

Fill in this information to identify the case:

Debtor name BICOM NY, LLC
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
Case number (if known)

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.

Declaration and signature

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

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

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

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

Executed on X Signature of individual signing on behalf of debtor

Gary B. Flom
Printed name

Manager
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name BICOM NY, LLC
 United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
 Case number (if known) _____

Check if this is an amended filing

**Official Form 206Sum
 Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>37,374,156.00</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>37,374,156.00</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ <u>357,650.32</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>246,145.00</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>11,571,690.82</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>12,175,486.14</u>

Debtor BICOM NY, LLC Case number (if known) _____
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11b. Over 90 days old: 461,301.00 - 0.00 =... \$461,301.00
 face amount doubtful or uncollectible accounts

12. Total of Part 3. **\$1,661,971.00**
 Current value on lines 11a + 11b = line 12. Copy the total to line 82.

Part 4: Investments

13. Does the debtor own any investments?

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

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

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

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress Jaguar and Land Rover	06/26/2017	\$7,196.00		\$7,196.00
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies Parts Inventory	06/26/2017	\$906,886.00		\$906,886.00

23. Total of Part 5. **\$914,082.00**
 Add lines 19 through 22. Copy the total to line 84.

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

- No
- Yes

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

- No
- Yes. Book value _____ Valuation method _____ Current Value _____

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

- No
- Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

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

Part 7: Office furniture, fixtures, and equipment; and collectibles

Debtor BICOM NY, LLC Case number (if known) _____
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38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

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

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture Furniture	\$144,420.00		\$144,420.00

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. Collectibles *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$144,420.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- No
 Yes

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

- No
 Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

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

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1.	New Jaguar	\$8,881,693.00		\$8,881,693.00
47.2.	New Land Rover	\$23,516,596.00		\$23,516,596.00
47.3.	Pre-owned	\$300,705.00		\$300,705.00
47.4.	?	\$4,590,345.00		\$459,035.00

48. Watercraft, trailers, motors, and related accessories *Examples:* Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. Aircraft and accessories

Debtor BICOM NY, LLC Case number (if known) _____
 Name

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)
Service Equipment & Fixtrues \$1,349,502.00 \$1,349,502.00

51. Total of Part 8. \$34,507,531.00
 Add lines 47 through 50. Copy the total to line 87.

52. Is a depreciation schedule available for any of the property listed in Part 8?
 No
 Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?
 No
 Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

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

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. 787 Eleventh Avenue, New York, New York	tenant	Unknown		Unknown

56. Total of Part 9. \$0.00
 Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

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

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

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- No. Go to Part 11.
- Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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60. Patents, copyrights, trademarks, and trade secrets

Debtor	Name	Case number (if known)
	BICOM NY, LLC	
?		Unknown
61.	Internet domain names and websites	Unknown
?		Unknown
62.	Licenses, franchises, and royalties	Unknown
?		Unknown
63.	Customer lists, mailing lists, or other compilations	Unknown
?		Unknown
64.	Other intangibles, or intellectual property	Unknown
?		Unknown
65.	Goodwill	Unknown
?		Unknown

66. Total of Part 10. \$0.00
 Add lines 60 through 65. Copy the total to line 89.

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?
 No
 Yes
68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?
 No
 Yes
69. Has any of the property listed in Part 10 been appraised by a professional within the last year?
 No
 Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?
 Include all interests in executory contracts and unexpired leases not previously reported on this form.
 No. Go to Part 12.
 Yes Fill in the information below.

Debtor **BICOM NY, LLC** Case number (if known) _____
 Name

Part 12: Summary

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

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$0.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$146,152.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$1,661,971.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$914,082.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$144,420.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$34,507,531.00	
88. Real property. <i>Copy line 56, Part 9</i>>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$37,374,156.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$37,374,156.00

Schedule Reporting

Schedule# 25
 Schedule Type 4-CONTROLLED
 Display Control All Detail
 Cutoff Date 06/29/17

Sch#	Control#	Description	Date	Reference#	PO#/Rcpt#	Jnl#	Acct#	Detail	Account#	Account#	Account#	Account#	Account#	Days
25		DEPOSITS							1835					
	30418													
		DIGE ASSOC/640 86TH ST	07/29/14	6322		06	1835	27,000.00						
								TOTAL		27,000.00				
		CONEDISON												
		SEC DEP/CON EDISON	01/03/14	992		11	1835	3,000.00						
								TOTAL		3,000.00				
		DEPOSIT												
		SECURITY DEPOSIT	01/24/11	DEPOSIT		09	1835	1,680.00						
								TOTAL		1,680.00				
		NATGRID												
		50% SECURITY DEPOSIT	07/13/11	2806		06	1835	2,080.00						
		2ND INST DEPOSIT	07/22/11	JULY11CY		09	1835	1,040.00						
		SECURITY DEPOSIT/166 ...	06/18/14	DEPOSIT2014		09	1835	3,260.00						
								TOTAL		6,380.00				
		NATIONALG...												
		DEPOSIT ELECTRIC	11/09/10	1011		06	1835	500.00						
								TOTAL		500.00				
		NOV10												
		DEPOSIT CI PAID 12/01/...	11/30/10	NOV10		09	1835	3,265.00						
		WATER BILL	11/30/10	NOV10		09	1835	500.00						
								TOTAL		3,765.00				
		WASCO												
		DEPOSIT	12/10/10	11		06	1835	3,440.00						
		DOWNPYMT 1 OF 10	05/18/11	1185618A		09	1835	500.00						
		SHARE OF STOCK 2ND I...	05/18/11	1197535A		09	1835	500.00						
		PYMT 3 OF 10 PURCH SH...	05/18/11	1202776A		09	1835	500.00						
		4TH DEPOSIT OF 10 SHA...	05/18/11	1212294A		09	1835	500.00						
		5TH PYMT OF 10TH SHARE	07/21/11	1216365A		09	1835	500.00						
		6TH OF AT SHARE OF ST...	07/21/11	1225428A		09	1835	500.00						
		7 OF 10 STOCK PURCHASE	08/19/11	1231200		09	1835	500.00						
		PYMT 8 OF 10	09/30/11	1233713		09	1835	500.00						
		PYMT 9 OF 10	09/30/11	1241994		09	1835	500.00						
		RECLASS	06/29/17	SCH25CLN0617		11	1835	500.00						
								TOTAL		8,440.00				
								Total Bala...		50,765.00		50,765.00		
								Total Debi...		50,765.00		50,765.00		
								Total Cred...						
								Description		Schedule-To...		%-of-Total		No-Of-TRs No-Of-BALs
								Total Current	50,765.00	100.00%			7	
								Total (31-60)		0.00%				
								Total (61-90)		0.00%				
								Total (91-1...		0.00%				
								Total (121+)		0.00%				
								Total Debits	50,765.00				7	
								Total Credits						
								Description		Debit Entries		Credit Entries		Total Entries No-Of-TRs No-Of-BALs
								DEPOSITS ...	50,765.00	0.00		50,765.00	20	
								Total	50,765.00			50,765.00	20	7
								General L...	50,765.00					
								Reconcilia...						
								Journal 06	188,020.00				4	
								Journal 09	14,745.00				14	
								Journal 11	-152,000.00				2	
								Total	50,765.00				20	

Fill in this information to identify the case:

Debtor name BICOM NY, LLC
 United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
 Case number (if known) _____

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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

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

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

Part 1: List Creditors Who Have Secured Claims

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

		Column A Amount of claim <small>Do not deduct the value of collateral.</small>	Column B Value of collateral that supports this claim
<p>2.1 CDT Resources, LLC <small>Creditor's Name</small> Lindabury, McCormick et al 53 Cardinal Drive Westfield, NJ 07091 <small>Creditor's mailing address</small></p> <p><small>Creditor's email address, if known</small></p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien</p> <hr/> <p>Describe the lien Mechanic Lien</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p>	<p>\$173,969.22</p>	<p>\$0.00</p>

<p>2.2 Energy Design Service Systems <small>Creditor's Name</small> 787 11th Avenue New York, NY 10019 <small>Creditor's mailing address</small></p> <p><small>Creditor's email address, if known</small></p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property?</p>	<p>Describe debtor's property that is subject to a lien</p> <hr/> <p>Describe the lien Mechanic Lien</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply</p>	<p>\$183,681.10</p>	<p>\$0.00</p>
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Debtor **BICOM NY, LLC**
Name

Case number (if know)

- No
- Yes. Specify each creditor, including this creditor and its relative priority.
- Contingent
- Unliquidated
- Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. \$357,650.32

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

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

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

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
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Fill in this information to identify the case:

Debtor name **BICOM NY, LLC**
 United States Bankruptcy Court for the: **SOUTHERN DISTRICT OF NEW YORK**
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Check if this is an amended filing

Official Form 206E/F
Schedule E/F: Creditors Who Have Unsecured Claims

12/15

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

Part 1: List All Creditors with PRIORITY Unsecured Claims

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

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

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

		Total claim	Priority amount
<p>2.1 Priority creditor's name and mailing address Alan Flom 96 Greenpoint Avenue Apt. 4L Brooklyn, NY 11222</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$2,500.00</p>	<p>\$2,500.00</p>
<p>2.2 Priority creditor's name and mailing address Alejandro Almonte 1971 Webster Avenue Apt. 7F Bronx, NY 10457</p> <p>Date or dates debt was incurred _____</p> <p>Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p>\$2,504.00</p>	<p>\$2,504.00</p>

Debtor **BICOM NY, LLC** Case number (if known) _____
 Name _____

2.3	Priority creditor's name and mailing address Alex Ashwal	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Alexander Kopp 62 Cuba Avenue Staten Island, NY 10306	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Alexander Lourie 51 Clifton Avenue Newark, NJ 07104	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,657.00	\$3,657.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Amr Mousa 6201-07 Blvd. E. Apt. 3DN West New York, NJ 07093	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC** Case number (if known) _____
 Name _____

2.7	Priority creditor's name and mailing address Ana Acosta 241 91st Street 1st Floor Brooklyn, NY 11209	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Andres Martinez 562 West 190th Street Apt. 5D New York, NY 10040	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address Aneudy Gonzalez	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address Anna Day 55 Sunrise Drive Hawthorne, NJ 07506	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,500.00	\$2,500.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC** Case number (if known)

2.11	Priority creditor's name and mailing address Anthony Vanella 505 West 54th Street Apt. 512 New York, NY 10019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$3,396.00</u>	<u>\$3,396.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address Beethoven Polliard 445 E. 120th Street New York, NY 10035	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,820.00</u>	<u>\$2,820.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address Benjamin Leung 25 Stratford Road Apt. B3 Brooklyn, NY 11218	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$3,250.00</u>	<u>\$3,250.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address Beverly Shaw 10 Pinebrook Drive Neptune, NJ 07753	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,600.00</u>	<u>\$2,600.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC** Case number (if known)

2.15 Priority creditor's name and mailing address **Boris Isakov**
2284 E. 27th Street
Brooklyn, NY 11229 As of the petition filing date, the claim is: **\$9,250.00** **\$9,250.00**
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) No
 Yes

2.16 Priority creditor's name and mailing address **Brett Rothaus**
25 Hillside
Apt. 2E
New York, NY 10040 As of the petition filing date, the claim is: **\$5,547.00** **\$5,547.00**
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) No
 Yes

2.17 Priority creditor's name and mailing address **Carla Oliva** As of the petition filing date, the claim is: **Unknown** **\$0.00**
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) No
 Yes

2.18 Priority creditor's name and mailing address **Carolina Molina**
154 Oakwood Avenue
Cliffside Park, NJ 07010 As of the petition filing date, the claim is: **Unknown** **\$0.00**
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4) No
 Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
 Name _____

2.19	Priority creditor's name and mailing address Christopher Merritt 8 Cottage Lane Englewood, NJ 07631	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>Unknown</u>	<u>\$0.00</u>
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.20	Priority creditor's name and mailing address Chukwuemek Akuchie 1772 Monroe Avenue Bronx, NY 10457	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>Unknown</u>	<u>\$0.00</u>
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.21	Priority creditor's name and mailing address Claribel Milan 540 W. 55th Street Apt. 6Y New York, NY 10019	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>Unknown</u>	<u>\$0.00</u>
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.22	Priority creditor's name and mailing address Cynthia Murillo 35-33 90th Street Jackson Heights, NY 11372	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$4,638.00</u>	<u>\$4,638.00</u>
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC** Case number (if known)

Name

2.23 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

Daniel Ramos-Cedeno
41 Pilot Place
West Orange, NJ 07052

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.24 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

Daniele Pontarin
9 Moffatt Street
Oyster Bay, NY 11771

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.25 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

David Fontanez
26 Orchard Trail
Monroe, NY 10950

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.26 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

David Wagner
518 W. 135th Street
Apt. 6A
New York, NY 10031

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

Debtor	Name	Case number (if known)		
2.27	Priority creditor's name and mailing address Devindra Ramsubhag 89-34 129th Street Richmond Hill, NY 11418	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,824.00	\$3,824.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.28	Priority creditor's name and mailing address Diego Giraldo 1429 Ovington Lane 1st Floor Brooklyn, NY 11219	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.29	Priority creditor's name and mailing address Dinesh Kooblall 50 Crosby Avenue Albertson, NY 11507	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,487.00	\$4,487.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.30	Priority creditor's name and mailing address Dulcina Pichardo 3376 Fenton Avenue Apt. 3J Bronx, NY 10469	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,750.00	\$3,750.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	BICOM NY, LLC <small>Name</small>	Case number (if known)	
2.31	Priority creditor's name and mailing address DuVaughn Thompson 5301 Avenue D Brooklyn, NY 11203	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,975.00 \$2,975.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.32	Priority creditor's name and mailing address Edward Olguin	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.33	Priority creditor's name and mailing address Elia Saavedra 37-56 108 Street Corona, NY 11368	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,234.00 \$2,234.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.34	Priority creditor's name and mailing address Enrique Fonseca 338 Forest Street Kearny, NJ 07032	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **BICOM NY, LLC** Case number (if known)

2.35 Priority creditor's name and mailing address **Eugenio Burgos**
312 East 116th Street
Apt. 4C
New York, NY 10029

As of the petition filing date, the claim is: \$3,819.00 \$3,819.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

2.36 Priority creditor's name and mailing address **Fernando Alvarez**
108-69 50th Avenue
Corona, NY 11368

As of the petition filing date, the claim is: \$6,824.00 \$6,824.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

2.37 Priority creditor's name and mailing address **Fernando Lucero**
223 23rd Street
Apt. 1L
Brooklyn, NY 11232

As of the petition filing date, the claim is: Unknown \$0.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

2.38 Priority creditor's name and mailing address **Francis Pascale**
125 78th Street
Brooklyn, NY 11209

As of the petition filing date, the claim is: Unknown \$0.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

Debtor	BICOM NY, LLC <small>Name</small>	Case number (if known)	
2.39	Priority creditor's name and mailing address Gabriel Feliz 180 Meagher Avenue Bronx, NY 10465	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.40	Priority creditor's name and mailing address Gary Flom 50 Riverside Blvd. #10A New York, NY 10169	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.41	Priority creditor's name and mailing address George Minaeff 906 E. 178th Street Apt. 4C Bronx, NY 10460	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,600.00 \$3,600.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.42	Priority creditor's name and mailing address Hakim Vargas 2350 Webster Avenue Bronx, NY 10458	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **BICOM NY, LLC** Case number (if known) _____
 Name _____

2.43	Priority creditor's name and mailing address Heather Caligione 1017 Dean Avenue 1st Floor Bronx, NY 10465	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.44	Priority creditor's name and mailing address Hector Hicks 510 2nd Avenue Apt. 7D New York, NY 10016	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,400.00	\$3,400.00
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.45	Priority creditor's name and mailing address Isaac Ashwal 5 First Street Englewood Cliffs, NJ 07632	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00	\$0.00
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.46	Priority creditor's name and mailing address Istrha Santana 755 Warwick Street 2nd Floor Brooklyn, NY 11207	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC**
Name

Case number (if known)

2.47 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00
Check all that apply.

Jairon Then
7200 Park Avenue
Apt. 402
North Bergen, NJ 07047

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

2.48 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00
Check all that apply.

James Lanzarone
2643 Harding Avenue
Bronx, NY 10465

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

2.49 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00
Check all that apply.

Jason Marino
1060 Ocean Avenue
Apt. 1F
Brooklyn, NY 11226

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

2.50 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00
Check all that apply.

Jeffrey Gomez

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

Debtor **BICOM NY, LLC** Case number (if known)

Name

2.51 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$3,244.00 \$3,244.00

Jermaine Velasco
8 Maxwell Street
East Rockaway, NY 11518

Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

2.52 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

John D. Tremaroli
70 Orchard Road
Briarcliff Manor, NY 10510

Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

2.53 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$3,137.00 \$3,137.00

John Randazzo
125 Paulding Avenue
Staten Island, NY 10314

Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

2.54 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

John Sterople
49 9th Avenue
Hawthorne, NJ 07506

Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

Debtor	BICOM NY, LLC <small>Name</small>	Case number (if known)		
2.55	Priority creditor's name and mailing address John Wakely 14 Wetbrook Drive Caldwell, NJ 07006	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>Unknown</u>	<u>\$0.00</u>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.56	Priority creditor's name and mailing address Johnny Acevedo 54 Bay 29th Street Apt. B2 Brooklyn, NY 11214	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$3,000.00</u>	<u>\$3,000.00</u>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.57	Priority creditor's name and mailing address Jorge Guzman 656 W. 160th Street Apt. 3E New York, NY 10032	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$1,935.00</u>	<u>\$1,935.00</u>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.58	Priority creditor's name and mailing address Jose Francis	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,032.00</u>	<u>\$2,032.00</u>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC** Case number (if known)

2.59	Priority creditor's name and mailing address Jose Gonzalez 2175 Ryer Avenue Apt. 5A Bronx, NY 10457	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>Unknown</u>	<u>\$0.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.60	Priority creditor's name and mailing address Joseph Barros 8 Birchwood Terrace Nanuet, NY 10954	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>Unknown</u>	<u>\$0.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.61	Priority creditor's name and mailing address Joseph Divita 23-42 Cambridge Road Fair Lawn, NJ 07410	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$6,742.00</u>	<u>\$6,742.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.62	Priority creditor's name and mailing address Josimar Liriano 1240 Sherman Avenue Apt. C10 Bronx, NY 10456	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,194.00</u>	<u>\$2,194.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC** Case number (if known) _____
 Name _____

2.63	Priority creditor's name and mailing address Julian Latoni Rivera	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.64	Priority creditor's name and mailing address Julio Roman 1800 Crotona Avenue Apt. #2 Bronx, NY 10457	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,934.00	\$2,934.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.65	Priority creditor's name and mailing address Karla Pena 234 East 119th Street Apt. 1C New York, NY 10035	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.66	Priority creditor's name and mailing address Kathy Lojewska	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,600.00	\$2,600.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

2.67	Priority creditor's name and mailing address Kelly Brathwaite 120-35 233rd Street Cambria Heights, NY 11411	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.68	Priority creditor's name and mailing address Kenny Bonet	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.69	Priority creditor's name and mailing address Kevin Becker 204 West Prospect Street Waldwick, NJ 07463	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.70	Priority creditor's name and mailing address Kimson Henry 150-28 113th Avenue Jamaica, NY 11433	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,681.00	\$5,681.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC** Case number (if known)

Name

2.71 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

Lisa Serrago
28 Blue Sky Road
Wurtsboro, NY 12790

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

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

Is the claim subject to offset?
 No
 Yes

2.72 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

Lorissa Fittry
26 Orchard Trail
Monroe, NY 10950

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

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

Is the claim subject to offset?
 No
 Yes

2.73 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$9,700.00 \$9,700.00

Louis Tenore
53 Sandford Road
Fair Lawn, NJ 07410

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

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

Is the claim subject to offset?
 No
 Yes

2.74 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

Luis Torres
8613 122nd Street
Richmond Hill, NY 11418

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

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

Is the claim subject to offset?
 No
 Yes

Debtor	BICOM NY, LLC <small>Name</small>	Case number (if known)
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2.75	Priority creditor's name and mailing address Manuel Polanco 69-01 62nd Street Ridgewood, NY 11385	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$2,460.00</u>	<u>\$2,460.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.76	Priority creditor's name and mailing address Mario Deleon 1920 77th Street Brooklyn, NY 11214	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>Unknown</u>	<u>\$0.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.77	Priority creditor's name and mailing address Mario Huaylla 17 Pechoh Road Lake Peekskill, NY 10537	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$3,982.00</u>	<u>\$3,982.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.78	Priority creditor's name and mailing address Mark Greenberg 310 E. 46th Street Apt. 11K New York, NY 10017	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>Unknown</u>	<u>\$0.00</u>
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC** Case number (if known)

Name

2.79 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$3,669.00 \$3,669.00

Marlon Ubaldo
1513 Hamilton Street
Belleville, NJ 07109

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.80 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

Mary Specht
30 Roselle Avenue
Cranford, NJ 07016

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.81 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

Matthew Campana
18 Greene Street
Mahwah, NJ 07430

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.82 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

Matthew Lawless
3047 Brighton 6th Street
Apt. 3A
Brooklyn, NY 11235

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

Debtor **BICOM NY, LLC** Case number (if known)

2.83	Priority creditor's name and mailing address Mayvindra Lutchman 538 Beach Avenue Bronx, NY 10473	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,379.00	\$1,379.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.84	Priority creditor's name and mailing address Mikhail Kopilovich 28 Virginia Avenue Monroe, NY 10950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$8,750.00	\$8,750.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.85	Priority creditor's name and mailing address Mohammad Miah 80 East Pine Street Long Beach, NY 11561	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.86	Priority creditor's name and mailing address Moses Benliza 1328 Peapond Road Bellmore, NY 11710	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **BICOM NY, LLC** Case number (if known)

2.87 Priority creditor's name and mailing address **Moustafa Attia**
4301 Park Avenue
Apt. 8D
Union City, NJ 07087

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

\$3,212.00 **\$3,212.00**

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.88 Priority creditor's name and mailing address **Natalie Ashwal**
5 First Street
Englewood Cliffs, NJ 07632

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Unknown **\$0.00**

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.89 Priority creditor's name and mailing address **Nedzad Lukolic**
205 West 95th Street
New York, NY 10025

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

\$3,490.00 **\$3,490.00**

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.90 Priority creditor's name and mailing address **Nelson Cartagena**
535 W. 135th Street
Apt. 3F
New York, NY 10031

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

\$2,045.00 **\$2,045.00**

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

Debtor **BICOM NY, LLC** Case number (if known)

2.91 Priority creditor's name and mailing address **Nicholas Stigliano
23 Evan Place
Staten Island, NY 10312** As of the petition filing date, the claim is: Unknown \$0.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.92 Priority creditor's name and mailing address **Nikki Flynn
214 Tenth Street
Wood Ridge, NJ 07075** As of the petition filing date, the claim is: \$5,005.00 \$5,005.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.93 Priority creditor's name and mailing address **Noel Forbes
150 Lefferts Avenue
Apt. 5G
Brooklyn, NY 11225** As of the petition filing date, the claim is: \$3,980.00 \$3,980.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.94 Priority creditor's name and mailing address **Oleg Mizerak** As of the petition filing date, the claim is: \$2,478.00 \$2,478.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

Debtor BICOM NY, LLC		Case number (if known)	
Name			
2.95	Priority creditor's name and mailing address Omar Acuna 12 Osbourne Hill Road Fishkill, NY 12524	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,766.00 \$4,766.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.96	Priority creditor's name and mailing address Pablo Mendoza 80 Edgecombe Avenue Apt. 52 New York, NY 10030	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,388.00 \$5,388.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.97	Priority creditor's name and mailing address Paulo Antao 1052 Mt. Vernon Road Union, NJ 07083	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,343.00 \$3,343.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.98	Priority creditor's name and mailing address Peter Triantafillou 13-15 145th Street NY 11000	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **BICOM NY, LLC** Case number (if known)

2.99 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$2,400.00 \$2,400.00
Phillip Padilla
340 Bay 11th Street
Brooklyn, NY 11228
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

2.100 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$3,626.00 \$3,626.00
Rafael Rodriguez
385 Ft. Washington Avenue
Apt. #5
New York, NY 10033
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

2.101 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$3,532.00 \$3,532.00
Ramon Garcia
86-28 125th Street
Richmond Hill, NY 11418
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

2.102 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$4,800.00 \$4,800.00
Raquel Mosquera
97-20 57th Avenue
Corona, NY 11368
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

Debtor **BICOM NY, LLC**
Name

Case number (if known)

2.103 Priority creditor's name and mailing address **Unknown** **\$0.00**

Ravin Boodram
114-37 122nd Street
South Ozone Park, NY 11420

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

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

Is the claim subject to offset?
 No
 Yes

2.104 Priority creditor's name and mailing address **Unknown** **\$0.00**

Ricardo Rodriguez
45 Rutgers Street
Apt. #13H
New York, NY 10002

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

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

Is the claim subject to offset?
 No
 Yes

2.105 Priority creditor's name and mailing address **Unknown** **\$0.00**

Ricardo Rodriguez
45 Rutgers Street
Apt. #13H
New York, NY 10002

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

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

Is the claim subject to offset?
 No
 Yes

2.106 Priority creditor's name and mailing address **Unknown** **\$0.00**

Richard Hernandez
277 E. 4th Street
Apt. 2A
New York, NY 10009

As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

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

Is the claim subject to offset?
 No
 Yes

Debtor	BICOM NY, LLC <small>Name</small>	Case number (if known)
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2.107	Priority creditor's name and mailing address Richard Leeolou 140 E. 46th Street Apt. 8H New York, NY 10017	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number <small>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</small>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.108	Priority creditor's name and mailing address Ricky Chu 93-22 49th Street Elmhurst, NY 11373	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,596.00	\$4,596.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number <small>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</small>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.109	Priority creditor's name and mailing address Robert Faraoni 25 Distillery Road Warwick, NY 10990	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,040.00	\$3,040.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number <small>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</small>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.110	Priority creditor's name and mailing address Roberto Valenzuela 5 Eagle Lane Poughkeepsie, NY 12601	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number <small>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</small>		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	BICOM NY, LLC <small>Name</small>	Case number (if known)	
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2.111	Priority creditor's name and mailing address Roman Lozovsky 1 Orchard Avenue Millburn, NJ 07041	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,200.00	\$5,200.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number <small>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</small>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.112	Priority creditor's name and mailing address Ronald Yang 24 Fifth Avenue Apt. 141 New York, NY 10011	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number <small>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</small>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.113	Priority creditor's name and mailing address Ryan Alexander 154 Oakwood Avenue Cliffside Park, NJ 07010	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number <small>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</small>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.114	Priority creditor's name and mailing address Sacha Von Loewenstein 50 Gedney Park Drive White Plains, NY 10605	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number <small>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)</small>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor BICOM NY, LLC Name		Case number (if known)	
2.115	Priority creditor's name and mailing address Sammy Romero 489 Florida Grove Road Perth Amboy, NJ 08861	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.116	Priority creditor's name and mailing address Saul Figueroa 1660 Crotona Park Apt. 1C Bronx, NY 10460	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,233.00 \$2,233.00
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.117	Priority creditor's name and mailing address Sean Fitzgerald 1277 Decatur Street Apt. 3R Brooklyn, NY 11207	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$3,250.00 \$3,250.00
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.118	Priority creditor's name and mailing address Senait Tewelde 1950 Andrews Avenue Apt. 7E3 Bronx, NY 10453	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred		Basis for the claim:	
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor BICOM NY, LLC		Case number (if known)	
Name			
2.119	Priority creditor's name and mailing address Serguei Artemov 79 Brighton 11th Apt. 2K Brooklyn, NY 11235	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.120	Priority creditor's name and mailing address Shawn Roberts 230 East 26th Street Apt. 3A Brooklyn, NY 11226	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,670.00 \$2,670.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.121	Priority creditor's name and mailing address Sindroutie Dabydeen 1520 Sylvan Lane East Meadow, NY 11554	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,297.00 \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.122	Priority creditor's name and mailing address Stephanie Fierro Fernandez	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **BICOM NY, LLC** Case number (if known)

Name

2.123 Priority creditor's name and mailing address **Steven Bautista** As of the petition filing date, the claim is: Unknown \$0.00
Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

2.124 Priority creditor's name and mailing address **Steven Schneir** As of the petition filing date, the claim is: \$8,500.00 \$8,500.00
35-1602 Hudson Street
Jersey City, NJ 07302
Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

2.125 Priority creditor's name and mailing address **Susan Schmitt** As of the petition filing date, the claim is: Unknown \$0.00
678 Wicklow Way
Westwood, NJ 07675
Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

2.126 Priority creditor's name and mailing address **Tatsiana Holubeva** As of the petition filing date, the claim is: Unknown \$0.00
Check all that apply.

- Contingent
- Unliquidated
- Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

- No
- Yes

Debtor **BICOM NY, LLC** Case number (if known)

Name

2.127 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$3,900.00 \$3,900.00

Tessa Flom
505 West 54th Street
Apt. 512
New York, NY 10019

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.128 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$3,947.00 \$3,947.00

Tessa Kraus
567 Warren Avenue
Hawthorne, NY 10532

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.129 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

Thomas Kharzhanovsky
2452 Lexington Street
Fort Lee, NJ 07024

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.130 Priority creditor's name and mailing address As of the petition filing date, the claim is: Unknown \$0.00

Thomas Petrovich
2213 Brookdale Pk Dr
Forked River, NJ 08731

Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

Debtor **BICOM NY, LLC**
Name

Case number (if known)

2.131	Priority creditor's name and mailing address Tristan Ashwal 5 First Street Englewood Cliffs, NJ 07632	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.132	Priority creditor's name and mailing address Valentin Shepsis 39 Jean Terrace Parsippany, NJ 07054	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.133	Priority creditor's name and mailing address Vasileios Gkenios 26-24 29th Street Apt. 2F Astoria, NY 11102	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

2.134	Priority creditor's name and mailing address Venamin Nilva 3201 NE 183rd Street, #2004 North Miami Beach, FL 33160	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00
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Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset?

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

No
 Yes

Debtor **BICOM NY, LLC** Case number (if known)

2.135 Priority creditor's name and mailing address **Vichislav Kogan**
2452 E. 14th Street
Brooklyn, NY 11235 As of the petition filing date, the claim is: \$4,449.00 \$4,449.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

2.136 Priority creditor's name and mailing address **Vitalii Lukashenko**
1875 West 10th Street
Brooklyn, NY 11223 As of the petition filing date, the claim is: \$3,361.00 \$3,361.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

2.137 Priority creditor's name and mailing address **Vlad Tumanovsky**
490 North Avenue
Fort Lee, NJ 07024 As of the petition filing date, the claim is: \$5,205.00 \$5,205.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

2.138 Priority creditor's name and mailing address **Yngrid Rodriguez** As of the petition filing date, the claim is: \$1,418.00 \$1,418.00
Check all that apply.
 Contingent
 Unliquidated
 Disputed

Date or dates debt was incurred Basis for the claim:

Last 4 digits of account number Is the claim subject to offset?
 Specify Code subsection of PRIORITY No
 unsecured claim: 11 U.S.C. § 507(a) (4) Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
 Name _____

2.139	Priority creditor's name and mailing address Zaza Kikiani 342 97th Street 2nd Floor Brooklyn, NY 11209	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown \$0.00
Date or dates debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

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

			Amount of claim
3.1	Nonpriority creditor's name and mailing address 5W Public Relations LLC 1166 Avenue of the Americas New York, NY 10036 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,346.84
3.2	Nonpriority creditor's name and mailing address 77 Metro Way, LLC 400 Plaza Drive Secaucus, NJ 07094 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$120,000.00
3.3	Nonpriority creditor's name and mailing address Aboyoun & Heller LLC 77 Bloomfield Avenue Pine Brook, NJ 07058 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$65,312.14
3.4	Nonpriority creditor's name and mailing address ADP, LLC PO Box 842875 Boston, MA 02284-2875 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,813.23
3.5	Nonpriority creditor's name and mailing address Air Contact Transport, Inc. PO Box 570 Budd Lake, NJ 07828 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,765.53

Debtor BICOM NY, LLC Name		Case number (if known)	
3.6	Nonpriority creditor's name and mailing address Albco Tech, Inc. 22-76 Steinway Street Astoria, NY 11105 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.7	Nonpriority creditor's name and mailing address Allegro Sanitation Corp. PO Box 2615 Secaucus, NJ 07096-2615 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$640.11
3.8	Nonpriority creditor's name and mailing address Ansira 8396 Solutions Center Chicago, IL 60677-8003 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$772.76
3.9	Nonpriority creditor's name and mailing address Aquatic Scenes Inc. 2739 Evergreen Street Yorktown Heights, NY 10598 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,099.64
3.10	Nonpriority creditor's name and mailing address Aramark Refreshment Services 1511 Tonnelle Avenue North Bergen, NJ 07047 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,979.71
3.11	Nonpriority creditor's name and mailing address Aramark Services, Inc. 27310 Network Place Chicago, IL 60673-1273 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,439.94
3.12	Nonpriority creditor's name and mailing address Aramark Uniform Services PO Box 28050 New York, NY 10087 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,967.75

Debtor	Name	Case number (if known)
3.13	Nonpriority creditor's name and mailing address Aspen Marketing Services, LLC PO Box 84009 Chicago, IL 60689-4009 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$1,835.78</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address Assurant Solutions-USPC 21844 Network Place Chicago, IL 60673-1218 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15	Nonpriority creditor's name and mailing address Assured Environments 45 Broadway, 10th Floor New York, NY 10006 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$9,727.43</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	Nonpriority creditor's name and mailing address Auto Ad Sales, Inc. 136A Research Drive Milford, CT 06460 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$358.01</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Nonpriority creditor's name and mailing address Auto Alert, LLC 9050 Irvine Center Drive Irvine, CA 92618 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$20,459.84</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address Autoloop PO Box 1266 Clearwater, FL 33757 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$18,072.39</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address Automotive Upholstery & Conv 170 Marbledale Road Tuckahoe, NY 10707 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$1,100.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.20 Nonpriority creditor's name and mailing address **Autoxcel Corporation** As of the petition filing date, the claim is: *Check all that apply.* **\$2,290.00**
272 N. Front Street
Suite 220
Wilmington, NC 28401
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.21 Nonpriority creditor's name and mailing address **Bayridge Ford** As of the petition filing date, the claim is: *Check all that apply.* **\$723.03**
612 86th Street
Brooklyn, NY 11228
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.22 Nonpriority creditor's name and mailing address **Bisma Mobil Service** As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
718 11th Avenue
New York, NY 10019
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.23 Nonpriority creditor's name and mailing address **Bloomberg Communications, Inc.** As of the petition filing date, the claim is: *Check all that apply.* **\$41,478.41**
PO Box 416985
Boston, MA 02241-6985
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.24 Nonpriority creditor's name and mailing address **Bluebird Auto Rental Systems** As of the petition filing date, the claim is: *Check all that apply.* **\$716.00**
200 Mineral Springs Drive
Dover, NJ 07801
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.25 Nonpriority creditor's name and mailing address **Bosch Auto Svc Solutions** As of the petition filing date, the claim is: *Check all that apply.* **\$3,805.09**
PO Box 71479
Chicago, IL 60694-1479
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.26 Nonpriority creditor's name and mailing address **BP Lubricants USA Inc.** As of the petition filing date, the claim is: *Check all that apply.* **\$36,661.46**
12276 Collections Center Drive
Chicago, IL 60693
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.27 Nonpriority creditor's name and mailing address **Breeze It Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$9,279.16
3525 Hyland Avenue
Suite 160
Costa Mesa, CA 92626
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.28 Nonpriority creditor's name and mailing address **Cablevision Light Path Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$1,085.52
PO Box 360111
Pittsburgh, PA 15251-6111
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.29 Nonpriority creditor's name and mailing address **Canon Financial Services, Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$2,176.89
14904 Collections Center Drive
Chicago, IL 60693
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.30 Nonpriority creditor's name and mailing address **Carfax, Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$2,031.84
16630 Collection Center Drive
Chicago, IL 60693
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.31 Nonpriority creditor's name and mailing address **Cargurus** As of the petition filing date, the claim is: *Check all that apply.* \$5,494.00
PO Box 419008
Boston, MA 02241-9008
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.32 Nonpriority creditor's name and mailing address **Carnow Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$3,885.00
25 South Park Street
Hanover, NH 03755
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.33 Nonpriority creditor's name and mailing address **Cars.com, LLC** As of the petition filing date, the claim is: *Check all that apply.* \$16,601.87
2631 Solution Center
Chicago, IL 60677-0001
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

Debtor Name	Case number (if known)
BICOM NY, LLC	
3.34 Nonpriority creditor's name and mailing address Casings, Inc. PO Box 731 Catskill, NY 12414 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$800.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ___ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35 Nonpriority creditor's name and mailing address CDK Global LLC 25455 Network Place Chicago, IL 60673-1254 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$9,815.22 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ___ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36 Nonpriority creditor's name and mailing address CDT Resources, LLC 46 N. Central Avenue Ramsey, NJ 07446 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ___ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.37 Nonpriority creditor's name and mailing address Central Business Systems 1219 Walt Whitman Road Melville, NY 11747 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,751.62 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ___ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38 Nonpriority creditor's name and mailing address CLF Ontario d/b/a Solu Tech 7647 Main Street Victor, NY 14564 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$29,454.16 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ___ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39 Nonpriority creditor's name and mailing address Cogent Communications, Inc. PO Box 791087 Baltimore, MD 21279-1087 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$90.62 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ___ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.40 Nonpriority creditor's name and mailing address Con Edison PO Box 1702 New York, NY 10116 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,884.76 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ___ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.41 Nonpriority creditor's name and mailing address **Corelogic Credco LLC** As of the petition filing date, the claim is: *Check all that apply.* **\$3,238.15**
PO Box 847070 Contingent
Dallas, TX 75284-7070 Unliquidated
Date(s) debt was incurred __ Disputed
Last 4 digits of account number __ Basis for the claim: __
Is the claim subject to offset? No Yes

3.42 Nonpriority creditor's name and mailing address **Coventry West** As of the petition filing date, the claim is: *Check all that apply.* **\$115.00**
2101 Randall Road Contingent
Lithonia, GA 30058 Unliquidated
Date(s) debt was incurred __ Disputed
Last 4 digits of account number __ Basis for the claim: __
Is the claim subject to offset? No Yes

3.43 Nonpriority creditor's name and mailing address **Creative Audio Security** As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
355 65th Street Contingent
Brooklyn, NY 11220 Unliquidated
Date(s) debt was incurred __ Disputed
Last 4 digits of account number __ Basis for the claim: __
Is the claim subject to offset? No Yes

3.44 Nonpriority creditor's name and mailing address **Creative Environmental Solutio** As of the petition filing date, the claim is: *Check all that apply.* **\$3,100.00**
39 West 37th Street Contingent
14th Floor Unliquidated
New York, NY 10018 Disputed
Date(s) debt was incurred __ Basis for the claim: __
Last 4 digits of account number __ Is the claim subject to offset? No Yes

3.45 Nonpriority creditor's name and mailing address **Cyruli Shanks Hart & Zizmor** As of the petition filing date, the claim is: *Check all that apply.* **\$967.86**
420 Lexington Avenue Contingent
Suite 2320 Unliquidated
New York, NY 10170 Disputed
Date(s) debt was incurred __ Basis for the claim: __
Last 4 digits of account number __ Is the claim subject to offset? No Yes

3.46 Nonpriority creditor's name and mailing address **Dealer Solutions One** As of the petition filing date, the claim is: *Check all that apply.* **\$350.00**
PO Box 215 Contingent
Clearwater, FL 33757 Unliquidated
Date(s) debt was incurred __ Disputed
Last 4 digits of account number __ Basis for the claim: __
Is the claim subject to offset? No Yes

3.47 Nonpriority creditor's name and mailing address **Dealer Tire** As of the petition filing date, the claim is: *Check all that apply.* **\$3,787.00**
PO Box 73261 Contingent
Cleveland, OH 44193 Unliquidated
Date(s) debt was incurred __ Disputed
Last 4 digits of account number __ Basis for the claim: __
Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.48 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$2,916.62**
Dealersocket, Inc.
PO Box 845423
Los Angeles, CA 90084-5423
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.49 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$2,125.00**
Delta Auto Transit
60 Old Camplain Road
Hillsborough, NJ 08844
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.50 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$862.70**
Doors Inc.
PO Box 248
Garwood, NJ 07027
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.51 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$13,916.58**
Drop Car Inc.
511 Avenue of the Americas
Suite 113
New York, NY 10011
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.52 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$14,651.26**
Dynamic Moving & Storage
39 Nob Hill Road
Paramus, NJ 07652
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.53 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$75.00**
Dynamix Paint Works
72-73 Calamus Avenue
Woodside, NY 11377
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.54 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$7,245.00**
Edmunds.com, Inc.
PO Box 783531
Philadelphia, PA 19178-3531
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor Name	Case number (if known)
BICOM NY, LLC	
<p>3.55 Nonpriority creditor's name and mailing address Elanders USA 4525 Acworth Industrial Drive Acworth, GA 30101 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$128.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.56 Nonpriority creditor's name and mailing address Ernie's Auto Detailing Inc. 86 Spring Street Passaic, NJ 07055 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$55,484.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.57 Nonpriority creditor's name and mailing address Evergreen Leather & Vinyl Repa 67-43 Loubet Street Forest Hills, NY 11375 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$250.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.58 Nonpriority creditor's name and mailing address EvolveIP PO Box 1023 Southeastern, PA 19398-1023 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$58,038.23</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.59 Nonpriority creditor's name and mailing address FEDEX PO Box 371461 Pittsburgh, PA 15250-7461 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.60 Nonpriority creditor's name and mailing address Fiber Technologies Networks Attn: Accounts Receivable 300 Meridian Centre Rochester, NY 14618 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$800.00</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.61 Nonpriority creditor's name and mailing address Fine Art Imaging 330 West 42nd Street New York, NY 10036 Date(s) debt was incurred __ Last 4 digits of account number __</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$79.87</p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: __</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor **BICOM NY, LLC** Case number (if known) _____
Name _____

3.62 Nonpriority creditor's name and mailing address **Flybiz.com** As of the petition filing date, the claim is: *Check all that apply.* **\$6,403.20**
45 West 34th Street Contingent
New York, NY 10001 Unliquidated
Date(s) debt was incurred _____ Disputed
Last 4 digits of account number _____ Basis for the claim: _____
Is the claim subject to offset? No Yes

3.63 Nonpriority creditor's name and mailing address **Gensler** As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
12478 Collection Center Drive Contingent
Chicago, IL 60693 Unliquidated
Date(s) debt was incurred _____ Disputed
Last 4 digits of account number _____ Basis for the claim: _____
Is the claim subject to offset? No Yes

3.64 Nonpriority creditor's name and mailing address **Georgetown Eleventh Ave Owners** As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
667 Madison Avenue Contingent
23rd Floor Unliquidated
New York, NY 10065 Disputed
Date(s) debt was incurred _____ Basis for the claim: _____
Last 4 digits of account number _____ Is the claim subject to offset? No Yes

3.65 Nonpriority creditor's name and mailing address **Gnyada** As of the petition filing date, the claim is: *Check all that apply.* **\$150.95**
18-10 Whitestone Expressway Contingent
Whitestone, NY 11357 Unliquidated
Date(s) debt was incurred _____ Disputed
Last 4 digits of account number _____ Basis for the claim: _____
Is the claim subject to offset? No Yes

3.66 Nonpriority creditor's name and mailing address **Great America Financial Servic** As of the petition filing date, the claim is: *Check all that apply.* **\$3,514.22**
625 1st Street Contingent
Suite 800 Unliquidated
Cedar Rapids, IA 52401-2031 Disputed
Date(s) debt was incurred _____ Basis for the claim: _____
Last 4 digits of account number _____ Is the claim subject to offset? No Yes

3.67 Nonpriority creditor's name and mailing address **Haynes and Boone LLP** As of the petition filing date, the claim is: *Check all that apply.* **\$1,062.00**
PO Box 841399 Contingent
Dallas, TX 75284-1399 Unliquidated
Date(s) debt was incurred _____ Disputed
Last 4 digits of account number _____ Basis for the claim: _____
Is the claim subject to offset? No Yes

3.68 Nonpriority creditor's name and mailing address **Henricksen** As of the petition filing date, the claim is: *Check all that apply.* **\$15,386.00**
328 South Jefferson Contingent
Suite 950 Unliquidated
Chicago, IL 60661 Disputed
Date(s) debt was incurred _____ Basis for the claim: _____
Last 4 digits of account number _____ Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name _____

3.69 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$71,210.00**
Independent Dealer Group, Inc.
PO Box 852770
Richardson, TX 75085
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.70 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$10,316.14**
Interstate Battery
161 25th Street
Brooklyn, NY 11232
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.71 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$0.00**
Isaac Ashwal
5 First Street
Englewood Cliffs, NJ 07632
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.72 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$46,163.91**
J & B Body Works
38 Beach Street
Mount Vernon, NY 10550-1702
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.73 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$10,000,000.00**
J.T. Magen & Company Inc.
44 West 28th Street, 11th Floo
New York, NY 10001
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.74 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$0.00**
JLRNA LLC Misc
PO Box 674468
Detroit, MI 48267-4468
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.75 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$1,494.48**
KAJ Petroleum Inc.
5701 2nd Avenue
Brooklyn, NY 11220
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
 Name _____

3.76 Nonpriority creditor's name and mailing address **Leslie Waterworks** As of the petition filing date, the claim is: *Check all that apply.* \$670.67
146 Lauman Lane Contingent
Hicksville, NY 11801 Unliquidated
 Date(s) debt was incurred _____ Disputed
 Last 4 digits of account number _____ Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.77 Nonpriority creditor's name and mailing address **Liberty Glass** As of the petition filing date, the claim is: *Check all that apply.* \$6,160.00
6502 Queens Blvd. Contingent
Woodside, NY 11377 Unliquidated
 Date(s) debt was incurred _____ Disputed
 Last 4 digits of account number _____ Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.78 Nonpriority creditor's name and mailing address **Long Island Waste Oil, Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$1,053.37
3 Eagles Landing Contingent
Mount Sinai, NY 11766 Unliquidated
 Date(s) debt was incurred _____ Disputed
 Last 4 digits of account number _____ Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.79 Nonpriority creditor's name and mailing address **Manhattan** As of the petition filing date, the claim is: *Check all that apply.* \$600.00
748 11th Avneue Contingent
New York, NY 10019-5053 Unliquidated
 Date(s) debt was incurred _____ Disputed
 Last 4 digits of account number _____ Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.80 Nonpriority creditor's name and mailing address **Marshall M. Miller Assoc. Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$14,000.00
3000 Marcus Avenue #3WB Contingent
New Hyde Park, NY 11042 Unliquidated
 Date(s) debt was incurred _____ Disputed
 Last 4 digits of account number _____ Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.81 Nonpriority creditor's name and mailing address **McGard LLC** As of the petition filing date, the claim is: *Check all that apply.* \$179.55
3875 Clifornia Road Contingent
Orchard Park, NY 14127 Unliquidated
 Date(s) debt was incurred _____ Disputed
 Last 4 digits of account number _____ Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.82 Nonpriority creditor's name and mailing address **MD Auto** As of the petition filing date, the claim is: *Check all that apply.* \$25,344.10
PO Box 485 Contingent
Merrick, NY 11566 Unliquidated
 Date(s) debt was incurred _____ Disputed
 Last 4 digits of account number _____ Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.83 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$7,055.10**
Metropolitan Paper Recycling
847 Shepherd Avenue
Brooklyn, NY 11208
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.84 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$330.34**
Midtronics
7000 Monroe Street
Willowbrook, IL 60527
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.85 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$0.00**
Mobility Elevator & Lift Co.
4 York Avenue
Caldwell, NJ 07006
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.86 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$814.29**
Monster Worldwide, Inc.
PO Box 416803
Boston, MA 02241-6803
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.87 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$171,914.52**
Motivated Security Services
PO Box 215
Somerville, NJ 08876
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.88 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$1,400.00**
Motorsports Consultants LLC
505 Eder Road
Stormville, NY 12582
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.89 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$3,185.00**
MPP Co., Inc.
PO Box 634
Mission, KS 66201
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.90 Nonpriority creditor's name and mailing address **netEmbark Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$0.00
65 Devon Drive Contingent
Englishtown, NJ 07726 Unliquidated
Date(s) debt was incurred Disputed
Last 4 digits of account number Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.91 Nonpriority creditor's name and mailing address **New York State Auto** As of the petition filing date, the claim is: *Check all that apply.* \$0.00
Dealers Group Insurance Trust Contingent
P.O. Box 7347 Unliquidated
Albany, NY 12224 Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.92 Nonpriority creditor's name and mailing address **New York State Insurance Fund** As of the petition filing date, the claim is: *Check all that apply.* \$0.00
Workers' Compensation Contingent
P.O. Box 5238 Unliquidated
New York, NY 10008-5238 Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.93 Nonpriority creditor's name and mailing address **NY State Thruway Authority** As of the petition filing date, the claim is: *Check all that apply.* \$0.00
RR 5 Contingent
Schenectady, NY 12309 Unliquidated
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.94 Nonpriority creditor's name and mailing address **NYC Automotive** As of the petition filing date, the claim is: *Check all that apply.* \$0.00
607 West 47th Street Contingent
New York, NY 10036-1908 Unliquidated
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.95 Nonpriority creditor's name and mailing address **NYS Dept. of Motor Vehicles** As of the petition filing date, the claim is: *Check all that apply.* \$0.00
6 Empire States Plaza Contingent
Albany, NY 12228 Unliquidated
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.96 Nonpriority creditor's name and mailing address **NYS Dept. of Transportation** As of the petition filing date, the claim is: *Check all that apply.* \$0.00
Main Office Contingent
50 Wolf Road Unliquidated
Albany, NY 12232 Disputed
Date(s) debt was incurred _____
Last 4 digits of account number _____
Basis for the claim: _____
Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.97 Nonpriority creditor's name and mailing address **NYS Deptment of Labor** As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
P.O. Box 15130
Albany, NY 12212-5130
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.98 Nonpriority creditor's name and mailing address **Oeconnection LLC** As of the petition filing date, the claim is: *Check all that apply.* **\$3,801.90**
PO Box 92315
Cleveland, OH 44193
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.99 Nonpriority creditor's name and mailing address **One Service Source Inc.** As of the petition filing date, the claim is: *Check all that apply.* **\$50,081.75**
PO Box 40
Carle Place, NY 11514
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.100 Nonpriority creditor's name and mailing address **One York Property, LLC** As of the petition filing date, the claim is: *Check all that apply.* **Unknown**
40 Worth Street, Suite 814
New York, NY 10013
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.101 Nonpriority creditor's name and mailing address **Onsite Wheel Repair Inc.** As of the petition filing date, the claim is: *Check all that apply.* **\$50,722.00**
271 Riley Road
New Windsor, NY 12553
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.102 Nonpriority creditor's name and mailing address **Pattison Sign Group Inc.** As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
410 N. Cedar Bluff Road
Knoxville, TN 37923
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.103 Nonpriority creditor's name and mailing address **Prestige Car Care of NY** As of the petition filing date, the claim is: *Check all that apply.* **\$35,864.95**
104-55 42nd Avenue
Corona, NY 11368
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.104 Nonpriority creditor's name and mailing address **Prestige Land Rover**
405 S. State Route 17
Paramus, NJ 07652
Date(s) debt was incurred ____
Last 4 digits of account number ____
As of the petition filing date, the claim is: *Check all that apply.* **\$90.00**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: ____
Is the claim subject to offset? No Yes

3.105 Nonpriority creditor's name and mailing address **Queens Plaza Auto**
1306 38th Avenue
Long Island City, NY 11101
Date(s) debt was incurred ____
Last 4 digits of account number ____
As of the petition filing date, the claim is: *Check all that apply.* **\$7,266.74**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: ____
Is the claim subject to offset? No Yes

3.106 Nonpriority creditor's name and mailing address **Quill Corp.**
PO Box 37600
Philadelphia, PA 19101-0600
Date(s) debt was incurred ____
Last 4 digits of account number ____
As of the petition filing date, the claim is: *Check all that apply.* **\$8,293.52**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: ____
Is the claim subject to offset? No Yes

3.107 Nonpriority creditor's name and mailing address **Reynolds & Reynolds**
PO Box 182206
Columbus, OH 43218
Date(s) debt was incurred ____
Last 4 digits of account number ____
As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: ____
Is the claim subject to offset? No Yes

3.108 Nonpriority creditor's name and mailing address **Riverside Machinery Co.**
37-14 29th Street
Long Island City, NY 11101
Date(s) debt was incurred ____
Last 4 digits of account number ____
As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: ____
Is the claim subject to offset? No Yes

3.109 Nonpriority creditor's name and mailing address **Rojo Auto Body Corp.**
8720 Foster Avenue
Brooklyn, NY 11236
Date(s) debt was incurred ____
Last 4 digits of account number ____
As of the petition filing date, the claim is: *Check all that apply.* **\$360.25**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: ____
Is the claim subject to offset? No Yes

3.110 Nonpriority creditor's name and mailing address **RouteOne, LLC**
16902 Collections Center Drive
Chicago, IL 60693
Date(s) debt was incurred ____
Last 4 digits of account number ____
As of the petition filing date, the claim is: *Check all that apply.* **\$312.00**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: ____
Is the claim subject to offset? No Yes

Debtor	Name	Case number (if known)
3.111	Nonpriority creditor's name and mailing address Samruve Operating Corp. c/o Tsyngauz and Associates 894 6th Avenue, 3rd Floor New York, NY 10001 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.112	Nonpriority creditor's name and mailing address SCF Realty II LLC 170 53rd Street Brooklyn, NY 11232 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$75,000.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.113	Nonpriority creditor's name and mailing address SCF Realty II LLC 170 53rd Street Brooklyn, NY 11232 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$0.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.114	Nonpriority creditor's name and mailing address SID Paterson Advertising 650 Fifth Avenue 23rd Floor New York, NY 10019 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$0.00</u> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.115	Nonpriority creditor's name and mailing address Sign Expo 725 11th Avenue New York, NY 10019 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$415.90</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.116	Nonpriority creditor's name and mailing address SNYADS 37 Elk Street PO Box 7347 Albany, NY 12224 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$1,925.85</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.117	Nonpriority creditor's name and mailing address Specialty Accessory Sales 15 Armour Road Mahwah, NJ 07430 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <u>\$8,999.92</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.118 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$1,987.80**
Speedy Oil Recovery Corp.
408 Millbrook Avenue
Randolph, NJ 07869
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.119 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$259.00**
Sports Car Tire
1203 E. 13th Street
Wilmington, DE 19802
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.120 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$1,836.41**
Staples Advantage Dept. NY
PO Box 415256
Boston, MA 02241-5256
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.121 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$6,400.00**
Star Automotive Group, Inc.
PO Box 150
Kings Park, NY 11754
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.122 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$13,607.47**
Star Paper
174 Fifth Avenue, 4th Floor
New York, NY 10010
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.123 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$6,803.35**
Start Elevator LLC
4350 Bullard Avenue
Bronx, NY 10466
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.124 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** **\$3,580.50**
Telx-New York, LLC
PO Box 10157
Uniondale, NY 11555
Date(s) debt was incurred _____
Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
 Name _____

3.125 Nonpriority creditor's name and mailing address **The Art of Tint Corp.** As of the petition filing date, the claim is: *Check all that apply.* \$1,930.00
200 Rector Place, Suite 5M
New York, NY 10280
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.126 Nonpriority creditor's name and mailing address **The Coughlan Group Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$28,500.00
237 West 35th Street, Suite 30
New York, NY 10001
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.127 Nonpriority creditor's name and mailing address **The Dent Specialist** As of the petition filing date, the claim is: *Check all that apply.* \$1,830.00
PO Box 92
Jericho, NY 11753
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.128 Nonpriority creditor's name and mailing address **Thomas Veltre P.E P.C.** As of the petition filing date, the claim is: *Check all that apply.* \$91,983.62
1180 Broadway
New York, NY 10001
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.129 Nonpriority creditor's name and mailing address **Time Warner Cable** As of the petition filing date, the claim is: *Check all that apply.* \$18,414.36
PO Box 11820
Newark, NJ 07101-8120
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.130 Nonpriority creditor's name and mailing address **TMI Products** As of the petition filing date, the claim is: *Check all that apply.* \$7,780.00
1493 E. Bentley Drive
Corona, CA 92879
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.131 Nonpriority creditor's name and mailing address **True Car, Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$6,945.22
Dept. LA 24198
Pasadena, CA 91185-4198
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.132 Nonpriority creditor's name and mailing address **U.S. Dept. of Transportation**
1200 New Jersey Avenue, SE
Washington, DC 20590
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.133 Nonpriority creditor's name and mailing address **VAuto, Inc.**
PO Box 935202
Atlanta, GA 31193-5202
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$1,936.46**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.134 Nonpriority creditor's name and mailing address **Verizon**
PO Box 15124
Albany, NY 12212
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$737.61**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.135 Nonpriority creditor's name and mailing address **Westchester Crankshaft**
3236 110th Street
East Elmhurst, NY 11369
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$240.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.136 Nonpriority creditor's name and mailing address **Who's Calling**
PO Box 4825
Houston, TX 77210-4825
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$31,800.67**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.137 Nonpriority creditor's name and mailing address **Wholesale Auto Supply Co.**
22 Florence Street
South Hackensack, NJ 07606-1591
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$20,194.63**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.138 Nonpriority creditor's name and mailing address **Withum Smith & Brown**
PO Box 5340
Princeton, NJ 08543
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$70,276.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor **BICOM NY, LLC** Case number (if known) _____
Name

3.139 Nonpriority creditor's name and mailing address **Workers' Compensation Board** As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**
328 State Street
Schenectady, NY 12305
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.140 Nonpriority creditor's name and mailing address **YRC Freight** As of the petition filing date, the claim is: *Check all that apply.* **\$3,259.08**
PO Box 7914
Overland Park, KS 66207-0914
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
--------------------------	--	---

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

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

	Total of claim amounts
5a. Total claims from Part 1	\$ <u>246,145.00</u>
5b. Total claims from Part 2	+ \$ <u>11,571,690.82</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	\$ <u>11,817,835.82</u>

Fill in this information to identify the case:

Debtor name BICOM NY, LLC
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
Case number (if known)

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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

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

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B).

2. List all contracts and unexpired leases

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

2.1. State what the contract or lease is for and the nature of the debtor's interest Lease for storage facility

State the term remaining

List the contract number of any government contract

77 Metro Way, LLC
400 Plaza Drive
PO Box 1515
Secaucus, NJ 07094

2.2. State what the contract or lease is for and the nature of the debtor's interest Maintenance Agreement

State the term remaining

List the contract number of any government contract

Canon Solutions America Inc.
One Common Park
Melville, NY 11747

2.3. State what the contract or lease is for and the nature of the debtor's interest Cable/Internet

State the term remaining

List the contract number of any government contract

Charter Communities Operating
120 East 23rd Street
New York, NY 10010

2.4. State what the contract or lease is for and the nature of the debtor's interest Internet and related services

State the term remaining

List the contract number of any government contract

Cogent Communications, Inc.
PO Box 791087
Baltimore, MD 21279-1087

Debtor 1 **BICOM NY, LLC**
First Name Middle Name Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases

2. List all contracts and unexpired leases

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

2.5.	State what the contract or lease is for and the nature of the debtor's interest	Lease for Showroom and service department.	
	State the term remaining	23 years	Georgetown Eleventh Ave Owners c/o The Georgetown Company 667 Madison Avenue New York, NY 10065
	List the contract number of any government contract		

2.6.	State what the contract or lease is for and the nature of the debtor's interest	Construction Agreement	
	State the term remaining	Unknown	J.T. Magen & Company, Inc. Attn: Adam Flatto 44 West 28th Street, 11th FL New York, NY 10001
	List the contract number of any government contract		

2.7.	State what the contract or lease is for and the nature of the debtor's interest	Jaguar Dealer Agreement	
	State the term remaining		Jaguar Land Rover NA 555 MacArthur Boulevard Mahwah, NJ 07430-2326
	List the contract number of any government contract		

2.8.	State what the contract or lease is for and the nature of the debtor's interest	Land Rover Dealer Agreement	
	State the term remaining		Jaguar Land Rover NA 555 MacArthur Boulevard Mahwah, NJ 07430-2326
	List the contract number of any government contract		

Fill in this information to identify the case:

Debtor name BICOM NY, LLC
 United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK
 Case number (if known) _____

Check if this is an amended filing

**Official Form 206H
 Schedule H: Your Codebtors**

12/15

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

1. Do you have any codebtors?

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

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

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 BICOM NY, LLC	787 11th Avenue New York, NY 10019	JP Morgan Chase Bank, NA	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2 ISCOM NY, LLC	1 York Street New York, NY 10013	JP Morgan Chase Bank, NA	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____