------|-----------------------------------------------|----------|-----------|------------------|
| De | ebtor 1 | | el Christopher Dean | | | Case number (if ki | nown) | | |
| | | First Name | Middle Name | Last Name | | | | | |
| 21. | Othe | er. Specify: | | | | | 21. | +\$ | 0.00 |
| | . | | | | | · · · · · · · · · · · · · · · · · · · | | +\$ | |
| | | | | | | | | +\$ | |
| 22. | Calo | culate your | monthly expenses | | | | | | |
| | 22a. | Add lines 4 | through 21. | | | | 22a. | \$ | 4,213.00 |
| | 22b. | Copy line 22 | 2 (monthly expenses | s for Debtor 2), if | any, from Official Form 1 | 06J-2 22c. Add line 22a | 22b. | \$ | |
| | and 2 | 22b. The res | ult is your monthly e | expenses. | | | 22c. | \$ | 4,213.00 |
| 23. | Calcu | ılate your m | onthly net income | | | | | | E 0E0 17 |
| | 23a. | Copy line 12 | 2 (your combined m | onthly income) fr | om Schedule I. | | 23a. | \$ | 5,253.17 |
| | 23b. | Copy your r | nonthly expenses fr | om line 22c abov | /e. | | 23b. | -\$ | 4,213.00 |
| | 23c. | Subtract yo | ur monthly expense | s from your mont | hly income. | | | \$ | 1,040.17 |
| | | The result is | s your <i>monthly net i</i> | ncome. | | | 23c. | Ψ | |
| 24. | Do yo | ou expect ar | n increase or decre | ease in your exp | enses within the year a | fter you file this form? | | | |
| | | | | , , , | ar loan within the year or | | | | |
| | | | t to increase or dec | rease because of | f a modification to the ter | ms of your mortgage? | | | |
| | | | Dobtoro | ourroptly are | looping their home | from Meredith Dean's | moth | or on vor | y favorable rept |
| | ¥ Y€ | es. Expla | terms. the hom | The Lease exp | pires on March 1, 2 ome point prior to M | D20. In the meantime larch 1, 2020, Debtor | e, the L | andlord | intends to sell |

| | | | Pa 177 at 22 |
|--------------------------------------------|------------------------------|---------------------------|--------------|
| Fill in this in | formation to identify yo | ur case: | |
| Debtor 1 | Michael Christophe | Dean | |
| | First Name | Middle Name | Last Name |
| Debtor 2 | Meredith Leigh Mille | er Dean | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States Case number (If known) | Bankruptcy Court for the Eas | tern District of Missouri | |

Check if this is an amended filing

Official Form 106Dec Declaration About an Individual Debtor's Schedules

12/15

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

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|---------------------------------------------------------------------------------|------------------------------------------------------------------|
| | |
| | NOT an attorney to help you fill out bankruptcy forms? |
| <u>ы</u> No | |
| Yes. Name of person | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and |
| | Signature (Official Form 119). |
| | |
| Inder penalty of periury I declare that I have | read the summary and schedules filed with this declaration and |
| Jnder penalty of perjury, I declare that I have that they are true and correct. | read the summary and schedules filed with this declaration and |
| | read the summary and schedules filed with this declaration and |
| that they are true and correct. | |
| hat they are true and correct. /s/ Michael Christopher Dean | /s/ Meredith Leigh Miller Dean |

| Fill in this i | nformation to i | dentify your case: | | |
|---------------------------|-----------------|---------------------------------------|-----------|--|
| Debtor 1 | Michael Christ | opher Dean | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Meredith Leigh | n Miller Dean | | |
| (Spouse, if filing | g) First Name | Middle Name | Last Name | |
| United States | Bankruptcy Cour | for the: Eastern District of Missouri | | |
| Case number (If known) | | | _ | |
| | | | | |

Check if this is an amended filing

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/19

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

| Part 1 | Give Details About Y | 'our Marital Statu | s and Where Yo | u Lived Before | | |
|----------|---------------------------------------------------------------------------------------------------------------------------------|----------------------------|------------------------------------------|--------------------------------------------------|----------------|--------------------------------|
| ~ | at is your current marital sta Married Not married | itus? | | | | |
| | ing the last 3 years, have yo No Yes. List all of the places you | - | - | | | |
| | Debtor 1: | | Dates Debtor 1 lived there | Debtor 2: | | Dates Debtor 2 lived there |
| | 3749 Arpent Street Number Street | | From <u>10/2016</u> To <u>07/2018</u> | Same as Debtor 1 | | Same as Debtor 1 From To |
| | Saint Charles City | MO 63301 State ZIP Code | | City | State ZIP Code | |
| | Number Street | | From To | Same as Debtor 1 Number Street | | Same as Debtor 1 From To |
| | City | State ZIP Code | | City | State ZIP Code | |
| and 🖌 | hin the last 8 years, did you I <i>territories</i> include Arizona, C No Yes. Make sure you fill out <i>S</i> o | alifornia, Idaho, Louis | siana, Nevada, New | / Mexico, Puerto Rico, Texas, | | |

| | Case 19-46230 | Doc 1 F | Filed 10/03/19 E Pg 179 | Entered 10/03/19 of 221 |) 17:32:42 Main I | Document |
|----------------------------|--------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Debtor 1 | Michael Christopher | | lama | Case nu | mber (if known) | |
| Part 2 | | | | | | |
| Fill If yo | in the total amount of inco ou are filing a joint case an | me you received | from all jobs and all busin | nesses, including part-tin | | Jar years? |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | From January 1 of curre the date you filed for ba | | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$ <u>6,419.45</u> | ✓ Wages, commissions, bonuses, tips ☐ Operating a business | \$ <u>22,854.63</u> |
| | For last calendar year: (January 1 to December | 31, <u>2018</u>) YYYY | Wages, commissions, bonuses, tips Operating a business | \$ <u>0.00</u> | ✓ Wages, commissions, bonuses, tips ❑ Operating a business | \$ <u>10,330.00</u> |
| | For the calendar year b (January 1 to December | | Wages, commissions, bonuses, tips Operating a business | \$ <u>45,292.00</u> | Wages, commissions, bonuses, tips Operating a business | \$ <u>0.00</u> |
| Incl anc win List | • | whether that inco ents; pensions; i nt case and you | ome is taxable. Examples rental income; interest; div have income that you rec | of other income are alim ridends; money collected eived together, list it only | | |
| | | Debtor 1 | I | | Debtor 2 | |
| | | Sources Describe | e below. each so | deductions and | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) |
| | anuary 1 of current | | \$ <u>0.00</u> | | | \$ <u>0.00</u> |
| | ntil the date you | | \$ | | · · · · · · · · · · · · · · · · · · · | \$ |

| | | \$ | | \$ |
|-------------------------|----------------------------------|---------------------------|----------|---------------|
| For last calendar year: | Interest, Dividends, cash out of | \$ <u>52,050.00</u> \$ | | \$_0.00 \$ |
| (January 1 to | | \$ | | \$ |
| December 31, 2018) | | Ψ | | ¥ |
| For the calendar year | Interest | \$ <u>991.00</u> | | \$_0.00 |
| before that: | | \$ | <u> </u> | \$ |
| (January 1 to | | \$ | | \$ |
| December 31, 2017) | | | | |

| or 1 | Mich First Na | ame Middle Name | | Last Name | | Case nu | mber (if known) | |
|-------|------------------|--------------------------------------------------------------------------------------------|--------------|-----------------|--------------------|------------------------------------------------------------------------------------|-----------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| | FIRST INA | ame Middle Name | 9 | Last Name | | | | |
| rt 3: | List | Certain Payme | ents You I | Made Befor | e You Filed f | or Bankruptcy | | |
| | | | | | | | | |
| | | btor 1's or Debto | | | | | | |
| м N | | | | | | ts. <i>Consumer debts</i> are busehold purpose." | defined in 11 U.S.C. § 101(| 8) as |
| | | - | | | - | y any creditor a total of \$ | 6,825* or more? | |
| | 1 | No. Go to line 7. | | | | | | |
| | t | he total amount | you paid th | at creditor. Do | o not include pa | 6,825* or more in one or yments for domestic sup nts to an attorney for this | port obligations, such | |
| | | | - | | | | er the date of adjustment. | |
| | es. Deb | tor 1 or Debtor 2 | or both ha | ave primarilv | consumer deb | ts. | | |
| | | | | - | | y any creditor a total of \$ | 600 or more? | |
| | 1 | No. Go to line 7. | | | | | | |
| | | Yes. List below ea | ch creditor | to whom you | paid a total of \$ | 600 or more and the tota | l amount you paid that | |
| | | | | | | ort obligations, such as ch / for this bankruptcy case | | |
| | | jj | , do not inc | siddo paymon | | | | |
| | | | , uo not inc | | Dates of payment | Total amount paid | Amount you still owe | Was this payment for. |
| | | | , do not me | | | Total amount paid | Amount you still owe | Was this payment for. |
| | | Creditor's Name | | | | | | Mortgage |
| | | | | | | | | Mortgage Car Credit card |
| | | Creditor's Name | | | | | | Mortgage Car Credit card Loan repayment |
| | | Creditor's Name | | | | | | Mortgage Car Credit card Loan repayment Suppliers or vendoo |
| | | Creditor's Name | State | ZIP Code | | | | Mortgage Car Credit card Loan repayment |
| | - | Creditor's Name Number Street City | | | | | | Mortgage Car Credit card Loan repayment Suppliers or vendoo |
| | - | Creditor's Name | | | | \$ | \$ | Mortgage Car Credit card Loan repayment Suppliers or vendor Other |
| | - | Creditor's Name Number Street City | | | | \$ | \$ | Mortgage Car Credit card Loan repayment Suppliers or vendor Other |
| | | Creditor's Name Number Street City Creditor's Name | | | | \$ | \$ | Mortgage Car Credit card Con repayment Suppliers or vendor Other Other Car Credit card Credit card Loan repayment Car Car Credit card Loan repayment |
| | - | Creditor's Name Number Street City Creditor's Name | | | | \$ | \$ | Mortgage Car Credit card Credit card Suppliers or vendor Other Credit card Suppliers or vendor |
| | - | Creditor's Name Number Street City Creditor's Name | | | | \$ | \$ | Mortgage Car Credit card Con repayment Suppliers or vendor Other Mortgage Car Credit card |
| | - | Creditor's Name Number Street City Creditor's Name Number Street | State | ZIP Code | | \$ | _ \$ _ \$ | Mortgage Car Credit card Credit card Credit card Suppliers or vendor Other Mortgage Car Credit card Loan repayment Suppliers or vendor Other Credit card Credit card Companyment Other Companyment |
| | | Creditor's Name Number Street City Creditor's Name Number Street | State | ZIP Code | | \$ | \$ | Mortgage Car Credit card Credit card Suppliers or vendor Other Car Credit card Car Credit card Car Credit card Coredit card |
| | | Creditor's Name Number Street City Creditor's Name Number Street City City | State | ZIP Code | | \$ | _ \$ _ \$ | Mortgage Car Credit card Credit card Credit card Suppliers or vendor Other Car Credit card Car Credit card Loan repayment Suppliers or vendor Other Car Credit card Coredit card Coredit card Coredit card Coredit card Car Credit card Car Credit card |
| | - | Creditor's Name Number Street City Creditor's Name Number Street City City | State | ZIP Code | | \$ | _ \$ _ \$ | Mortgage Car Credit card Credit card Credit card Suppliers or vendor Other Car Credit card Car Credit card Loan repayment Suppliers or vendor Other |
| | - | Creditor's Name Number Street City Creditor's Name Number Street City City Creditor's Name | State | ZIP Code | | \$ | _ \$ _ \$ | Mortgage Car Credit card Credit card Credit card Suppliers or vendor Other Car Credit card Car Credit card Loan repayment Suppliers or vendor Other Car Credit card Coredit card Coredit card Coredit card Coredit card Car Credit card Car Credit card |

| r 1 | Michael Christopher | Dean | | | Case number (if known) | |
|-------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|------------------------------------------|-----------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|
| | First Name Middle Nam | | | | Case number (ir known)_ | |
| <i>Inside</i> corpor agent, | rations of which you are , including one for a busi as child support and alim | ; any general partners; an officer, director, per iness you operate as a | relatives of any g son in control, or | general partners; par | artnerships of which nore of their voting s | no was an insider? you are a general partner; securities; and any managing domestic support obligations, |
|] Ye | es. List all payments to a | n insider. | | | | |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| _ | | | _ | \$ | \$ | |
| Ir | nsider's Name | | | | | |
| Ā | Number Street | | | | | |
| _ | | | | | | |
| | | | | | | |
| C | City | State ZIP Code | _ | | | |
| _ | | | | \$ | \$ | |
| lı | nsider's Name | | | | | |
| N | Number Street | | | | | |
| - | | | | | | |
| | | | | | | |
| ī | City | State ZIP Code | _ | | | |
| | City | State ZIP Code | - | | | |
| Vithin an ins nclud 고 Nc | a 1 year before you filed sider? e payments on debts gu | d for bankruptcy, did y | | ayments or transf | er any property on | account of a debt that benefited |
| Vithin an ins nclud 고 Nc | 1 year before you filed sider? e payments on debts gu | d for bankruptcy, did y | | ayments or transf | er any property on Amount you still owe | account of a debt that benefited Reason for this payment Include creditor's name |
| Vithin an ins nclud 고 No | 1 year before you filed sider? e payments on debts gu | d for bankruptcy, did y | by an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| Vithin an ins nclud 고 Nc 고 Ye | 1 year before you filed sider? e payments on debts gu | d for bankruptcy, did y | by an insider. Dates of | Total amount | Amount you still | Reason for this payment |
| Vithin an ins nclud 고 Nc 그 Ye | a 1 year before you filed sider? e payments on debts gu o es. List all payments that | d for bankruptcy, did y | by an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| Vithin an ins nclud 고 Nc 그 Ye | n 1 year before you filed sider? e payments on debts gu o es. List all payments that | d for bankruptcy, did y | by an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| Vithin an ins Includ No Ye Ye | n 1 year before you filed sider? e payments on debts gu o es. List all payments that | d for bankruptcy, did y | by an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| Vithin an ins nclud Nc Nc Nc Ye | a 1 year before you filed sider? e payments on debts gui b es. List all payments that nsider's Name | d for bankruptcy, did y | by an insider. Dates of | Total amount paid | Amount you still owe \$ | Reason for this payment |
| Vithin an ins nclud ⊇ Nc ⊇ Ye ī ī ī ī ī ī | a 1 year before you filed sider? e payments on debts gui b es. List all payments that nsider's Name | d for bankruptcy, did y | by an insider. Dates of | Total amount paid | Amount you still owe | Reason for this payment |
| Vithin an ins nclud Nc Ye Ye | a 1 year before you filed sider? e payments on debts guido es. List all payments that nsider's Name Number Street | d for bankruptcy, did y | by an insider. Dates of | Total amount paid | Amount you still owe \$ | Reason for this payment |
| Vithin an ins Includ No Ye Ye | a 1 year before you filed sider? e payments on debts guide es. List all payments that nsider's Name | d for bankruptcy, did y | by an insider. Dates of | Total amount paid | Amount you still owe \$ | Reason for this payment |

| | Mishaal Obvistantes | Deer | | Py 10 | 82 of 221 | | | | |
|-----------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------|---------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------|-------------------------------------------------|
| or 1 | Michael Christophe | | Name | | - | Case number | (if known) | | |
| | | | | | | | | | |
| | I | | | | | | | | |
| art 4: | Identify Legal Action | ns, Reposs | essions, | and Forec | losures | | | | |
| | n 1 year before you filed fo | | | | | | | | |
| | I such matters, including pe | ersonal injury | cases, sm | all claims ac | tions, divorces | s, collection suits, | paternity | actions, supp | ort or custody modificatio |
| | ontract disputes. | | | | | | | | |
| No | | | | | | | | | |
| └ Ye | es. Fill in the details. | | | | | | | | |
| | | | | f the case | | Court or agency | | | Status of the case |
| Case title | Mary Ann Mastri v. Mich | nael Dean | Breach of 08/20/201 | f Contract; D 18 | ate filed: | Harris County D | istrict Cou | urt | - |
| | | | | | | Court Name | | | Dending |
| | | | | | | PO Box 1525 | | | On appeal |
| | | | | | | Number Street | | | Concluded |
| | | | | | | Houston | тх | 77251 | |
| Case nu | umber 1115864 | | | | | City | State | ZIP Code | |
| | American Express Natio | onal Bank v. | | | it on account; | _ | | | |
| | Michael Dean | | Date filed | l: 05/17/2019 |) | St. Charles Cou Court Name | nty Circui | t Court | Dending |
| Case title | le: | | | | | | On appeal | | |
| | | | | | | 300 N. 2nd St. Number Street | | Concluded | |
| | | | | | | | | | |
| | | | | | | | | | |
| Within Check | 1 year before you filed fo all that apply and fill in the | | | y of your pr | operty repos | Saint Charles City sessed, foreclose | MO State ed, garnis | 63301 ZIP Code shed, attache | ed, seized, or levied? |
| Within Check | n 1 year before you filed fo | e details below | | y of your pr | operty repos | City | State | ZIP Code | ed, seized, or levied? |
| Within Check | 1 year before you filed fo all that apply and fill in the b. Go to line 11. | e details below | | y of your pro Describe th | | City | State | ZIP Code | ed, seized, or levied? Value of the property |
| Within Check | 1 year before you filed fo all that apply and fill in the b. Go to line 11. | e details below | | | | City | State | ZIP Code | |
| Within Check | n 1 year before you filed fo all that apply and fill in the b. Go to line 11. es. Fill in the information be | e details below | | | | City | State | ZIP Code | |
| Within Check | 1 year before you filed fo all that apply and fill in the b. Go to line 11. | e details below | | | | City | State | ZIP Code | |
| Within Check | n 1 year before you filed fo all that apply and fill in the b. Go to line 11. s. Fill in the information be | e details below | | Describe th | e property | City | State | ZIP Code | |
| Within Check | n 1 year before you filed fo all that apply and fill in the b. Go to line 11. es. Fill in the information be | e details below | | Describe the | e property at happened | City sessed, foreclose | State | ZIP Code | |
| Within Check | n 1 year before you filed fo all that apply and fill in the b. Go to line 11. s. Fill in the information be | e details below | | Describe the Explain what | e property at happened rty was repose | City sessed, foreclose | State | ZIP Code | |
| Within Check | n 1 year before you filed fo all that apply and fill in the b. Go to line 11. s. Fill in the information be | e details below | | Describe the Explain what Prope Prope | e property at happened rty was repose rty was foreclo | City sessed, foreclose sessed. osed. | State | ZIP Code | |
| Within Check | n 1 year before you filed for all that apply and fill in the b. Go to line 11. es. Fill in the information be Creditor's Name Number Street | e details belo | w. | Describe the Explain what Prope Prope Prope | e property at happened rty was repose rty was forecto rty was garnis | City sessed, foreclose sessed. psed. hed. | State | ZIP Code | |
| Within Check | n 1 year before you filed fo all that apply and fill in the b. Go to line 11. s. Fill in the information be | e details below | w. | Describe the Explain what Prope Prope Prope Prope Prope Prope | e property at happened rty was repose rty was foreclo rty was garnis rty was attach | City sessed, foreclose sessed. osed. | State | ZIP Code shed, attache Date | Value of the property \$ |
| Within Check | n 1 year before you filed for all that apply and fill in the b. Go to line 11. es. Fill in the information be Creditor's Name Number Street | e details belo | w. | Describe the Explain what Prope Prope Prope | e property at happened rty was repose rty was foreclo rty was garnis rty was attach | City sessed, foreclose sessed. psed. hed. | State | ZIP Code | Value of the property \$ |
| Within Check | n 1 year before you filed for all that apply and fill in the b. Go to line 11. es. Fill in the information be Creditor's Name Number Street | e details belo | w. | Describe the Explain what Prope Prope Prope Prope Prope Prope | e property at happened rty was repose rty was foreclo rty was garnis rty was attach | City sessed, foreclose sessed. psed. hed. | State | ZIP Code shed, attache Date | Value of the property \$ |
| Within Check | n 1 year before you filed for all that apply and fill in the all that apply and fill in the b. Go to line 11. es. Fill in the information be Creditor's Name Number Street City | e details belo | w. | Describe the Explain what Prope Prope Prope Prope Prope Prope | e property at happened rty was repose rty was foreclo rty was garnis rty was attach | City sessed, foreclose sessed. psed. hed. | State | ZIP Code shed, attache Date | |
| Within Check | n 1 year before you filed for all that apply and fill in the b. Go to line 11. es. Fill in the information be Creditor's Name Number Street | e details belo | w. | Describe the Explain what Prope Prope Prope Prope Prope Prope | e property at happened rty was repose rty was foreclo rty was garnis rty was attach | City sessed, foreclose sessed. psed. hed. | State | ZIP Code shed, attache Date | Value of the property \$ |
| Within Check | n 1 year before you filed for all that apply and fill in the all that apply and fill in the b. Go to line 11. es. Fill in the information be Creditor's Name Number Street City | e details belo | w. | Describe the | e property at happened rty was repose rty was forecto rty was garnis rty was attach e property | City sessed, foreclose sessed. psed. hed. | State | ZIP Code shed, attache Date | Value of the property \$ |
| Within Check | n 1 year before you filed for all that apply and fill in the information being the fill in the information beind the fill in the information being the fill in the in | e details belo | w. | Describe the | e property at happened rty was repose rty was forecto rty was garnis rty was attach e property at happened | City sessed, foreclose sessed. bsed. hed. ed, seized, or levin | State | ZIP Code shed, attache Date | Value of the property \$ |
| Within Check | n 1 year before you filed for all that apply and fill in the information being the fill in the information beind the fill in the information being the fill in the in | e details belo | w. | Describe the | e property at happened rty was repose rty was foreclo rty was garnis rty was attach e property at happened rty was repose | City sessed, foreclose sessed. osed. hed. ed, seized, or levin | State | ZIP Code shed, attache Date | Value of the property \$ |
| Check | n 1 year before you filed for all that apply and fill in the information being the fill in the information beind the fill in the information being the fill in the in | e details belo | w. | Describe the Explain what Prope Prope | e property at happened rty was repose rty was forecto rty was garnis rty was attach e property at happened | City sessed, foreclose sessed. osed. hed. ed, seized, or levin sessed. sessed. osed. | State | ZIP Code shed, attache Date | Value of the property \$ |

| C | Case 19-46 | 230 | Doc 1 | Filed : | | | Entered of 221 | | 3/19 1 | 17:32:4 | 12 Mai | in Do | cument |
|------------------|-----------------------------------------------------------------|--------------|---------------|---------|----------------|----------|-------------------|-----------|----------|-----------------|-------------------------|---------|-----------------|
| or 1 | Michael Chris | | | | | | | Ca | ase numb | Oer (if known)_ | | | |
| | First Name | Middle Nam | e Las | Name | | | | | | | | | |
| accou | u nts or refuse t e | o make a | | | | | luding a b | oank or f | inancia | l institutio | on, set off a | iny amo | ounts from your |
| L Ye | es. Fill in the deta | ails. | | | | | | | | | | | |
| | | | | Desc | ribe the acti | on the c | creditor too | k | | | Date actio was taker | | Amount |
| Cre | editor's Name | | | | | | | | | | | | \$ |
| Nur | imber Street | | | | | | | | | | | | Ψ |
| City | ty | St | ate ZIP Code | Last | 4 digits of a | ccount | number: > | XXX- | | | | | |
| ✓ No ✓ Ye ✓ 1 5: | | Gifte a | nd Contribu | itione | | | | | | | | | |
| G | o es. Fill in the deta Gifts with a total v per person | | - | Descr | ribe the gifts | ; | | | | | Dates you the gifts | u gave | Value |
| Por | erson to Whom You G | ave the Giff | | _ | | | | | | | | | \$ |
| | | | | - | | | | | | | | | \$ |
| Nur | imber Street | | | - | | | | | | | | | |
| City | ty | St | ate ZIP Code | - | | | | | | | | | |
| Pe | erson's relationship | to you _ | | - | | | | | | | | | |
| | ifts with a total val er person | ue of mo | re than \$600 | Descr | ribe the gifts | ; | | | | | Dates you the gifts | u gave | Value |
| Per | rson to Whom You G | ave the Gift | | - | | | | | | | | | \$ |
| | | | | - | | | | | | | | | \$ |
| Nu | imber Street | | | - | | | | | | | | | |
| City | ty | St | ate ZIP Code | - | | | | | | | | | |
| Pe | erson's relationship | to you | | | | | | | | | | | |

| r 1 Michael Christopher Dean | Case number (if known) | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------|
| First Name Middle Name La | ast Name | | |
| | | | |
| Mithin 2 years hafays you filed for hanky | unter did yen sine ony sifte or contributions with a total value | of more than \$600 | to any charity? |
| | ptcy, did you give any gifts or contributions with a total value | or more than \$600 | to any charity? |
| No | ntribution | | |
| Yes. Fill in the details for each gift or co | ntribution. | | |
| Gifts or contributions to charities that total more than \$600 | Describe what you contributed | Date you contributed | Value |
| | | | |
| Charity's Name | _ | | \$ |
| Chanty's Name | | | |
| | - | | \$ |
| | | | |
| Number Street | - | | |
| | | | |
| | | | |
| City State ZIP Code | - | | |
| | | | |
| | | | |
| or gambling? ✓No | ptcy or since you filed for bankruptcy, did you lose anything b | ecause of theft, fire | , other disaster, |
| or gambling? | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance | ecause of theft, fire | , other disaster, Value of property lost |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how | Describe any insurance coverage for the loss | | Value of property |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance | | Value of property lost |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance | | Value of property |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance | | Value of property lost |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | | Value of property lost |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | | Value of property lost |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred to 7: List Certain Payments or Train Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or p | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | Date of your loss | Value of property lost \$ |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Tran Within 1 year before you filed for bankrupt consulted about seeking bankrupt or p Include any attorneys, bankrupt petition p | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | Date of your loss | Value of property lost \$ |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred the loss occurred the loss occurred Uthin 1 year before you filed for bankrupt consulted about seeking bankruptcy or plinclude any attorneys, bankruptcy petition plinclude any attorneys, bankr | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | Date of your loss | Value of property lost \$ |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Tran Within 1 year before you filed for bankrupt consulted about seeking bankrupt or p Include any attorneys, bankrupt petition p | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | Date of your loss | Value of property lost \$ |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred the loss occurred List Certain Payments or Train Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition p No No Yes. Fill in the details. | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> . | Date of your loss Date of your loss sfer any property to bur bankruptcy. Date payment or | Value of property lost \$ |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred the loss occurred List Certain Payments or Train Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition p No Yes. Fill in the details. Bryon E. Hale | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. nsfers ptcy, did you or anyone else acting on your behalf pay or transporeparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services of the services required in your behalf pay or transpore and the services of the servic | Date of your loss | Value of property lost \$ anyone you |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred It 7: List Certain Payments or Train Within 1 year before you filed for bankrup consulted about seeking bankruptcy or plinclude any attorneys, bankruptcy petition properties. No ✓ Yes. Fill in the details. | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. nsfers ptcy, did you or anyone else acting on your behalf pay or transporeparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services of the services required in your behalf pay or transpore and the services of the servic | Date of your loss Date of your loss sfer any property to bur bankruptcy. Date payment or | Value of property lost \$ anyone you |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred the loss occurred List Certain Payments or Train Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition p No Yes. Fill in the details. Bryon E. Hale | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. nsfers ptcy, did you or anyone else acting on your behalf pay or transporeparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services of the services required in your behalf pay or transpore and the services of the servic | Date of your loss Date of your loss sfer any property to bur bankruptcy. Date payment or | Value of property lost \$ anyone you |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Uithin 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition p No Yes. Fill in the details. Bryon E. Hale Person Who Was Paid 211 N. Third Street | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. nsfers ptcy, did you or anyone else acting on your behalf pay or transporeparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services of the services required in your behalf pay or transpore and the services of the servic | Date of your loss Date of your loss fer any property to but bankruptcy. Date payment or transfer was made | Value of property lost \$ anyone you Amount of paymen |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Uithin 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition p No Yes. Fill in the details. Bryon E. Hale Person Who Was Paid 211 N. Third Street | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. nsfers ptcy, did you or anyone else acting on your behalf pay or transporeparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services of the services required in your behalf pay or transpore and the services of the servic | Date of your loss Date of your loss fer any property to but bankruptcy. Date payment or transfer was made | Value of property lost \$ anyone you Amount of paymen |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Tran Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition p No Yes. Fill in the details. Bryon E. Hale Person Who Was Paid 211 N. Third Street Number Street | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. nsfers ptcy, did you or anyone else acting on your behalf pay or transporeparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services of the services required in your behalf pay or transpore and the services of the servic | Date of your loss Date of your loss fer any property to but bankruptcy. Date payment or transfer was made | Value of property lost \$ anyone you Amount of paymen \$ \$_3,800.00 |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred List Certain Payments or Tran Within 1 year before you filed for bankrup consulted about seeking bankruptcy or p Include any attorneys, bankruptcy petition p No Yes. Fill in the details. Bryon E. Hale Person Who Was Paid 211 N. Third Street Number Street | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. nsfers ptcy, did you or anyone else acting on your behalf pay or transporeparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services of the services required in your behalf pay or transpore and the services of the servic | Date of your loss Date of your loss fer any property to but bankruptcy. Date payment or transfer was made | Value of property lost \$ anyone you Amount of paymen \$ \$_3,800.00 |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred rt 7: List Certain Payments or Train Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or place Include any attorneys, bankruptcy petition provide any attorneys, | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. nsfers ptcy, did you or anyone else acting on your behalf pay or transporeparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services of the services required in your behalf pay or transpore and the services of the servic | Date of your loss Date of your loss fer any property to but bankruptcy. Date payment or transfer was made | Value of property lost \$ anyone you Amount of paymen \$ \$_3,800.00 |
| or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred rt 7: List Certain Payments or Train Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or place Include any attorneys, bankruptcy petition provide any attorneys, | Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. nsfers ptcy, did you or anyone else acting on your behalf pay or transporeparing a bankruptcy petition? reparers, or credit counseling agencies for services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services required in your behalf pay or transpore and the services of the services of the services required in your behalf pay or transpore and the services of the servic | Date of your loss Date of your loss fer any property to but bankruptcy. Date payment or transfer was made | Value of property lost \$ anyone you Amount of paymen \$ \$_3,800.00 |

Case 19-46230 Doc 1 Filed 10/03/19 Entered 10/03/19 17:32:42 Main Document Pg 185 of 221

Debtor 1 Michael Christopher Dean

Case number (if known)_

| | Description and value of any property tr | ansferred | Date payment or transfer was made | Amount of payment |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------|----------------------------------------|
| Person Who Was Paid | - | | | \$ |
| Number Street | - | | | \$ |
| City State ZIP Code | - | | | |
| | | | | |
| Email or website address | | | | |
| Person Who Made the Payment, if Not You | | | | |
| No Yes. Fill in the details. | Description and value of any property to | ansferred | Date payment or | Amount of payme |
| | Description and value of any property tr | ansferred | Date payment or transfer was made | Amount of payme |
| Person Who Was Paid | - | | | |
| | | | | \$ |
| Number Street | - | | | \$\$ |
| City State ZIP Code | - | | | T |
| | r business or financial affairs? made as security (such as the granting of ave already listed on this statement. | f a security interest or m | ortgage on your prop | n property berty). |
| City State ZIP Code thin 2 years before you filed for bankru insferred in the ordinary course of your clude both outright transfers and transfers onot include gifts and transfers that you ha | r business or financial affairs? made as security (such as the granting of | | ortgage on your prop | n property berty). |
| City State ZIP Code thin 2 years before you filed for bankru nsferred in the ordinary course of your lude both outright transfers and transfers not include gifts and transfers that you ha | r business or financial affairs? made as security (such as the granting of ave already listed on this statement. Description and value of property | f a security interest or mo Describe any property | ortgage on your prop | n property perty). Date transfer |
| City State ZIP Code thin 2 years before you filed for bankru nsferred in the ordinary course of your clude both outright transfers and transfers not include gifts and transfers that you have No Yes. Fill in the details. | r business or financial affairs? made as security (such as the granting of ave already listed on this statement. Description and value of property | f a security interest or mo Describe any property | ortgage on your prop | n property perty). Date transfer |
| City State ZIP Code ithin 2 years before you filed for bankru ansferred in the ordinary course of your clude both outright transfers and transfers o not include gifts and transfers that you had No Yes. Fill in the details. | r business or financial affairs? made as security (such as the granting of ave already listed on this statement. Description and value of property | f a security interest or mo Describe any property | ortgage on your prop | n property perty). Date transfer |
| City State ZIP Code athin 2 years before you filed for bankru ansferred in the ordinary course of your clude both outright transfers and transfers o not include gifts and transfers that you had No Yes. Fill in the details. Person Who Received Transfer Number Street | r business or financial affairs? made as security (such as the granting of ave already listed on this statement. | f a security interest or mo Describe any property | ortgage on your prop | n property perty). Date transfer |
| City State ZIP Code ithin 2 years before you filed for bankru ansferred in the ordinary course of your clude both outright transfers and transfers o not include gifts and transfers that you had No Yes. Fill in the details. Person Who Received Transfer Number Street City State ZIP Code | r business or financial affairs? made as security (such as the granting of ave already listed on this statement. | f a security interest or mo Describe any property | ortgage on your prop | n property perty). Date transfer |

Person's relationship to you _____

State

ZIP Code

City

| | Case 19-4 | 6230 | Doc 1 | Filed 10/03/19 Pg 1 | Entere 86 of 22 | | 19 17:32 | :42 Main Doc | ument |
|---------------------|-------------------------------------------------------------------|------------------------------------------|----------------------|------------------------------------------------------------------------------------|--------------------|-------------------------|-------------------|------------------------------------------------------------|-----------------------------------------|
| Debtor 1 | Michael Ch | • | | | _ | Case | e number (if know | n) | |
| | First Name | Middle Name | La | ast Name | | | | | |
| are 🗸 | a beneficiary? (| These are | | uptcy, did you transfer asset-protection devices | | y to a self-s | settled trust o | or similar device of wh | nich you |
| | | | | Description and value | e of the prope | erty transferre | ed | | Date transfer was made |
| | Name of trust | | | | | | | | |
| Part 8 | : List Certair | n Financi | al Accour | its, Instruments, Sa | fe Deposit | t Boxes, a | nd Storage | e Units | |
| clo: Incl bro | sed, sold, moved lude checking, s kerage houses, | l, or transf avings, mo pension fu | erred? oney marke | otcy, were any financial t, or other financial acc pratives, associations, a | ounts; certi | ficates of d | eposit; share | - | |
| | | | | Last 4 digits of accou | unt number | Type of ac instrumer | | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | PNC Bank Name of Financial I PO Box 489909 Number Street | | | XXX <u>3_7_6</u> | 65 | Check | - | 10/3/2019 | \$ <u>249.00</u> |
| | Charlotte City | NC State | 28269 ZIP Code | - | | Broke | - | | |
| | Name of Financial I | nstitution | | _ xxxx | | Check Saving | js | | \$ |
| | Number Street | State | ZIP Code | - | | Broke | | | |
| sec 🖌 | you now have, o :urities, cash, or No Yes. Fill in the d | other valu | | 1 year before you filed | for bankrup | tcy, any sat | e deposit bo | x or other depository | for |
| | | | | Who else had access | s to it? | I | Describe the | contents | Do you still have it? |
| | Name of Financial I | nstitution | | – Name | | | | | Ves |
| | Number Street | | | – Number Street | | | | | |
| | City | State | ZIP Code | City State | ZIP Code | | | | |

| A Michael Christopher Dea First Name Middle Name Have you stored property in a sto ✓ No | Image unit or place other than your home within 1 Who else has or had access to it? Name | Case number (<i>it known</i>) | Do you still have it? |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------|--------------------------|
| Have you stored property in a sto ✓ No ❑ Yes. Fill in the details. Name of Storage Facility | orage unit or place other than your home within 1 Who else has or had access to it? | | Do you still |
| No Yes. Fill in the details. Name of Storage Facility | Who else has or had access to it? | | Do you still |
| Name of Storage Facility | | Describe the contents | |
| | Name | | |
| | Name | | |
| Number Street | | | Yes |
| | Number Street | | |
| | CityState ZIP Code | | |
| City State | ZIP Code | | |
| art 9: Identify Property Y | ou Hold or Control for Someone Else | | |
| or hold in trust for someone. No Yes. Fill in the details. | Where is the property? | Describe the property | Value |
| | where is the property? | Describe the property | value |
| Owner's Name | | | \$ |
| Number Street | Number Street | | |
| | | | |
| | City State ZIP Cod | de | |
| City State | ZIP Code | | |
| art 10: Give Details About | Environmental Information | | |
| hazardous or toxic substances, including statutes or regulations | ederal, state, or local statute or regulation conce wastes, or material into the air, land, soil, surfac s controlling the cleanup of these substances, w or property as defined under any environmenta | ce water, groundwater, or other mediu vastes, or material. | m, |
| - | hing an environmental law defines as a hazardo pollutant, contaminant, or similar term. | us waste, hazardous substance, toxic | |
| port all notices, releases, and pr | roceedings that you know about, regardless of w | when they occurred. | |
| . Has any governmental unit notif | ied you that you may be liable or potentially liabl | le under or in violation of an environm | ental law? |
| ✓ No ❑ Yes. Fill in the details. | | | |
| | Governmental unit E | nvironmental law, if you know it | Date of notice |
| | | | |
| Name of site | Governmental unit | | |
| | Governmental unit | | |
| Name of site Number Street | | | |

| 1 Michael Christopher Dean First Name Middle Name | Last Name | Case number (<i>it known</i>) | |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|
| ☑ No | unit of any release of hazardous mat | erial? | |
| Yes. Fill in the details. | • | | |
| | Governmental unit | Environmental law, if you know it | Date of notice |
| Name of site | Governmental unit | | |
| Number Street | Number Street | | |
| | City State ZIP Code | 3 | |
| City State ZIP C | Code | | |
| - | | | |
| łave you been a party in any judicial ☑ No | or administrative proceeding under | any environmental law? Include settlemen | ts and orders. |
| Yes. Fill in the details. | | | |
| | Court or agency | Nature of the case | Status of the case |
| Case title | | | |
| | Court Name | | Pending |
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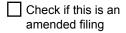
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Continuation Sheet for Official Form 107

9) Lawsuits Case Title: American Express National Bank v. Michael Dean Case Number: 1911-AC03476 Court Name: St. Charles County Circuit Court Court Address: 300 N. 2nd St., Saint Charles, MO 63301 Case Status: Concluded Nature of the case: Breach of contract/suit on account; Date filed: 05/17/2019 _____ Case Title: American Express National Bank v. Meredith Dean Case Number: 1911-CC00152 Court Name: St. Charles County Circuit Court Court Address: 300 N. 2nd St., Saint Charles, MO 63301 Case Status: Pending Nature of the case: Breach of contract/suit on account; Date filed: 02/11/2019 _____ Case Title: Discover Bank v. Meredith L. Dean Case Number: 1911-AC02693-01 Court Name: St. Charles County Circuit Court Court Address: 300 N. 2nd St., Saint Charles, MO 63301 Case Status: Pending Nature of the case: Breach of contract/suit on account; Date filed: 04/21/2019 _____ Case Title: Capital One Bank (USA), N.A. v. Meredith Dean Case Number: 1911-AC02875 Court Name: St. Charles County Circuit Court Court Address: 300 N. 2nd St., Saint Charles, MO 63301 Case Status: Pending Nature of the case: Breach of contract/suit on account; Date filed: 04/26/2019 _____

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|-------------------------------------------------|------------------------------|----------------------------|-----------|-----------|--|--|--|
| Fill in this information to identify your case: | | | | | | | |
| Debtor 1 | Michael Christopher Dean | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | Meredith Leigh Miller Dean | | | | | | |
| (Spouse, if filing) |) First Name | Middle Name | Last Name | | | | |
| United States Case number (If known) | Bankruptcy Court for the Eas | stern District of Missouri | | , | | | |



Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? |
|-----------------------------------------------------------|------------------------------------------------------------------|-----------------------------------------------------|
| Creditor's name: | □ Surrender the property. | No |
| Description of | Retain the property and redeem it. | _ Yes |
| property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's | Surrender the property. | No |
| name: | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's | Surrender the property. | No |
| name: | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| | Retain the property and [explain]: | |
| Creditor's | Surrender the property. | No |
| name: | Retain the property and redeem it. | Yes |
| Description of property securing debt: | Retain the property and enter into a Reaffirmation Agreement. | |
| č | Retain the property and [explain]: | |

Michael Christopher Dean & Meredith Leigh Miller Dean Pg 192 of 221

Case number (If known)_

Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: No Yes Description of leased property: Lessor's name: No Yes Description of leased property:

Part 3:

Debtor

Sign Below

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

| 🗶 /s/ Michael Christopher Dean | 🗶 /s/ Meredith Leigh Miller Dean |
|--------------------------------|----------------------------------|
| Signature of Debtor 1 | Signature of Debtor 2 |
| Date 10/03/2019 | Date 10/03/2019 |

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| Fill in this i | nformation to i | dentify your case: | Pg 193 of 221 | Check one box only as directed in this form and in |
|---------------------------|-----------------|----------------------------------------------------|------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Debtor 1 Debtor 2 | First Name | istopher Dean Middle Name | Last Name | Form 122A-1Supp: I. There is no presumption of abuse. |
| (Spouse, if filing) | | Middle Name for the: Eastern District of Misson | Last Name Jri | 2. The calculation to determine if a presumption of abuse applies will be made under <i>Chapter 7</i> <i>Means Test Calculation</i> (Official Form 122A–2). |
| Case number (If known) | | | | 3. The Means Test does not apply now because of qualified military service but it could apply later. |
| | | | | Check if this is an amended filing |

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- Not married. Fill out Column A, lines 2-11.
- Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Arried and your spouse is NOT filing with you. You and your spouse are:

Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.

Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

| | | | | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
|----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------------------------|---------------|----------------------|----------------------------------------------|--|
| 2. | Your gross wages, salary, tips, bonuses, overtime, an (before all payroll deductions). | nd commiss | ions | | \$ | \$ | |
| 3. | Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. | | | \$ | \$ | | |
| 4. | All amounts from any source which are regularly paid of you or your dependents, including child support. I from an unmarried partner, members of your household, and roommates. Include regular contributions from a spo filled in. Do not include payments you listed on line 3. | nclude regula your depend | ar contributio lents, parents | ns S, | \$ | \$ | |
| 5. | Net income from operating a business, profession, or farm | Debtor 1 | Debtor 2 | | | | |
| | Gross receipts (before all deductions) | \$ | \$ | | | | |
| | Ordinary and necessary operating expenses | - \$ | - \$ | | | | |
| | Net monthly income from a business, profession, or farm | \$ | \$ | Copy here➔ | \$ | \$ | |
| 6. | Net income from rental and other real property | Debtor 1 | Debtor 2 | | | | |
| | Gross receipts (before all deductions) | \$ | \$ | | | | |
| | Ordinary and necessary operating expenses | - \$ | - \$ | | | | |
| | Net monthly income from rental or other real property | \$ | \$ | Copy here | \$ | \$ | |
| 7. | Interest, dividends, and royalties | | | | \$ | \$ | |

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| Debtor 1 Michael Christoph | | | Case number (if know | vn) | |
|---------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-----------------------|----------------------------------------------------|------------------------------|
| | | | Column A Debtor 1 | <i>Column B</i> Debtor 2 or non-filing spous | e |
| 8. Unemployment compensation | 1 | | \$ | \$ | |
| | contend that the amount received wa nstead, list it here: | | · | | _ |
| • | \$ | <u> </u> | | | |
| | \$ | <u> </u> | | | |
| Pension or retirement income benefit under the Social Securit | Do not include any amount receive y Act. | ed that was a | \$ | \$ | |
| Do not include any benefits rec as a victim of a war crime, a cri | s not listed above. Specify the source eived under the Social Security Act o me against humanity, or international r sources on a separate page and pu | or payments rec I or domestic | eived | | _ |
| | | | \$ | \$ | _ |
| | | | \$ | \$ | - |
| Total amounts from separate | bages, if any. | | + \$ | + \$ | _ |
| | nonthly income. Add lines 2 through Column A to the total for Column B. | n 10 for each | \$ | + | Total current monthly income |
| Part 2: Determine Whether | r the Means Test Applies to Yo | ou | | | |
| - | ly income for the year. Follow these | - | | | |
| 12a. Copy your total current m | onthly income from line 11 | | | . Copy line 11 here 🗲 | \$ |
| Multiply by 12 (the numb | er of months in a year). | | | | x 12 |
| 12b. The result is your annual | income for this part of the form. | | | 12b. | \$ |
| 13. Calculate the median family i | ncome that applies to you. Follow t | these steps: | | | |
| Fill in the state in which you live | | | | | |
| Fill in the number of people in y | our household. | | | | |
| To find a list of applicable medi | for your state and size of household an income amounts, go online using st may also be available at the bankr | the link specifie | d in the separate | | \$ |
| 14. How do the lines compare? | | | | | |
| 14a. Line 12b is less than o Go to Part 3. | r equal to line 13. On the top of page | e 1, check box 1 | , There is no presump | otion of abuse. | |
| 14b. Line 12b is more than Go to Part 3 and fill ou | line 13. On the top of page 1, check l t Form 122A– <i>2.</i> | box 2, <i>The pres</i> | umption of abuse is a | letermined by Form 12. | 2A-2. |
| Part 3: Sign Below | | | | | |
| | re under penalty of perjury that the ir | oformation on th | is statement and in a | ny attachmente je truc | and correct |
| by signing here, i decid | re under penalty of perjury that the in | normation on th | | ny attachments is true | |
| X/s/ Michael Chri | stopher Dean | X | /s/ Meredith Lei | gh Miller Dean | |
| Signature of Debtor 1 | | | Signature of Debtor 2 | | |
| Date 10/03/2019 MM / DD / YY | YY | | Date 10/03/2019 | <u>YY</u> | |
| If you checked line | 14a, do NOT fill out or file Form 122A | \2 . | | | |
| If you checked line | 14b. fill out Form 122A–2 and file it w | vith this form | | | |

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|---------------------|--------------------------|-----------------|------------------|-----------|-------------------|--------------------------|
| Fill in this i | nformation to identi | fy your case: | | | | |
| | | | | | | |
| Debtor 1 | Michael Christo | pher Dean | | | | |
| Dobtor | First Name | Middle Name | e Last Name | | | |
| Debtor 2 | Meredith Leigh | Miller Dear | า | | | |
| (Spouse, if filing) | | Middle Name | | | | |
| United States | Bankruptcy Court for the | P. Contara Diat | wint of Minnouvi | | | |
| Office Offices | Dankruptoy Oburt for the | - Eastern Dist | Inct of Missouri | | | |
| Case number | | | | | | |
| (If known) | | | | | | |
| | | | | | Check if t | his is an amended filing |
| | | | | | | |

Official Form 122A-1Supp

Statement of Exemption from Presumption of Abuse Under § 707(b)(2) 12/15

File this supplement together with *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

| Part 1: Identify the Kind of Debts You Have | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S personal, family, or household purpose." Make sure that your answer is consistent wi Individuals Filing for Bankruptcy (Official Form 101). | .C. § 101(8) as "incurred by an individual primarily for a the answer you gave on line 16 of the <i>Voluntary Petition for</i> |
| No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, <i>There is</i> this supplement with the signed Form 122A-1. | no presumption of abuse, and sign Part 3. Then submit |
| Yes. Go to Part 2. | |
| Part 2: Determine Whether Military Service Provisions Apply to You | |
| 2. Are you a disabled veteran (as defined in 38 U.S.C. § 3741(1))? No. Go to line 3. Yes. Did you incur debts mostly while you were on active duty or while you were 10 U.S.C. § 101(d)(1)); 32 U.S.C. § 901(1). No. Go to line 3. Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, Then submit this supplement with the signed Form 122A-1. 3. Are you or have you been a Reservist or member of the National Guard? No. Complete Form 122A-1. Do not submit this supplement. Yes. Were you called to active duty or did you perform a homeland defense active No. Complete Form 122A-1. Do not submit this supplement. | <i>There is no presumption of abuse,</i> and sign Part 3. |
| Yes. Check any one of the following categories that applies: | |
| I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty. I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on, which is fewer than 540 days before I file this bankruptcy case. I am performing a homeland defense activity for at least 90 days, ending on, which is fewer than 540 days before I file this bankruptcy case. | If you checked one of the categories to the left, go to Form 22A-1. On the top of page 1 of Form 22A-1, check box 3, <i>The Means Test does not apply now</i> , and sign Part 3. Then submit this supplement with the signed Form 22A-1. You are not required to fill out the rest of Official Form 22A-1 during the exclusion period. The <i>exclusion period</i> means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii). If your exclusion period ends before your case is closed, you may have to file an amended form later. |

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Chih Yoa Huang 23 Adair Way Hayward, CA 94542-7940

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Distressed Asset Portfolio III, LLC 10625 Techwoods Circle Cincinnati, OH 45242

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Heather Adams 13348 Apline Cove Dr Alpine, UT 84004-1855 Henry Truong 420 W San Marcos Blvd Unit 150 San Marcos, CA 92069-5640

Hiroki Watarai 83 Woodland Park Dr Tenafly, NJ 07670-3029

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Indiana Department of Revenue PO Box 7206 Indianapolis, IN 46207

Internal Revenue Service Centralized Insolvency Operation PO Box 7346 Philadelphia, PA 19101

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United States Bankruptcy Court Eastern District of Missouri

In re: Michael Christopher Dean & Meredith Leigh Miller Dean

Case No.

Chapter 7

Debtor(s)

Verification of Creditor Matrix

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 10/03/2019

/s/ Michael Christopher Dean

Signature of Debtor

/s/ Meredith Leigh Miller Dean

Signature of Joint Debtor

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| \$245 | filing fee |
|-------|--------------------|
| \$75 | administrative fee |
| \$15 | trustee surcharge |
| \$335 | total fee |
| | \$75 \$15 |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

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Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

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Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_form s.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: <u>http://www.uscourts.gov/FederalCourts/Bankruptcy/</u> <u>BankruptcyResources/ApprovedCredit</u> <u>AndDebtCounselors.aspx</u>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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United States Bankruptcy Court

Eastern District of Missouri

In re Michael Christopher Dean & Meredith Leigh Miller Dean

| Case No. | |
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| | |

Debtor

| Chapter | 7 |
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DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

| For legal services, I have agreed to accept | \$ ^{3,800.00} |
|--------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| Prior to the filing of this statement I have received. | |
| Balance Due. | |
| RETAINER | |
| For legal services, I have agreed to accept a retainer of | \$ |
| The undersigned shall bill against the retainer at an hourly rate of | \$ |
| [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay approved fees and expenses exceeding the amount of the retainer. | all Court |
| 2. The source of the compensation paid to me was: | |
| | |

- ✓ Debtor Other (specify)
- 3. The source of compensation to be paid to me is:
 - Other (specify) Debtor
- I have not agreed to share the above-disclosed compensation with any other person unless they 4. are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the Agreement, together with a list of the names of the people sharing the compensation is attached.

- 5. In return of the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
 - a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
 - c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

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d. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

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| 10/03/2019 | /s/ Bryon Hale, 64883 |
|------------|--------------------------------------------------------------------------------------------------------------|
| Date | Signature of Attorney |
| | Barklage, Brett & Hamill, PC |
| | Name of law firm 211 N. Third Street St. Charles, MO 63301 636-949-2120 bhale@barklage-brett.com |