

Fill in this information to identify the case:

Debtor name Bay Ridge Automotive Company, 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. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

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

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

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

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

Executed on 7/10/17 X _____
Signature of individual signing on behalf of debtor

Gary B. Flom
Printed name

Manager
Position or relationship to debtor

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United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

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**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>14,851,262.00</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>14,851,262.00</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>7,753,437.00</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>1,003,503.00</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>1,047,674.98</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>9,804,614.98</u>

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United States Bankruptcy Court for the: SOUTHERN DISTRICT OF NEW YORK

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Official Form 206A/B
Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- No. Go to Part 2.
 - Yes Fill in the information below.
- All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- No. Go to Part 3.
- Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**
Description, including name of holder of deposit

7.1. See Attachment No. 1 \$206,265.00

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

9. **Total of Part 2.**
Add lines 7 through 8. Copy the total to line 81.

\$206,265.00

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- No. Go to Part 4.
- Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: 677,560.00 - 0.00 = ... \$677,560.00
face amount doubtful or uncollectible accounts

Debtor Bay Ridge Automotive Company, LLC Case number (if known) _____
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11b. Over 90 days old: 616,801.00 - 0.00 =... \$616,801.00
face amount doubtful or uncollectible accounts

12. Total of Part 3. \$1,294,361.00
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 ?	06/25/2017	\$24,868.00		\$24,868.00
	Parts		\$1,608,550.00		\$1,608,550.00

21. Finished goods, including goods held for resale

22. Other inventory or supplies

23. Total of Part 5. \$1,633,418.00
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 Bay Ridge Automotive Company, 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 Shop equipment	\$1,072,272.00		\$1,072,272.00
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software			
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43. Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$1,072,272.00
44. Is a depreciation schedule available for any of the property listed in Part 7? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
45. Has any of the property listed in Part 7 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> 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 Cars	\$2,215,506.00		\$2,215,506.00
47.2. New Trucks	\$5,573,566.00		\$5,573,566.00
47.3. Demo	\$965,915.00		\$965,915.00
47.4. Other	\$1,264,020.00		\$1,264,020.00
48. Watercraft, trailers, motors, and related accessories <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49. Aircraft and accessories			

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Name

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)
? \$625,939.00 \$625,939.00

51. Total of Part 8.
Add lines 47 through 50. Copy the total to line 87. \$10,644,946.00

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. 182 58th Street, Brooklyn, NY	Tenant/Improvements	\$4,275,484.00		Unknown
55.2. 612 86th Street, Brooklyn, NY	Tenant	\$0.00		Unknown
55.3. 636-640 86th Street, Brooklyn, NY	Tenant	\$0.00		Unknown

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

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

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

Part 10: Intangibles and intellectual property

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

Debtor Bay Ridge Automotive Company, LLC Case number (if known) _____
Name

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

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites ?	\$0.00		Unknown
62. Licenses, franchises, and royalties ?	\$0.00		Unknown
63. Customer lists, mailing lists, or other compilations ?	\$0.00		Unknown
64. Other intangibles, or intellectual property			
65. Goodwill			
66. Total of Part 10. Add lines 60 through 65. Copy the total to line 89.			\$0.00
67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
68. Is there an amortization or other similar schedule available for any of the property listed in Part 10? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
69. Has any of the property listed in Part 10 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?
Include all interests in executory contracts and unexpired leases not previously reported on this form.

- No. Go to Part 12.
 Yes Fill in the information below.

Debtor Bay Ridge Automotive Company, 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>	\$206,265.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$1,294,361.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$1,633,418.00	
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>	\$1,072,272.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$10,644,946.00	
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	\$14,851,262.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$14,851,262.00

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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	Column B
		Amount of claim	Value of collateral that supports this claim
		Do not deduct the value of collateral.	
<p>2.1 JP Morgan Chase Bank, NA Creditor's Name</p> <p>10 South Dearborn St. Chicago, IL 60603 Creditor's mailing address</p> <p>Creditor's email address, if known _____</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 Blanket lien</p> <hr/> <p>Describe the lien</p> <hr/> <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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <hr/> <p>As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p>	<p>\$5,293,651.00</p>	<p>\$0.00</p>
<p>2.2 TD Bank Creditor's Name</p> <p>1100 Lake Street Ramsey, NJ 07446 Creditor's mailing address</p> <p>Creditor's email address, if known _____</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 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 Improvements to 152 58th Street, Brooklyn, NY</p> <hr/> <p>Describe the lien</p> <hr/> <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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <hr/> <p>As of the petition filing date, the claim is: Check all that apply</p>	<p>\$2,459,786.00</p>	<p>\$0.00</p>

Debtor Bay Ridge Automotive Company, LLC Case number (if know) _____
Name

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

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

\$7,753,437.0
0

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

Fill in this information to identify the case:

Debtor name Bay Ridge Automotive Company, 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 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

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

Part 1: List All Creditors with PRIORITY Unsecured Claims

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

No. Go to Part 2.

Yes. Go to line 2.

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

		Total claim	Priority amount	
2.1	Priority creditor's name and mailing address Adele Mineo 2036 80th Street Apt. 2R Brooklyn, NY 11214 Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input 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	<u>\$1,800.00</u>	<u>\$1,800.00</u>
2.2	Priority creditor's name and mailing address Aleksander Malakhov 2911 86th Street Apt. 7D Brooklyn, NY 11223 Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input 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	<u>\$3,628.00</u>	<u>\$3,628.00</u>

Debtor	Bay Ridge Automotive Company, LLC <small>Name</small>	Case number (if known)	
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2.3	Priority creditor's name and mailing address Alex Avrutsky 1378 Holiday Park Drive Wantagh, NY 11793	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	\$7,500.00	\$7,500.00
	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		

2.4	Priority creditor's name and mailing address Amanda Ryan 614 Mayfair Dr. S Brooklyn, NY 11234	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	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 Angelo Castelli 120 E. 34th Street 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 checked="" type="checkbox"/> Disputed	\$1,991.00	\$1,991.00
	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 Ann Monahan 152 Merrill Avenue Staten Island, NY 10314	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	\$2,303.00	\$2,303.00
	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		

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2.7	Priority creditor's name and mailing address Anna Schneider Alvarez 7406 17th Avenue Apt. D1 Brooklyn, NY 11204	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	\$197.00	\$197.00
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		

2.8	Priority creditor's name and mailing address Anthony Chuisano 41 Richard Lane Staten Island, NY 10314	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	\$5,356.00	\$5,356.00
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		

2.9	Priority creditor's name and mailing address Anthony Feline 426 Naughton Avenue Staten Island, NY 10305	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	\$940.00	\$940.00
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		

2.10	Priority creditor's name and mailing address Anthony Icorvaia	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	\$2,100.00	\$2,100.00
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		

Debtor **Bay Ridge Automotive Company, LLC** Case number (if known)

Name

2.11 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$1,858.00 \$1,858.00
Anthony J. Chuisano
41 Richard Lane
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

2.12 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$4,376.00 \$4,376.00
Brian Bischoff
2353 Morse Avenue
Scotch Plains, NJ 07076
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

2.13 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$2,469.00 \$2,469.00
Carla Martinez
467 40th Street
Apt. 3R
Brooklyn, NY 11232
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

2.14 Priority creditor's name and mailing address As of the petition filing date, the claim is: \$4,055.00 \$4,055.00
Chi Wah Chan
2021 E. 23rd Street
Brooklyn, NY 11229
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	Bay Ridge Automotive Company, LLC Name	Case number (if known)	
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2.15	Priority creditor's name and mailing address Christian Rodriguez 3162 Bayview Avenue Apt. 7B Brooklyn, NY 11224	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	\$2,004.00	\$2,004.00
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		

2.16	Priority creditor's name and mailing address Crawford Bazil 151 W. 228th Street Apt. #16 Bronx, NY 10463	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	\$3,355.00	\$3,355.00
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		

2.17	Priority creditor's name and mailing address Danira Cerio 2049 West 7th Street Brooklyn, NY 11223	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	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		

2.18	Priority creditor's name and mailing address David Todd 550 Bayridge Parkway 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 checked="" type="checkbox"/> Disputed	\$3,700.00	\$3,700.00
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		

Debtor	Bay Ridge Automotive Company, LLC <small>Name</small>	Case number (if known)
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2.19	Priority creditor's name and mailing address Dennis Cort 2237 Schenectady Avenue Brooklyn, NY 11234	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	\$6,117.00	\$6,117.00
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		

2.20	Priority creditor's name and mailing address Domingo Rodriguez	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	\$1,522.00	\$1,522.00
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		

2.21	Priority creditor's name and mailing address Dwayne Bagot 166 East 32nd Street 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 checked="" type="checkbox"/> Disputed	\$4,726.00	\$4,726.00
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		

2.22	Priority creditor's name and mailing address Edgar Fajardo 119 West 28th Street Bayonne, NJ 07002	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	\$5,804.00	\$5,804.00
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		

Debtor **Bay Ridge Automotive Company, LLC** Case number (if known)

2.23	Priority creditor's name and mailing address Edward Ramdour 117-32 124th Street South Ozone Park, NY 11420	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	\$2,013.00	\$2,013.00
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		
2.24	Priority creditor's name and mailing address Elaine Luskin 2057 Bay Ridge Parkway Brooklyn, NY 11204	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	\$1,821.00	\$1,821.00
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		
2.25	Priority creditor's name and mailing address Everton McLeod 3990 Bronx Blvd. Bronx, NY 10466	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	\$2,400.00	\$2,400.00
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		
2.26	Priority creditor's name and mailing address Fabrizzo Jaramillo 14 1st Avenue East Rockaway, NY 11518	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	\$4,159.00	\$4,159.00
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		

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2.27	Priority creditor's name and mailing address Francillia Valentine 1 St. Paul Court Apt. 3B 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 checked="" type="checkbox"/> Disputed	\$837.00	\$837.00
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		

2.28	Priority creditor's name and mailing address George Petrossian	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	\$1,414.00	\$1,414.00
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		

2.29	Priority creditor's name and mailing address Giovanni Sanchez 358 53rd Street Brooklyn, NY 11220	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	\$5,202.00	\$5,202.00
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		

2.30	Priority creditor's name and mailing address Gregory Davey 1637 E. 91st Street Brooklyn, NY 11236	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	\$5,141.00	\$5,141.00
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		

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2.31	Priority creditor's name and mailing address Gzim Krasniqi 90 New Hempstead Road New City, NY 10956	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	<u>\$3,945.00</u> <u>\$3,945.00</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	
2.32	Priority creditor's name and mailing address Harry Pereira 261 56th Street Brooklyn, NY 11220	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	<u>\$2,651.00</u> <u>\$2,651.00</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	
2.33	Priority creditor's name and mailing address Henry Rodriguez 34-34 100th 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 checked="" type="checkbox"/> Disputed	<u>\$2,662.00</u> <u>\$2,662.00</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	
2.34	Priority creditor's name and mailing address Jacob Charest 1 Merritt Avenue South Amboy, NJ 08879	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	<u>\$2,517.00</u> <u>\$2,517.00</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 Bay Ridge Automotive Company, LLC Case number (if known) _____
Name

2.35	Priority creditor's name and mailing address Janet Soto 20 Westminster Road 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 checked="" type="checkbox"/> Disputed	\$1,964.00	\$1,964.00
	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		

2.36	Priority creditor's name and mailing address Jason Wade 625 Ocean Avenue Apt. 5H 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 checked="" type="checkbox"/> Disputed	\$6,280.00	\$6,280.00
	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		

2.37	Priority creditor's name and mailing address John Aquila 5665 Amboy Road Staten Island, NY 10309	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	\$5,630.00	\$5,630.00
	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		

2.38	Priority creditor's name and mailing address John Glynn III 1138 Willoughby Avenue Apt. 2R Brooklyn, NY 11221	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	\$5,378.00	\$5,378.00
	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 **Bay Ridge Automotive Company, LLC** Case number (if known)

Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
2.39 John Mason 89 Driggs Street Staten Island, NY 10308	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$2,429.00	\$2,429.00
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		
2.40 Jose Amaya 29-44 Beach Channel Drive Far Rockaway, NY 11691	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$3,743.00	\$3,743.00
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		
2.41 Joseph Pulido	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$1,522.00	\$1,522.00
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		
2.42 Kahan Mohamed 3000 Ocean Parkway Apt. 7U Brooklyn, NY 11235	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$4,197.00	\$4,197.00
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		

Debtor Bay Ridge Automotive Company, LLC Case number (if known) _____
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2.43	Priority creditor's name and mailing address Kevin Sheehan 24 Albert Drive Old Bridge, NJ 08857	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	\$6,682.00	\$6,682.00
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 Khalid Yosef 46 Paerdegat 15th Street Brooklyn, NY 11236	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	\$1,789.00	\$1,789.00
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 Kristine Hoff 162 Avenue S Apt. 3F Brooklyn, NY 11223	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	\$1,314.00	\$1,314.00
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 Leodan Melendez 2432 Ocean Avenue 2nd Floor Brooklyn, NY 11229	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	\$1,560.00	\$1,560.00
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 Name	Case number (if known)		
Bay Ridge Automotive Company, LLC			
2.47 Priority creditor's name and mailing address Levi Toledo 217 Thompson Street Apt. #1 New York, NY 10012	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	\$5,126.00	\$5,126.00
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		
2.48 Priority creditor's name and mailing address Luis Santiago 336 42nd Street Apt. #1 Brooklyn, NY 11232	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	\$5,955.00	\$5,955.00
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		
2.49 Priority creditor's name and mailing address Maged Misak 44 Poets Circle Staten Island, NY 10312	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	\$2,149.00	\$2,149.00
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		
2.50 Priority creditor's name and mailing address Marc Miranda 214 St. John Avenue Staten Island, NY 10314	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	\$3,082.00	\$3,082.00
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 **Bay Ridge Automotive Company, LLC** Case number (if known)

2.51 Priority creditor's name and mailing address **Martin Mooney**
92 Van Pelt Avenue
Staten Island, NY 10303 As of the petition filing date, the claim is: **\$1,789.00** **\$1,789.00**
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

2.52 Priority creditor's name and mailing address **Mary Guinto**
311 82nd Street
Brooklyn, NY 11209 As of the petition filing date, the claim is: **\$2,660.00** **\$2,660.00**
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

2.53 Priority creditor's name and mailing address **Matthew Cocheo**
35 Long Meadow Drive
Staatsburg, NY 12580 As of the petition filing date, the claim is: **\$3,634.00** **\$3,634.00**
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

2.54 Priority creditor's name and mailing address **Melanie Madeo**
24 Fairlawn Loop
Staten Island, NY 10308 As of the petition filing date, the claim is: **\$1,872.00** **\$1,872.00**
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 **Bay Ridge Automotive Company, LLC** Case number (if known)

2.55 Priority creditor's name and mailing address **Michael Pulido**
86-30 139th Street
Jamaica, NY 11435 As of the petition filing date, the claim is: \$5,881.00 \$5,881.00
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

2.56 Priority creditor's name and mailing address **Moustafa Moussa**
19 Amador Street
Staten Island, NY 10303 As of the petition filing date, the claim is: \$5,419.00 \$5,419.00
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

2.57 Priority creditor's name and mailing address **Nigel Leandro**
2014 Blackrock Avenue
Bronx, NY 10472 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

2.58 Priority creditor's name and mailing address **NYS Dept. of Taxation**
Bankruptcy Division
PO Box 5300
Albany, NY 12205-0300 As of the petition filing date, the claim is: \$760,904.00 \$760,904.00
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) (8) Yes

Debtor Bay Ridge Automotive Company, LLC Case number (if known) _____
Name

2.59	Priority creditor's name and mailing address Omar Henry 3410 Glenwood Avenue Brooklyn, NY 11210	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	\$3,200.00	\$3,200.00
	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		

2.60	Priority creditor's name and mailing address Pamela Morgan 336 93rd Street Apt. C6 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 checked="" type="checkbox"/> Disputed	\$700.00	\$700.00
	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		

2.61	Priority creditor's name and mailing address Peter Rossi 133 Adams Street 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 checked="" type="checkbox"/> Disputed	\$2,448.00	\$2,448.00
	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		

2.62	Priority creditor's name and mailing address Raymond Torres	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	\$1,997.00	\$1,997.00
	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 Name	Case number (if known)		
Bay Ridge Automotive Company, LLC			
2.63 Priority creditor's name and mailing address Richard Cappetta Jr. 14 True Harbor Way West Islip, NY 11795	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	<u>\$2,500.00</u>	<u>\$2,500.00</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		
2.64 Priority creditor's name and mailing address Robert Mooney 92 Van Pelt Avenue Staten Island, NY 10303	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	<u>\$5,888.00</u>	<u>\$5,888.00</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		
2.65 Priority creditor's name and mailing address Roger Cockerham 245 31B 77th Crescent 2nd Floor Bellerose, NY 11426	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	<u>\$4,114.00</u>	<u>\$4,114.00</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		
2.66 Priority creditor's name and mailing address Roger S. Beepath 41 Richard Lane Staten Island, NY 10314	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	<u>\$2,118.00</u>	<u>\$2,118.00</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 Bay Ridge Automotive Company, LLC Case number (if known) _____
Name

2.67	Priority creditor's name and mailing address Rosalie Nunez 91 Ann Street 1st Floor Staten Island, NY 10302	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	\$1,353.00	\$1,353.00
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 Russell Moore 1006 Halsey Street 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 checked="" type="checkbox"/> Disputed	\$1,708.00	\$1,708.00
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 Saif Ahmed 139-54 87th Road Jamaica, NY 11435	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	\$5,311.00	\$5,311.00
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 Shawn Jaipaul 117-21 124th Street South Ozone Park, NY 11420	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	\$1,726.00	\$1,726.00
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 **Bay Ridge Automotive Company, LLC** Case number (if known)

2.71 Priority creditor's name and mailing address **Siarhei Samsonau**
1311 Brightwater Avenue
Brooklyn, NY 11235 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

2.72 Priority creditor's name and mailing address **Steven Kupseta**
230 Timber Ridge Drive
Staten Island, NY 10306 As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed **\$3,428.00 \$3,428.00**

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

2.73 Priority creditor's name and mailing address **Theresa Moseder**
1458 72nd Street
Brooklyn, NY 11228 As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed **\$714.00 \$714.00**

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

2.74 Priority creditor's name and mailing address **Thomas Desola**
1239 76th Street
Brooklyn, NY 11228 As of the petition filing date, the claim is:
Check all that apply.
 Contingent
 Unliquidated
 Disputed **\$5,914.00 \$5,914.00**

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 **Bay Ridge Automotive Company, LLC** Case number (if known)

Priority creditor's name and mailing address	As of the petition filing date, the claim is:		
2.75 Timothy Orland 3687 Hylan Blvd. Staten Island, NY 10308	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" 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		
2.76 Vlad Nevryanskiy 2705 Kings Highway Apt. 5D Brooklyn, NY 11229	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" 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		
2.77 Willy Sanchez 1078 Belmont Avenue Brooklyn, NY 11208	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$1,986.00	\$1,986.00
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		
2.78 Yuri Frid 6 Skyview Drive Rockaway, NJ 07866	Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$12,850.00	\$768.00
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		

Debtor **Bay Ridge Automotive Company, LLC** Case number (if known) _____
Name _____

2.79	Priority creditor's name and mailing address Zaur Rakhmilov 39 Keating Street Staten Island, NY 10309	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	<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	

2.80	Priority creditor's name and mailing address Zhijian Huang 1653 74th Street Brooklyn, NY 11204	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	<u>\$4,026.00</u> <u>\$4,026.00</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	

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.

3.1	Nonpriority creditor's name and mailing address ACE Auto Storage 95 Rector Street Staten Island, NY 10310	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	<u>Amount of claim</u> <u>\$100.00</u>
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.2	Nonpriority creditor's name and mailing address AER Sales LP 1605 Surveyor Blvd. Carrollton, TX 75006	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	<u>\$75,950.88</u>
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.3	Nonpriority creditor's name and mailing address Aircore Distributions 100 Rose Avenue Hempstead, NY 11550-6645	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	<u>\$239.43</u>
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Bay Ridge Automotive Company, LLC** Case number (if known) _____
Name

3.4	Nonpriority creditor's name and mailing address Alpha Fire and Security 90 Quentin Road Brooklyn, NY 11223 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	\$277.63
3.5	Nonpriority creditor's name and mailing address Aramark Refreshment Services 6800 Jericho Turnpike Suite 120W Syosset, NY 11791 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	\$70.76
3.6	Nonpriority creditor's name and mailing address Aramark Uniform Group Inc. PO Box 28050 New York, NY 10087-8050 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	\$9,444.18
3.7	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: <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	\$2,334.60
3.8	Nonpriority creditor's name and mailing address Auto Alert 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: <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	\$21,387.45
3.9	Nonpriority creditor's name and mailing address Autocare Network LLC 1735 N. Ocean Road Suite D Medford, NY 11763 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	\$4,715.00
3.10	Nonpriority creditor's name and mailing address Autoloop PO Box 1266 Clearwater, FL 33757-1266 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	\$35,500.19

Debtor Bay Ridge Automotive Company, LLC		Case number (if known) _____	
Name			
3.11	Nonpriority creditor's name and mailing address B & I Auto Supply PO Box 128 135 Commerce Drive Fort Washington, PA 19034 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <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	\$0.00
3.12	Nonpriority creditor's name and mailing address Benmatt Industries Inc. PO Box 820959 Philadelphia, PA 19182 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <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	\$1,448.09
3.13	Nonpriority creditor's name and mailing address Bernie's 147 Linden Avenue Westbury, NY 11590 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <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	\$275.00
3.14	Nonpriority creditor's name and mailing address Best Car Wash & Detail Inc. 902 65th Street Brooklyn, NY 11219 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <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	\$400.00
3.15	Nonpriority creditor's name and mailing address Beveridge & Diamond, P.C. 1350 I Street N.W. Suite 700 Washington, DC 20005-3311 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <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	\$12,238.47
3.16	Nonpriority creditor's name and mailing address Brandon Ford 9090 E. Adamo Dr. Tampa, FL 33619 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <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	\$152.63
3.17	Nonpriority creditor's name and mailing address Brooklyn Auto Group 2286 Flatbush Avenue Brooklyn, NY 11234 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <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	\$48.61

Debtor Name	Case number (if known)
Bay Ridge Automotive Company, LLC	
3.18 Nonpriority creditor's name and mailing address Canon Solutions America Inc. 15004 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: <i>Check all that apply.</i> \$11,248.57 <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
3.19 Nonpriority creditor's name and mailing address Car Tone Collision 815 39th Street Brooklyn, NY 11232-1446 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> \$9,652.99 <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
3.20 Nonpriority creditor's name and mailing address Car-Tone Collision 815-817 39th Street Brooklyn, NY 11232 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> \$1,275.00 <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
3.21 Nonpriority creditor's name and mailing address Carfax, Inc. 16630 Collection 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: <i>Check all that apply.</i> \$2,640.60 <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
3.22 Nonpriority creditor's name and mailing address Carlos Service Lift Inc. 45 Jackson Street Apt. B20 Hempstead, NY 11550 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> \$2,225.00 <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
3.23 Nonpriority creditor's name and mailing address Carnow Inc. 25 South Park Street Hanover, NH 03755 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> \$5,180.00 <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
3.24 Nonpriority creditor's name and mailing address Cars.com, LLC 2631 Solution Center Chicago, IL 60677-0001 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> \$17,470.19 <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

Debtor **Bay Ridge Automotive Company, LLC** Case number (if known) _____
Name _____

3.25 Nonpriority creditor's name and mailing address **Carsforsale.com Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$198.00
PO Box 91537
Sioux Falls, SD 57109
 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 **Chase Vehicle Exchange, Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$660.00
14800 Frye Road
1st Floor
Fort Worth, TX 76155
 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

3.27 Nonpriority creditor's name and mailing address **Chelsea Auto Diagnostic** As of the petition filing date, the claim is: *Check all that apply.* \$1,350.00
204 Hamilton Avenue
Brooklyn, NY 11231-1831
 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 **Con Edison** As of the petition filing date, the claim is: *Check all that apply.* \$2,511.61
JAF Station
PO Box 1702
New York, NY 10116
 Date(s) debt was incurred _____
 Last 4 digits of account number 0032
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.29 Nonpriority creditor's name and mailing address **Con Edison** As of the petition filing date, the claim is: *Check all that apply.* \$0.00
JAF Station
PO Box 1702
New York, NY 10116
 Date(s) debt was incurred _____
 Last 4 digits of account number 0022
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.30 Nonpriority creditor's name and mailing address **Con Edison** As of the petition filing date, the claim is: *Check all that apply.* \$0.00
JAF Station
PO Box 1702
New York, NY 10116-1702
 Date(s) debt was incurred _____
 Last 4 digits of account number 0001
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.31 Nonpriority creditor's name and mailing address **Con Edison** As of the petition filing date, the claim is: *Check all that apply.* \$2,768.96
JAF Station
PO Box 1702
New York, NY 10003
 Date(s) debt was incurred _____
 Last 4 digits of account number 4051
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor Bay Ridge Automotive Company, LLC Case number (if known) _____
Name

3.32 Nonpriority creditor's name and mailing address **Coney Island Auto Parts**
2317 McDonald Avenue
Brooklyn, NY 11223-4737
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

3.33 Nonpriority creditor's name and mailing address **Corelogic Credco LLC**
PO Box 847070
Dallas, TX 75284-7070
Date(s) debt was incurred _____
Last 4 digits of account number 0839

As of the petition filing date, the claim is: *Check all that apply.* \$643.22
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.34 Nonpriority creditor's name and mailing address **Crystal Fusion Technologies**
PO Box 1298
West Babylon, NY 11704
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

3.35 Nonpriority creditor's name and mailing address **Dana Motors**
266 W. Service Road
Staten Island, NY 10314-4753
Date(s) debt was incurred _____
Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* \$232.05
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.36 Nonpriority creditor's name and mailing address **Danken Auto Parts**
84 18th 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.* \$15,785.60
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.37 Nonpriority creditor's name and mailing address **Dealer Focus LLC**
1600 Osgood Street
Suite 3068
North Andover, MA 01845
Date(s) debt was incurred _____
Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* \$9,427.00
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.38 Nonpriority creditor's name and mailing address **Dealer Storage Corp.**
PO Box 320212
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.* \$74.25
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor Name	Case number (if known)
Bay Ridge Automotive Company, LLC Name	
3.39 Nonpriority creditor's name and mailing address Dealerrater.com, LLC 75 Remittance Dr. Dept. 6767 Chicago, IL 60675-6767 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> \$2,088.36 <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
3.40 Nonpriority creditor's name and mailing address Dealersocket, Inc. PO Box 843876 Los Angeles, CA 90084-5423 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> \$8,749.86 <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
3.41 Nonpriority creditor's name and mailing address Dige Associates LLC 2707 Landing Avenue Bellmore, NY 11710 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> \$125,156.40 <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
3.42 Nonpriority creditor's name and mailing address Dish Dept. 0063 Palatine, IL 60055-0063 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> \$71.42 <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
3.43 Nonpriority creditor's name and mailing address Drive Digital Group 357 Interstate Blvd. Sarasota, FL 34240 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> \$4,002.00 <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
3.44 Nonpriority creditor's name and mailing address Drivematic 349 Interstate Blvd. Sarasota, FL 34240 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> \$1,000.00 <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
3.45 Nonpriority creditor's name and mailing address Edmunds.com, Inc. PO Box 783531 Philadelphia, PA 19178-3531 Date(s) debt was incurred __ Last 4 digits of account number <u>2442</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$23,787.34 <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

Debtor Name	Case number (if known)
Bay Ridge Automotive Company, LLC	
3.46 Nonpriority creditor's name and mailing address Federal Safety Compliance Inc. 2900 Delk Road Suite 700 Marietta, GA 30067 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> \$298.50 <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
3.47 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 __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$761.90 <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
3.48 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 <u>8650</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,254.97 <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
3.49 Nonpriority creditor's name and mailing address First Unum Life Insurance Co. PO Box 406927 Atlanta, GA 30384-6927 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> \$2,817.30 <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
3.50 Nonpriority creditor's name and mailing address Ford Motor Company 16800 Executive Plaza Dearborn, MI 48126 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> \$42,708.30 <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
3.51 Nonpriority creditor's name and mailing address High Touch, LLC PO Box 410 Yonkers, NY 10710 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> \$5,630.28 <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
3.52 Nonpriority creditor's name and mailing address Hilna Motor Service 2050 Stillwell Avenue Brooklyn, NY 11223-3424 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> \$85.00 <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

Debtor Bay Ridge Automotive Company, LLC Case number (if known) _____
Name

3.53 Nonpriority creditor's name and mailing address **Ideal Vending & Coffee Service**
219 9th Street
Brooklyn, NY 11215
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$725.98**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.54 Nonpriority creditor's name and mailing address **IFM North America**
PO Box 77000
Dept. #77770
Detroit, MI 48277-0770
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$4,450.80**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.55 Nonpriority creditor's name and mailing address **Independent Dealer Group, Inc.**
851 International Pkwy
Suite 100
Richardson, TX 75085
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$19,385.00**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.56 Nonpriority creditor's name and mailing address **International Truck & Repair**
111 58th Street
Brooklyn, NY 11220-2515
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$1,007.28**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.57 Nonpriority creditor's name and mailing address **J & V Auto Parts**
519 E. 83rd Street
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.* **\$150.00**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

3.58 Nonpriority creditor's name and mailing address **Jacmar Enterprises Inc.**
PO Box 600
East Northport, NY 11731
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

3.59 Nonpriority creditor's name and mailing address **Jets Towing and Auto**
1391 Utica Avenue
Brooklyn, NY 11203
Date(s) debt was incurred _____
Last 4 digits of account number _____
As of the petition filing date, the claim is: *Check all that apply.* **\$8,041.00**
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
Is the claim subject to offset? No Yes

Debtor Bay Ridge Automotive Company, LLC Case number (if known) _____
Name

3.60 Nonpriority creditor's name and mailing address **Joe Sons Auto Parts** As of the petition filing date, the claim is: *Check all that apply.* \$6,783.99
797 4th Avenue
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

3.61 Nonpriority creditor's name and mailing address **Joseph S. Aboyoun, Esq.** As of the petition filing date, the claim is: *Check all that apply.* \$29,331.13
77 Bloomfield Avenue
Route 46
Pine Brook, NJ 07058
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

3.62 Nonpriority creditor's name and mailing address **KAJ Petroleum Inc.** As of the petition filing date, the claim is: *Check all that apply.* \$6,159.00
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

3.63 Nonpriority creditor's name and mailing address **Kings Chrysler** As of the petition filing date, the claim is: *Check all that apply.* \$13.24
2286 Flatbush Avenue
Brooklyn, NY 11234-4518
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

3.64 Nonpriority creditor's name and mailing address **Kwicksilver** As of the petition filing date, the claim is: *Check all that apply.* \$740.00
703 3rd Avenue
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

3.65 Nonpriority creditor's name and mailing address **L & S Collision** As of the petition filing date, the claim is: *Check all that apply.* \$42,167.00
41 Rector Street
Staten Island, NY 10310-1223
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

3.66 Nonpriority creditor's name and mailing address **Liberty Glass** As of the petition filing date, the claim is: *Check all that apply.* \$1,625.00
65-02 Queens Blvd.
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

Debtor **Bay Ridge Automotive Company, LLC** Case number (if known) _____
Name

3.67 Nonpriority creditor's name and mailing address **Lojack** As of the petition filing date, the claim is: *Check all that apply.* **\$1,001.50**
PO Box 846111
Boston, MA 02284
 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

3.68 Nonpriority creditor's name and mailing address **Long Life Truck and Auto** As of the petition filing date, the claim is: *Check all that apply.* **\$580.00**
3904 Fort Hamilton Pkwy
Brooklyn, NY 11218-1917
 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

3.69 Nonpriority creditor's name and mailing address **Lot Capture, LLC** As of the petition filing date, the claim is: *Check all that apply.* **\$200.00**
349 Interstate Blvd.
Sarasota, FL 34240
 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 **MD Auto** As of the petition filing date, the claim is: *Check all that apply.* **\$5,913.20**
PO Box 485
Merrick, NY 11566
 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 **Member Services, Inc.** As of the petition filing date, the claim is: *Check all that apply.* **\$750.00**
3604 NW Frontage Road
PO Box 1760
Bentonville, AR 72712
 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 **Michael Liliakakis** As of the petition filing date, the claim is: *Check all that apply.* **\$17,800.00**
235 89th Street
Brooklyn, NY 11209
 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 **Mobility Works Commercial** As of the petition filing date, the claim is: *Check all that apply.* **\$1,800.00**
1090 West Wilbeth
Akron, OH 44314
 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 Bay Ridge Automotive Company, LLC Case number (if known) _____
Name

3.74 Nonpriority creditor's name and mailing address **Motivated Security Services**
PO Box 215
Somerville, NJ 08876
Date(s) debt was incurred _____
Last 4 digits of account number D222

As of the petition filing date, the claim is: *Check all that apply.* **\$39,566.56**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.75 Nonpriority creditor's name and mailing address **My Way Auto Repair & Glass**
6202 3rd Avenue
Brooklyn, NY 11220-4408
Date(s) debt was incurred _____
Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$3,325.00**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.76 Nonpriority creditor's name and mailing address **Nac Van and Truck**
590 West Merrick Road
Valley Stream, NY 11580
Date(s) debt was incurred _____
Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$1,508.01**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.77 Nonpriority creditor's name and mailing address **National Credit Center**
PO Box 40285
Los Angeles, CA 90074-0285
Date(s) debt was incurred _____
Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$95.83**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.78 Nonpriority creditor's name and mailing address **National Grid**
PO Box 11741
Newark, NJ 07101-9839
Date(s) debt was incurred _____
Last 4 digits of account number 8253

As of the petition filing date, the claim is: *Check all that apply.* **\$9,280.20**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.79 Nonpriority creditor's name and mailing address **National Grid**
PO Box 11741
Newark, NJ 07101-9839
Date(s) debt was incurred _____
Last 4 digits of account number 7620

As of the petition filing date, the claim is: *Check all that apply.* **\$1,564.73**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.80 Nonpriority creditor's name and mailing address **National Grid**
PO Box 11741
Newark, NJ 07101-4741
Date(s) debt was incurred _____
Last 4 digits of account number 5803

As of the petition filing date, the claim is: *Check all that apply.* **\$142.43**
 Contingent
 Unliquidated
 Disputed

Basis for the claim: _____
 Is the claim subject to offset? No Yes

Debtor Name	Case number (if known)
Bay Ridge Automotive Company, LLC <small>Name</small>	
3.81 Nonpriority creditor's name and mailing address National Grid PO Box 11741 Newark, NJ 07101-9839 Date(s) debt was incurred __ Last 4 digits of account number <u>5793</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$840.53 <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
3.82 Nonpriority creditor's name and mailing address New Generation Auto Parts 529 63rd Street Brooklyn, NY 11220 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> \$2.50 <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
3.83 Nonpriority creditor's name and mailing address New GH Berlin Oil Company 42 Rumsey Raod East Hartford, CT 06108 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> \$6,570.85 <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
3.84 Nonpriority creditor's name and mailing address New York State Auto Dealers Group Insurance Trust P.O. 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: <i>Check all that apply.</i> \$0.00 <input checked="" 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
3.85 Nonpriority creditor's name and mailing address New York State Insurance Fund Workers' Compensation P.O. Box 5238 New York, NY 10008-5238 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 checked="" 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
3.86 Nonpriority creditor's name and mailing address New York Tire Factory 25A Dubon CT. Farmingdale, NY 11735 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> \$265.00 <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
3.87 Nonpriority creditor's name and mailing address NY State Thruway Authority RR 5 Schenectady, NY 12309 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 checked="" 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

Debtor Name	Case number (if known)
Bay Ridge Automotive Company, LLC Name 3.88 Nonpriority creditor's name and mailing address NYC Economic Development Corp. PO Box 5264 New York, NY 10008-5264 Date(s) debt was incurred __ Last 4 digits of account number <u>9051</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$13,545.60 <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
3.89 Nonpriority creditor's name and mailing address NYC Water Board PO Box 11863 Newark, NJ 07101-8163 Date(s) debt was incurred __ Last 4 digits of account number <u>5001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$500.00 <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
3.90 Nonpriority creditor's name and mailing address NYC Water Board PO Box 11863 Newark, NJ 07101-8163 Date(s) debt was incurred __ Last 4 digits of account number <u>9001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$116.76 <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
3.91 Nonpriority creditor's name and mailing address NYCEDC PO Box 5264 New York, NY 10008-5264 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> \$57,905.48 <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
3.92 Nonpriority creditor's name and mailing address NYS Dept. of Motor Vehicles 6 Empire States Plaza Albany, NY 12228 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 checked="" 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
3.93 Nonpriority creditor's name and mailing address NYS Dept. of Transportation Main Office 50 Wolf Road Albany, NY 12232 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 checked="" 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
3.94 Nonpriority creditor's name and mailing address NYS Department of Labor P.O. Box 15130 Albany, NY 12212-5130 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 checked="" 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

Debtor Name	Case number (if known)
Bay Ridge Automotive Company, LLC	
3.95 Nonpriority creditor's name and mailing address NYS Insurance Fund Workers' Compensation PO Box 5238 New York, NY 10008-5238 Date(s) debt was incurred __ Last 4 digits of account number <u>2633</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <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
3.96 Nonpriority creditor's name and mailing address One Service Source Inc. PO Box 40 Carle Place, NY 11514 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> <u>\$22,569.78</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
3.97 Nonpriority creditor's name and mailing address Paul & Daniels Flags & Banners 2A Magnolia Avenue Nesconset, NY 11767 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> <u>\$1,524.25</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
3.98 Nonpriority creditor's name and mailing address Paul MacHenry and Company 20 Executive Drive Moorestown, NJ 08057-4252 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> <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
3.99 Nonpriority creditor's name and mailing address Paul Revere Life Ins. Co. PO Box 1365 Columbia, SC 29202-1365 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> <u>\$27,499.72</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
3.100 Nonpriority creditor's name and mailing address PH Media Group Oakland House Talbot Road, 12th Floor Manchester M16 0PQ 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> <u>\$1,500.00</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
3.101 Nonpriority creditor's name and mailing address Pitney Bowes Global Financial PO Box 371887 Pittsburgh, PA 15250 Date(s) debt was incurred __ Last 4 digits of account number <u>2547</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$344.39</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

Debtor Name	Case number (if known)
Bay Ridge Automotive Company, LLC	
3.102 Nonpriority creditor's name and mailing address Pitta Bishop Del Giorno & Gibl 120 Broadway 28th Floor New York, NY 10271 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> \$74,187.05 <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
3.103 Nonpriority creditor's name and mailing address PJK Sales, Inc. DM Professional, Inc. PO Box 508 Lyndhurst, NJ 07071 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> \$20.00 <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
3.104 Nonpriority creditor's name and mailing address Precision Collison Auto Body 123-17 101st Street South Richmond Hill, NY 11419 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> \$9,150.00 <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
3.105 Nonpriority creditor's name and mailing address Prestige Auto Transport 374 Brehaut Avenue Staten Island, NY 10307 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 checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106 Nonpriority creditor's name and mailing address Reed Smith LLP 599 Lexington Avenue 26th Floor New York, NY 10022-7684 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> \$262.50 <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
3.107 Nonpriority creditor's name and mailing address Reyna Capital Corporatoin PO Box 674275 Dallas, TX 75267-4275 Date(s) debt was incurred __ Last 4 digits of account number <u>2383</u>	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 checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.108 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 <u>5776</u>	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 checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor <u>Bay Ridge Automotive Company, LLC</u> Name		Case number (if known) _____	
3.109	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: <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	\$561.76
3.110	Nonpriority creditor's name and mailing address Sand Automotive Warehouse 59 15th Street Brooklyn, NY 11215 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	\$130.02
3.111	Nonpriority creditor's name and mailing address Secure Auto Systems, Inc. PO Box 060878 Staten Island, NY 10306-0009 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	\$399.00
3.112	Nonpriority creditor's name and mailing address Star Paper LLC 174 Fifth Avenue New York, NY 10010 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	\$11,799.34
3.113	Nonpriority creditor's name and mailing address Taxicab Partitions Inc. 14-15 Inwood Avenue Bronx, NY 10452 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	\$300.00
3.114	Nonpriority creditor's name and mailing address TD Bank 32 Chestnut Street Lewiston, ME 04240 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	\$42,084.68
3.115	Nonpriority creditor's name and mailing address TD Bank NA 1100 Lake Street 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> <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	\$0.00

Debtor Name	Case number (if known)
Bay Ridge Automotive Company, LLC	
3.116 Nonpriority creditor's name and mailing address TFPI/Total Fire Protection 5322 Avenue N. Brooklyn, NY 11234 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> \$629.08 <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
3.117 Nonpriority creditor's name and mailing address The Coughlan Group Inc. 237 West 35th Street, Suite 30 New York, NY 10001 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 checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.118 Nonpriority creditor's name and mailing address Time Warner Cable PO Box 11820 Newark, NJ 07101-8120 Date(s) debt was incurred __ Last 4 digits of account number <u>0910</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,584.38 <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
3.119 Nonpriority creditor's name and mailing address Time Warner Cable PO Box 11820 Newark, NJ 07101-8120 Date(s) debt was incurred __ Last 4 digits of account number <u>4035</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,256.33 <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
3.120 Nonpriority creditor's name and mailing address Time Warner Cable PO Box 11820 Newark, NJ 07101-8120 Date(s) debt was incurred __ Last 4 digits of account number <u>3710</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$241.04 <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
3.121 Nonpriority creditor's name and mailing address Time Warner Cable of NYC PO Box 11820 Newark, NJ 07101-8120 Date(s) debt was incurred __ Last 4 digits of account number <u>9266</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,902.16 <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
3.122 Nonpriority creditor's name and mailing address TM & T Service Station, Inc. 41-15 Northern Blvd. 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: <i>Check all that apply.</i> \$269.00 <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

Debtor Name	Case number (if known)
Bay Ridge Automotive Company, LLC	
3.123 Nonpriority creditor's name and mailing address TNS Auto Collision 1011 61st Street Brooklyn, NY 11219-5127 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> \$7,936.24 <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
3.124 Nonpriority creditor's name and mailing address TNS Auto Collision 1011 61st Street Brooklyn, NY 11219-5127 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> \$4,782.98 <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
3.125 Nonpriority creditor's name and mailing address Tri-County Auto Company 311 West Main Street Rockaway, NJ 07866 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> \$112.55 <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
3.126 Nonpriority creditor's name and mailing address True Car, Inc. Dept. LA 24198 Pasadena, CA 91185-4198 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> \$7,161.86 <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
3.127 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: <i>Check all that apply.</i> \$0.00 <input checked="" 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
3.128 Nonpriority creditor's name and mailing address UAW Local 259 140 Sylvan Avenue Suite 303 Englewood Cliffs, NJ 07632 Date(s) debt was incurred __ Last 4 digits of account number <u>0291</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$50,652.92 <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
3.129 Nonpriority creditor's name and mailing address United Automobile Workers 80 Jerusalem Avenue Hicksville, NY 11801 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> \$1,582.75 <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

Debtor Name	Case number (if known)
Bay Ridge Automotive Company, LLC	
3.130 Nonpriority creditor's name and mailing address United Healthcare 1 Penn Plaza 8th Floor New York, NY 10119 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> \$5,585.68 <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
3.131 Nonpriority creditor's name and mailing address United Radio, Inc. 5705 Enterprise Pkwy East Syracuse, NY 13057 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> \$2,407.50 <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
3.132 Nonpriority creditor's name and mailing address Universal Underwriters Group 4440 Paysphere Circle Chicago, IL 60674 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 checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.133 Nonpriority creditor's name and mailing address Uperator LLC 17505 N. 79th Avenue Suite 413 Glendale, AZ 85308 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> \$3,520.00 <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
3.134 Nonpriority creditor's name and mailing address UPS Ground Freight PO Box 7247-0244 Philadelphia, PA 19170 Date(s) debt was incurred __ Last 4 digits of account number <u>A155</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$576.89 <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
3.135 Nonpriority creditor's name and mailing address Venus Auto Parts 2125 Greenpoint Avenue Brooklyn, NY 11245 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> \$95.00 <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
3.136 Nonpriority creditor's name and mailing address Verizon PO Box 408 Newark, NJ 07101-0080 Date(s) debt was incurred __ Last 4 digits of account number <u>0002</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$474.72 <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

Debtor <u>Bay Ridge Automotive Company, LLC</u> Name		Case number (if known) _____
3.137	Nonpriority creditor's name and mailing address Verizon PO Box 15043 Albany, NY 12212-5043 Date(s) debt was incurred ____ Last 4 digits of account number <u>6166</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <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
3.138	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 <u>2299</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$168.70</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
3.139	Nonpriority creditor's name and mailing address Vintage Parts PO Box 376 Beaver Dam, WI 53916 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> <u>\$303.13</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
3.140	Nonpriority creditor's name and mailing address Wheel Fix It 55 St. Mary's Place Freeport, NY 11520 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> <u>\$100.00</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
3.141	Nonpriority creditor's name and mailing address White Plains Nissan 500 Tarrytown Road White Plains, NY 10607 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> <u>\$26.41</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
3.142	Nonpriority creditor's name and mailing address Wholesale Auto Supply Co. 22 Florence Street PO Box 2166 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: <i>Check all that apply.</i> <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
3.143	Nonpriority creditor's name and mailing address Wiss & Company LLP 14 Penn Plaza Suite 300 New York, NY 10122 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> <u>\$3,192.50</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

Debtor Bay Ridge Automotive Company, LLC Case number (if known) _____
Name

3.144 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** \$0.00
Withum Smith & Brown
5 Vaughn Drive
Princeton, NJ 08540
 Date(s) debt was incurred _____
 Last 4 digits of account number 8938
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: _____
 Is the claim subject to offset? No Yes

3.145 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** \$0.00
Workers' Compensation Board
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

3.146 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is: Check all that apply.** \$1,589.48
Zide Inc.
11 Eliot Avenue
Huntington Station, NY 11746
 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
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Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

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

5a. Total claims from Part 1	Total of claim amounts
5b. Total claims from Part 2	5a. \$ <u>1,003,503.00</u>
	5b. + \$ <u>1,047,674.98</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ <u>2,051,177.98</u>

Fill in this information to identify the case:

Debtor name Bay Ridge Automotive Company, 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* (Official Form 206A/B). *Property*

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 Showroom**

State the term remaining **20 years**

List the contract number of any government contract _____

**612 86th Street, LLC
c/o Seltzer Sussman Haberman
100 Jericho Quadrangle
Jericho, NY 11753**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Lease for Pre-Owned Center**

State the term remaining **20 years**

List the contract number of any government contract _____

**Dige Associates LLC
c/o Peter J. Zahakis
2707 Landing Avenue
Bellmore, NY 11710**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Ford Sales and Service Agreement**

State the term remaining _____

List the contract number of any government contract _____

**Ford Motor Company
16800 Executive Plaza
Dearborn, MI 48126**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Lease for Service Center**

State the term remaining **37 years**

List the contract number of any government contract _____

**NYC Economic Development Corp.
Attn: Lease Administrator
110 William Street
New York, NY 10038**

Debtor 1 **Bay Ridge Automotive Company, 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 **Data Management Services**
State the term remaining
List the contract number of any government contract **Reynolds and Reynolds
One Reynolds Way
Dayton, OH 45430**

2.6. State what the contract or lease is for and the nature of the debtor's interest **Real Property Lease**
State the term remaining **6 years**
List the contract number of any government contract **Riverside Machinery Co.
140 53rd Street
Brooklyn, NY 11232**

Fill in this information to identify the case:

Debtor name Bay Ridge Automotive Company, 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 Alex Boyko	3201 NE 183rd Street #2004 North Miami Beach, FL 33160	JP Morgan Chase Bank, NA	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2 Alex Boyko	3201 NE 183rd Street #2004 North Miami Beach, FL 33160	TD Bank	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.3 BICOM NY, LLC	787 11th Avenue New York, NY 10019	JP Morgan Chase Bank, NA	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.4 Gary Flom	50 Riverside Blvd. #10A New York, NY 10169	JP Morgan Chase Bank, NA	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.5 Gary Flom	50 Riverside Blvd. #10A New York, NY 10169	TD Bank	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor **Bay Ridge Automotive Company, LLC**

Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.
Column 1: Codebtor Column 2: Creditor

2.6	ISCOM NY, LLC	1 York Street New York, NY 10013	JP Morgan Chase Bank, NA	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.7	Venamin Nilva	3201 NE 183rd Street #2004 North Miami Beach, FL 33160	JP Morgan Chase Bank, NA	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.8	Venamin Nilva	3201 NE 183rd Street #2004 North Miami Beach, FL 33160	TD Bank	<input checked="" type="checkbox"/> D <u>2.2</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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