

Fill in this information to identify the case:

United States Bankruptcy Court for the:

CENTRAL District of CALIFORNI  
(State)

Case number (if known): Chapter 11

☐ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name POST PRODUCTION, INC.

2. All other names debtor used in the last 8 years fka SONIC POOL, INC.  
Include any assumed names, trade names, and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 9 5 - 4 8 6 9 5 7 5

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

6860 LEXINGTON AVE.  
Number Street

Number Street

P.O. Box

LOS ANGELES CA 90038  
City State ZIP Code

City State ZIP Code

Location of principal assets, if different from principal place of business

LOS ANGELES  
County

Number Street

City State ZIP Code

5. Debtor's website (URL) www.postproduction.com

6. Type of debtor  
☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
☐ Partnership (excluding LLP)  
☐ Other. Specify:

Debtor POST PRODUCTION, INC. Case number (if known) \_\_\_\_\_  
Name

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))  
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))  
☐ Railroad (as defined in 11 U.S.C. § 101(44))  
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))  
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))  
☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))  
☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)  
☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)  
☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.naics.com/search/>.

7 8 1 2

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- ☐ Chapter 7  
☐ Chapter 9  
☒ Chapter 11. Check all that apply:  
☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).  
☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).  
☐ A plan is being filed with this petition.  
☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).  
☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.  
☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.  
☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

☒ No

☐ Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY  
District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

If more than 2 cases, attach a separate list.

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

☒ No

☐ Yes. Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_  
MM / DD / YYYY  
Case number, if known \_\_\_\_\_

List all cases. If more than 1, attach a separate list.

Debtor POST PRODUCTION, INC. Case number (if known) \_\_\_\_\_  
Name

**11. Why is the case filed in this district?**

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

- ☒ No
- ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other \_\_\_\_\_

**Where is the property?**

Number \_\_\_\_\_ Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Is the property insured?**

- ☐ No
- ☐ Yes. Insurance agency \_\_\_\_\_  
Contact name \_\_\_\_\_  
Phone \_\_\_\_\_

**Statistical and administrative information**

**13. Debtor's estimation of available funds**

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

**14. Estimated number of creditors**

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |

**15. Estimated assets**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000          | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000    | <input type="checkbox"/> \$10,000,001-\$50 million           | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000   | <input type="checkbox"/> \$50,000,001-\$100 million          | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million         | <input type="checkbox"/> More than \$50 billion        |

Debtor POST PRODUCTION, INC.

Case number / assets \_\_\_\_\_

16. Estimated liabilities

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000          | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000    | <input type="checkbox"/> \$10,000,001-\$50 million           | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000   | <input type="checkbox"/> \$50,000,001-\$100 million          | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million         | <input type="checkbox"/> More than \$50 billion        |

**Request for Relief, Declaration, and Signatures**

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement 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.

17. Declaration and signature of authorized representative of debtor

- a The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- b I have been authorized to file this petition on behalf of the debtor.
- c I have examined the information in this petition and have a reasonable belief that the information is true and correct.

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

Executed on 06/18/2018  
MM / DD / YYYY

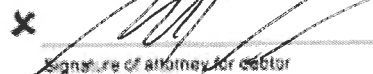
x   
Signature of authorized representative of debtor

John Frost

Printed name

Title President

18. Signature of attorney

x   
Signature of attorney for debtor

Date 05/18/2018

MM / DD / YYYY

Michael S. Kogan

Printed name

KOGAN LAW FIRM, APC

Firm name

1649 Sawtelle Blvd., Suite 700

Number Street

Los Angeles

City

310.954.1690

Contact phone

CA 90025

State ZIP Code

mkogan@koganlawfirm.com

Email address

128500

Bar number

CA

State

Official Form 201A (12/15)

*[If debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11 of the Bankruptcy Code, this Exhibit "A" shall be completed and attached to the petition.]*

*[Caption as in Form 416B]*

**Attachment to Voluntary Petition for Non-Individuals Filing for  
Bankruptcy under Chapter 11**

1. If any of the debtor's securities are registered under Section 12 of the Securities Exchange Act of 1934, the SEC file number is N/A.

2. The following financial data is the latest available information and refers to the debtor's condition on N/A.

a. Total assets \$ \_\_\_\_\_

b. Total debts (including debts listed in 2.c., below) \$ \_\_\_\_\_

c. Debt securities held by more than 500 holders

Approximate  
number of  
holders:

secured	<input type="checkbox"/>	unsecured	<input type="checkbox"/>	subordinated	<input type="checkbox"/>	\$ _____	<u>N/A</u>
secured	<input type="checkbox"/>	unsecured	<input type="checkbox"/>	subordinated	<input type="checkbox"/>	\$ _____	_____
secured	<input type="checkbox"/>	unsecured	<input type="checkbox"/>	subordinated	<input type="checkbox"/>	\$ _____	_____
secured	<input type="checkbox"/>	unsecured	<input type="checkbox"/>	subordinated	<input type="checkbox"/>	\$ _____	_____
secured	<input type="checkbox"/>	unsecured	<input type="checkbox"/>	subordinated	<input type="checkbox"/>	\$ _____	_____

d. Number of shares of preferred stock \_\_\_\_\_

e. Number of shares common stock \_\_\_\_\_

Comments, if any: \_\_\_\_\_

3. Brief description of debtor's business: \_\_\_\_\_

4. List the names of any person who directly or indirectly owns, controls, or holds, with power to vote, 5% or more of the voting securities of debtor:

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address	FOR COURT USE ONLY
<b>UNITED STATES BANKRUPTCY COURT          CENTRAL DISTRICT OF CALIFORNIA - LOS ANGELES DIVISION</b>	
In re:  POST PRODUCTION, INC.	CASE NO.:  CHAPTER: 11
Debtor(s).	<div style="text-align: center;"> <b>ATTACHMENT TO VOLUNTARY PETITION          FOR NON-INDIVIDUAL FILING FOR          BANKRUPTCY UNDER CHAPTER 11</b> </div> <p style="font-size: small; margin-top: 10px;"> <i>[If debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11 of the Bankruptcy Code, this form shall be completed and attached to the petition.]</i> </p>

1. If any of the Debtor's securities are registered under Section 12 of the Securities Exchange Act of 1934, the SEC file number is N/A.

2. The following financial data is the latest available information and refers to the debtor's condition on \_\_\_\_\_.

- a. Total assets \$ \_\_\_\_\_
- b. Total debts (including debts listed in 2.c., below) \$ \_\_\_\_\_
- c. Debt securities held by more than 500 holders

				Approximate number of holders:
<input type="checkbox"/> secured	<input type="checkbox"/> unsecured	<input type="checkbox"/> subordinated	\$	
<input type="checkbox"/> secured	<input type="checkbox"/> unsecured	<input type="checkbox"/> subordinated	\$	
<input type="checkbox"/> secured	<input type="checkbox"/> unsecured	<input type="checkbox"/> subordinated	\$	
<input type="checkbox"/> secured	<input type="checkbox"/> unsecured	<input type="checkbox"/> subordinated	\$	
<input type="checkbox"/> secured	<input type="checkbox"/> unsecured	<input type="checkbox"/> subordinated	\$	

d. Number of shares of preferred stock \_\_\_\_\_

e. Number of shares of common stock \_\_\_\_\_

Comments, if any:

3. Brief description of the Debtor's business: N/A

4. List the names of any persons who directly or indirectly owns, controls, or holds, with power to vote, 5% or more of the voting securities of the Debtor:

N/A

**Fill in this information to identify the case:**

Debtor name POST PRODUCTION, INC.  
United States Bankruptcy Court for the: CENTRAL District of CALIFORNI  
(State)  
Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 204**

**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders**

12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1	CIT 10201 Centurion Pkwy N #101, Jacksonville, FL 32256	Ernestine Willis vfte@customerfinancing.com		C, U, D			8,819
2	Western Equip. Finance P.O. Box 640m 530 Hwy 2 W Devils Lake, ND 58301	800.451.7087 Kimberlie Lettich kimberlie.lettich@western equipmentfinance.com		C, U, D			7,873
3	Huntington Tech. Finance P.O. Box 2743 Bloomfield Hills, MI 48303	248.339.1400 Mike Sabetti		C, U, D			36,342
4	Panasonic Fin. Solutions			C, U, D			6,534
5	De Lage Landen Fin.Svc.Inc 1111 Old Eagle School Road Wayne, PA 19087			C, U, D			8,110
6	Everbank Comm'l Finance 10 Waterview Blvd. Parsippany, NJ 07054	866.550.8795 Tanya Mier tmier@bizleasecenter.com		C, U, D			12,444
7	M & M Fin. Consulting Inc. 3947 N. Ashland Ave. Chicago, IL 60613	773.969.5816 Rebecca kelly rkelly@mmtaxrelief.com					6,600
8	Universal Music Pub. Group 2100 Colorado Ave. Santa Monica, CA 90404	Minerva Gonzalez minerva.gonzalez@umusic.com		C, U, D			10,000

Debtor POST PRODUCTION, INC.  
Name

Case number (if known) \_\_\_\_\_

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
9	Rhino Entertainment Co. 10585 Santa Monica Blvd. Los Angeles, CA 90025			C, U, D			10,000
10	Jason Yanuzzi 1757 N. Beverly Glen Bel Air, CA 90077	Jason Yanuzzi		C, U, D			12,000
11	Atlas Digital LLC (Noel Chi) 170 S. Flower Street Burbank, CA 91502	323.878.0080Ivan ivan@atlasdigital.tv		C, U, D			59,722
12	6850 Lexington Ave. 12304 Santa Monica Bl.#304 Los Angeles, CA 90025-259	310.451.0089 Stephen Kuntz		C, U, D			86,125
13	Wilcon 624 S. Grand Ave., # 2500 Los Angeles, CA 90017	213.542.0100		C, U, D			7,328
14	Wolf Internet Access 800 Steward Street Seattle, WA 98101	206.210.2065					12,000
15	Zayo Group, LLC 1821 30th Street, Unit A Dallas, TX 75395-2136	800.390.6094 customerservice@zayo.com					10,627
16	LA Dept of Water & Power P.O. Box 515407 Los Angeles, CA 90051						15,058
17	Dan Kliman 6343 Warner Drive Los Angeles, CA 90048	Dan kilman 310.350.4429 dakilman@aol.com		C, U, D			7,092
18	Blue Shield of California 3021 Reynolds Ranch Pkwy Lodi, CA 95240	800.325.5166					28,951
19	Russo Anastosio 4165 Dixie Canyon Ave. Sherman Oaks, CA 91423	Russo Anastosio					125,000
20	Chase Bank INK Visa Card P.O. Box 656754 San Antonio, TX 78265						10,000



**CORPORATE RESOLUTION**

In accordance with the authority vested in the Members, Managers, Board of Directors, the Directors have approved, and do hereby approve, the following resolutions:


RESOLVED, that Post Production, Inc. fka Sonic Pool, Inc. (the "Corporation") file a Petition for a reorganization pursuant to Chapter 11 of the Bankruptcy Code, and it is further

RESOLVED, that any officer or manager of the Corporation including but not limited to John Frost, President, is authorized by their sole signature to sign all documents necessary and requisite in connection with the said Petition pursuant to Chapter 11 of the Bankruptcy Code, and is directed to perform all acts and deeds and to execute and deliver all necessary documents on behalf of the Corporation in connection with such Chapter 11 case, and it is further

RESOLVED, that this Corporation retain Kogan Law Firm, APC as counsel to represent the Corporation in connection with the proceedings, and to pay its retainer.

DATED: June 18, 2018

**POST PRODUCTION, INC.**

By:   
John Frost, President

**United States Bankruptcy Court**  
**Central District of California**

In re POST PRODUCTION, INC.

Debtor

Case No. \_\_\_\_\_

Chapter 11

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with Rule 1007(a)(3) for filing in this chapter 11 case.

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
---	-------------------	-------------------------	---------------------

John Frost and Pat Bird



/s/John Frost

Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address	FOR COURT USE ONLY
Michael S. Kogan (SBN 128500) KOGAN LAW FIRM, APC 1849 Sawtelle Blvd., Suite 700 Los Angeles, California 90025 Telephone (310) 954-1690 mkogan@koganlawfirm.com	
<input checked="" type="checkbox"/> Attorney for: Debtor	
<p align="center"><b>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA - LOS ANGELES DIVISION</b></p>	
In re: POST PRODUCTION, INC.	CASE NO.: ADVERSARY NO.: CHAPTER: 11
Debtor(s).	
Plaintiff(s),	<p align="center"><b>CORPORATE OWNERSHIP STATEMENT PURSUANT TO FRBP 1007(a)(1) and 7007.1, and LBR 1007-4</b></p>
Defendant(s).	[No hearing]

*Pursuant to FRBP 1007(a)(1) and 7007.1, and LBR 1007-4, any corporation, other than a governmental unit, that is a debtor in a voluntary case or a party to an adversary proceeding or a contested matter shall file this Statement identifying all its parent corporations and listing any publicly held company, other than a governmental unit, that directly or indirectly own 10% or more of any class of the corporation's equity interest, or state that there are no entities to report. This Corporate Ownership Statement must be filed with the initial pleading filed by a corporate entity in a case or adversary proceeding. A supplemental statement must promptly be filed upon any change in circumstances that renders this Corporate Ownership Statement inaccurate.*

I, (Printed name of attorney or declarant) Michael Kogan, the undersigned in the above-captioned case, hereby declare under penalty of perjury under the laws of the United States that the following is true and correct:

**[Check the appropriate boxes and, if applicable, provide the required information.]**

1. I have personal knowledge of the matters set forth in this Statement because:

- ☐ I am the president or other officer or an authorized agent of the Debtor corporation
- ☐ I am a party to an adversary proceeding
- ☐ I am a party to a contested matter
- ☒ I am the attorney for the Debtor corporation

2. a. ☐ The following entities, other than the Debtor or a governmental unit, directly or indirectly own 10% or more of any class of the corporation's(s') equity interests:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

[For additional names, attach an addendum to this form.]

b. ☐ There are no entities that directly or indirectly own 10% or more of any class of the corporation's equity interest.

Date: 06/18/2018

By: /s/Michael S. Kogan  
Signature of Debtor, or attorney for Debtor

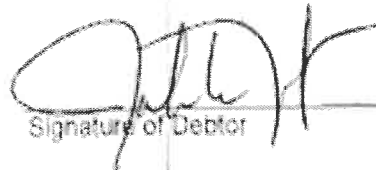
Name: Michael S. Kogan  
Printed name of Debtor, or attorney for Debtor

**STATEMENT OF RELATED CASES  
INFORMATION REQUIRED BY LBR 1015-2  
UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA**

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)  
n/a
2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)  
n/a
3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)  
n/a
4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)  
n/a

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

Executed at Los Angeles, California

  
Signature of Debtor

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of Joint Debtor

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

**Fill in this information to identify the case:**

Debtor name POST PRODUCTION, INC.  
United States Bankruptcy Court for the: CENTRAL District of CALIFOR  
(State)  
Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206Sum

**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**

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

1a. **Real property:**

Copy line 88 from *Schedule A/B* .....

\$ 0.00

1b. **Total personal property:**

Copy line 91A from *Schedule A/B* .....

\$ 1,448,879.00

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

Copy line 92 from *Schedule A/B* .....

\$ 1,448,879.00

**Part 2: Summary of Liabilities**

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D* .....

\$ 0.00

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F* .....

\$ 477,679.00

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

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

+ \$ 527,682.00

4. **Total liabilities** .....  
Lines 2 + 3a + 3b

\$ 1,005,361.00

**Fill in this information to identify the case:**

Debtor name POST PRODUCTION, INC.  
United States Bankruptcy Court for the: CENTRAL District of CALIFOR  
(State)  
Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

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

2. Cash on hand \$ 0.00
3. Checking, savings, money market, or financial brokerage accounts (*Identify all*)
- | Name of institution (bank or brokerage firm) | Type of account | Last 4 digits of account number | Current value of debtor's interest |
|--|-----------------|---------------------------------|------------------------------------|
| 3.1. <u>City National</u>                    | <u>checking</u> | <u>1 0 5 5</u>                  | \$ <u>0.00</u>                     |
| 3.2. <u>Chase Bank</u>                       | <u>checking</u> | <u>      </u>                   | \$ <u>20,000.00</u>                |
4. Other cash equivalents (*Identify all*)
- 4.1. Ameritrade \$ 1,000.00
- 4.2. \_\_\_\_\_ \$ \_\_\_\_\_
5. Total of Part 1 \$ 21,000.00
- Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**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.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

- 7.1. \_\_\_\_\_ \$ \_\_\_\_\_
- 7.2. \_\_\_\_\_ \$ \_\_\_\_\_





Debtor

POST PRODUCTION, INC.  
Name

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**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	MM / DD / YYYY	\$		\$
20. Work in progress	MM / DD / YYYY	\$		\$
21. Finished goods, including goods held for resale	MM / DD / YYYY	\$		\$
22. Other inventory or supplies	MM / DD / YYYY	\$		\$
23. Total of Part 5		✓		\$

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.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested	\$		\$
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish	\$		\$
30. Farm machinery and equipment (Other than titled motor vehicles)	\$		\$
31. Farm and fishing supplies, chemicals, and feed	\$		\$
32. Other farming and fishing-related property not already listed in Part 6	\$		\$

33. Total of Part 6.

Add lines 28 through 32. Copy the total to line 85.

\$ 0.00

34. Is the debtor a member of an agricultural cooperative?

- ☐ No  
☐ Yes. Is any of the debtor's property stored at the cooperative?  
☐ No  
☐ Yes

35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?

- ☐ No  
☐ Yes. Book value \$ Valuation method Current value \$

36. Is a depreciation schedule available for any of the property listed in Part 6?

- ☐ No  
☐ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

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

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			
	\$		\$
40. Office fixtures			
	\$		\$
41. Office equipment, including all computer equipment and communication systems equipment and software			
	\$ 10,000.00		\$ 10,000.00
42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1	\$		\$
42.2	\$		\$
42.3	\$		\$

43. Total of Part 7.

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

\$ 10,000.00

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

- ☐ No  
☒ Yes

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

- ☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

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

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

General description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	(Where available)		

47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

47.1	\$		\$
47.2	\$		\$
47.3	\$		\$
47.4	\$		\$

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

48.1	\$		\$
48.2	\$		\$

49. Aircraft and accessories

49.1	\$		\$
49.2	\$		\$

50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)

includes leased equipment	\$ 1,109,405.00	depreciated value	\$ 1,109,405.00
---------------------------	-----------------	-------------------	-----------------

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$ 1,109,405.00
-----------------

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 _____	_____	\$ _____	_____	\$ _____
55.2 _____	_____	\$ _____	_____	\$ _____
55.3 _____	_____	\$ _____	_____	\$ _____
55.4 _____	_____	\$ _____	_____	\$ _____
55.5 _____	_____	\$ _____	_____	\$ _____
55.6 _____	_____	\$ _____	_____	\$ _____

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?

☒ 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 _____	\$ _____	_____	\$ _____
62. Licenses, franchises, and royalties _____	\$ _____	_____	\$ _____
63. Customer lists, mailing lists, or other compilations _____	\$ _____	_____	\$ _____
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

Debtor

POST PRODUCTION, INC.  
Name

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Case number (if known)

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No  
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No  
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

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

Current value of  
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____	—	_____	= →	\$ _____
	Total face amount	doubtful or uncollectible amount		

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuities

_____	\$ _____
-------	----------

74. Causes of action against third parties (whether or not a lawsuit has been filed)

_____	\$ _____
-------	----------

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

_____	\$ _____
-------	----------

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

76. Trusts, equitable or future interests in property

_____	\$ _____
-------	----------

77. Other property of any kind not already listed Examples: Season tickets, country club membership

_____	\$ _____
-------	----------

_____	\$ _____
-------	----------

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ _____	0.00
----------	------

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

**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>	\$ 21,000.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ 0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ 308,474.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ 0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$	
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>	\$ 10,000.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ 1,109,405.00	
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. 91a.	\$ 1,448,879.00	+ 91b. \$ 0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.	\$ 1,448,879.00	

## Fill in this information to identify the case:

Debtor name POST PRODUCTION, INC.  
 United States Bankruptcy Court for the: CENTRAL District of CALIFORNI  
 (State)  
 Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

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

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

**Part 1: List Creditors Who Have Secured Claims**

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

*Column A*  
**Amount of claim**  
 Do not deduct the value of collateral.

*Column B*  
**Value of collateral that supports this claim**

**2.1** Creditor's name

Describe debtor's property that is subject to a lien

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's mailing address

Describe the lien

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No  
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☐ No  
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

As of the petition filing date, the claim is:

- ☐ No  
☒ Yes. Specify each creditor, including this creditor, and its relative priority.

Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

**2.2** Creditor's name

Describe debtor's property that is subject to a lien

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's mailing address

Describe the lien

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No  
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account number

- ☐ No  
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the same property?

As of the petition filing date, the claim is:

- ☐ No  
☒ Yes. Have you already specified the relative priority?  
☐ No. Specify each creditor, including this creditor, and its relative priority.

Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

- ☒ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

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

\$ \_\_\_\_\_

**Part 1: Additional Page**

Column A

Amount of claim

Do not deduct the value  
of collateral.

Column B

Value of collateral  
that supports this  
claimCopy this page only if more space is needed. Continue numbering the lines sequentially from the  
previous page.2. **Creditor's name** Describe debtor's property that is subject to a lien

\$ \$

Creditor's mailing address

Describe the lien

Creditor's email address, if known

Is the creditor an insider or related party?

- ☐ No  
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account  
number

- ☐ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the  
same property?

As of the petition filing date, the claim is:

Check all that apply.

- ☐ No  
☐ Yes. Have you already specified the relative  
priority?

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

- ☐ No. Specify each creditor, including this  
creditor, and its relative priority.

- ☐ Yes. The relative priority of creditors is  
specified on lines

2. **Creditor's name** Describe debtor's property that is subject to a lien

\$ \$

Creditor's mailing address

Describe the lien

Creditor's email address, if known

Is the creditor an insider or related party?

- ☒ No  
☐ Yes

Date debt was incurred

Is anyone else liable on this claim?

Last 4 digits of account  
number

- ☐ No  
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

Do multiple creditors have an interest in the  
same property?

As of the petition filing date, the claim is:

Check all that apply.

- ☐ No  
☐ Yes. Have you already specified the relative  
priority?

- ☒ Contingent  
☒ Unliquidated  
☒ Disputed

- ☐ No. Specify each creditor, including this  
creditor, and its relative priority.

- ☐ Yes. The relative priority of creditors is  
specified on lines



Name \_\_\_\_\_

Case number (if known)

page \_\_\_\_ of \_\_\_\_

Fill in this information to identify the case:

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Debtor POST PRODUCTION, INC.

United States Bankruptcy Court for the: CENTRAL District of CALIFORNI  
(State)

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
<b>2.1</b> Priority creditor's name and mailing address <u>Internal Revenue Service</u> <u>P.O. Box 7346</u> <u>Philadelphia, PA 19101</u>  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) ( <u>8</u> )	As of the petition filing date, the claim is: \$ <u>400,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>unpaid taxes</u>	\$ <u>400,000.00</u>
Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

<b>2.2</b> Priority creditor's name and mailing address <u>Franchise Tax Board, Bankruptcy Unit,</u> <u>MS A-340, PO Box 2952</u> <u>Sacramento, CA 95812-2952</u>  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) ( <u>8</u> )	As of the petition filing date, the claim is: \$ <u>0.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>0.00</u>
---	--	----------------

<b>2.3</b> Priority creditor's name and mailing address <u>Employment Development Department</u> <u>Bankruptcy Group MIC 92E, P.O. Box</u> <u>826880, Sacramento, CA 94280-0001</u>  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) ( <u>8</u> )	As of the petition filing date, the claim is: \$ <u>77,679.00</u> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>unpaid taxes</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>77,679.00</u>
--	---	---------------------

**Part 1. Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2\_ Priority creditor's name and mailing address

\$ 0.00 \$ 0.00

Internal Revenue Service

P.O. Box 21126

Philadelphia, PA 19114

Date or dates debt was incurred

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Last 4 digits of account  
number

Is the claim subject to offset?

- ☐ No  
☐ Yes

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

2\_ Priority creditor's name and mailing address

\$ \$

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account  
number

Is the claim subject to offset?

- ☐ No  
☐ Yes

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

2\_ Priority creditor's name and mailing address

\$ \$

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account  
number

Is the claim subject to offset?

- ☐ No  
☐ Yes

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

2\_ Priority creditor's name and mailing address

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

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim:

Date or dates debt was incurred

Last 4 digits of account  
number

Is the claim subject to offset?

- ☐ No  
☐ Yes

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

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

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

		Amount of claim
<b>3.1</b>	<b>Nonpriority creditor's name and mailing address</b> CIT 10201 Centurion Parkway, N. #100 Jacksonville, FL 32256  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>lease payments</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$ 8,819.00
<b>3.2</b>	<b>Nonpriority creditor's name and mailing address</b> Western Equip. Finance P.O. Box 640, 530 Highway 2 West Devils Lake, ND 58301  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>lease payments</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$ 7,873.00
<b>3.3</b>	<b>Nonpriority creditor's name and mailing address</b> _____ _____ _____  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$
<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> Huntington Technology Finance P.O Box 2743 Bloomfield Hills, MI 48303-2017  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>lease payments</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$ 36,342.00
<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> _____ _____ _____  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> Panasonic Finance Solutions PO Box 51657 Los Angeles, CA 90051 _____  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>lease payments</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$ 6,534.00

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <u>Nonpriority creditor's name and mailing address</u> De Lage Landen Financial Services, Inc.  1111 Old Eagle School Rd Wayne, PA 19087  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: <u>lease payments</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>8,110.00</u>
3. <u>Nonpriority creditor's name and mailing address</u> Everbank Commercial Finance  10 Waterview Blvd. Parsippany, NJ 07054  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>lease payments</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>12,444.00</u>
3. <u>Nonpriority creditor's name and mailing address</u> Bank of the West Equipment Finance  P.O. Box 7167 Pasadena, CA 91109-7167  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>lease payments</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>5,150.00</u>
3. <u>Nonpriority creditor's name and mailing address</u> Western Equip. Finance  P.O. Box 640, 503 Highway 2 West Devils Lake, ND 58301  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>lease payments</u>  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>5,486.00</u>
3. <u>Nonpriority creditor's name and mailing address</u> Unifi Equipment Finance  3893 Research Park Drive Ann Arbor, MI 48108  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>lease payments</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>3,803.00</u>

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <b>Nonpriority creditor's name and mailing address</b> Direct Capital Corp. (Apple)  155 Commerce Way Portsmouth, NH 03801  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  <b>Basis for the claim:</b> <u>lease payments</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,204.00
3. <b>Nonpriority creditor's name and mailing address</b> Atlas Digital LLC (Noel Chi, L.P.)  170 S. Flower Street Burbank, CA 91502  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>premise lease</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 59,722.00
3. <b>Nonpriority creditor's name and mailing address</b> Shapeshifter, Inc. (c/o Anastasio)  4165 Dixie Canyon Avenue Sherman Oaks, CA 91423  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>litigation</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 0.00
3. <b>Nonpriority creditor's name and mailing address</b> 6850 Lexington Ave.  12304 Santa Monica Blvd., #304 Los Angeles, CA 90025-2593  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>premises lease</u>  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 86,125.00
3. <b>Nonpriority creditor's name and mailing address</b> _____ _____ _____  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Wilcon  624 S. Grand Avenue, Suite 2500 Los Angeles, CA 90017  Date or dates debt was incurred _____ Last 4 digits of account number _____	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 <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: internet  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 7,328.00
3. Nonpriority creditor's name and mailing address Wolf Internet Access  800 Steward Street Seattle, WA 98101  Date or dates 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 type="checkbox"/> Disputed  Basis for the claim: internet  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 12,000.00
3. Nonpriority creditor's name and mailing address Zayo Group, LLC  1821 30th Street, Unit A Dallas, TX 75395-2136  Date or dates 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 type="checkbox"/> Disputed  Basis for the claim: trade  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 10,627.00
3. Nonpriority creditor's name and mailing address Los Angeles Department of Water & Power  P.O. Box 515407 Los Angeles, CA 90051-6707  Date or dates 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 type="checkbox"/> Disputed  Basis for the claim: power-lexington  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 15,058.00
3. Nonpriority creditor's name and mailing address TPX Communications  3300 N. Cimarron Road Las Vegas, NY 89129  Date or dates 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 type="checkbox"/> Disputed  Basis for the claim: trade  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 800.00

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <u>    </u>	Nonpriority creditor's name and mailing address <u>Blue Shield of California</u>  <u>3021 Reynolds Ranch Parkway</u> <u>Lodi, CA 95240</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: <u>employee health car</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>28,951.00</u>
3. <u>    </u>	Nonpriority creditor's name and mailing address <u>Principal Financial Group</u>  <u>P.O. Box 10372</u> <u>Des Moines, IA 50306-0372</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>dental plan</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>4,333.00</u>
3. <u>    </u>	Nonpriority creditor's name and mailing address <u>Aflac</u>  <u>Worldwide Headquarters</u> <u>Columbus, GA 31999</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>insurance</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>1,956.00</u>
3. <u>    </u>	Nonpriority creditor's name and mailing address <u>Harbor Building Maintenance</u>  <u>5011 Argosy Ave., Suite 11</u> <u>Huntington Beach, CA 92469</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>trade</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>2,700.00</u>
3. <u>    </u>	Nonpriority creditor's name and mailing address <u>Building Cleaning Services, Inc.</u>  <u>820 Thompson Ave., #26</u> <u>Glendale, CA 91201</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>trade</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>500.00</u>



**Part 2: Additional Page**

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Amount of claim

3.	Nonpriority creditor's name and mailing address M & M Financial Consulting Inc.  3947 N. Ashland Avenue Chicago, IL 60613  Date or dates debt was incurred _____ Last 4 digits of account number _____	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 <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: <u>prof services</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 6,600.00
3.	Nonpriority creditor's name and mailing address Penske Business Media LLC  11175 Santa Monica Blvd., 9th Floor Los Angeles, CA 90025  Date or dates 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 type="checkbox"/> Disputed  Basis for the claim: <u>trade</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,119.00
3.	Nonpriority creditor's name and mailing address Paul R. Torre, Law Offices of Paul Torre  5915 Ventura Blvd., Penthouse 2 Encino, CA 91436  Date or dates debt was incurred _____ Last 4 digits of account number _____	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  Basis for the claim: <u>atty for Noel Chi LP</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 0.00
3.	Nonpriority creditor's name and mailing address Universal Music Publishing Group  2100 Colorado Avenue Santa Monica, CA 90404  Date or dates debt was incurred _____ Last 4 digits of account number _____	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  Basis for the claim: <u>trade</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 10,000.00
3.	Nonpriority creditor's name and mailing address Rhino Entertainment Company  10585 Santa Monica Blvd. Los Angeles, CA 90025-4950  Date or dates debt was incurred _____ Last 4 digits of account number _____	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  Basis for the claim: <u>trade</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 10,000.00

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. <u>    </u>	Nonpriority creditor's name and mailing address <u>Mom &amp; Dad Productions, LIC</u>  <u>1121 Hilldale Avenue</u> <u>Los Angeles, CA 90069</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: <u>trade</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>0.00</u>
3. <u>    </u>	Nonpriority creditor's name and mailing address <u>Jason Yanuzzi</u>  <u>1757 N. Beverly Glen</u> <u>Bel Air, CA 90077</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>trade</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>12,000.00</u>
3. <u>    </u>	Nonpriority creditor's name and mailing address <u>Dan Kliman</u>  <u>6343 Warner Drive</u> <u>Los Angeles, CA 90048</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>trade</u>  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>7,092.00</u>
3. <u>    </u>	Nonpriority creditor's name and mailing address <u>Luis Antonio</u>  <u>6147 Serra Way</u> <u>Palmdale, CA 93552</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed  Basis for the claim: <u>trade</u>  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>6,657.00</u>
3. <u>    </u>	Nonpriority creditor's name and mailing address <u>Stimpert &amp; Ford, LLP (Daniel Stimpert)</u>  <u>8500 Wilshire Blvd., Suite 640</u> <u>Beverly Hills, CA 90211</u>  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>attny landlord</u>  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ <u>0.00</u>

Debtor

POST PRODUCTION, INC.  
Name

Main Document

Page 35 of 66

Case Number (if known)

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3. Nonpriority creditor's name and mailing address Russo Anastosio  4165 Dixie Canyon Avenue Sherman Oaks, CA 91423  Date or dates debt was incurred _____ Last 4 digits of account number _____	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 <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: <u>litigation claim</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 125,000.00
3. Nonpriority creditor's name and mailing address Vitac  8300 E. Maplewood Ave., #300 Greenwood Village, CO 80111  Date or dates 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 type="checkbox"/> Disputed  Basis for the claim: <u>trade</u>  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 500.00
3. Nonpriority creditor's name and mailing address Chase Bank - Line of Credit  PO Box 6026, Mailcode IL 1-0054 Chicago, IL 60680-6026  Date or dates debt was incurred _____ Last 4 digits of account number <u>8 0 0 2</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>line credit</u>  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 2,340.00
3. Nonpriority creditor's name and mailing address Chase Bank INK Visa Card  PO Box 659754 San Antonio, TX 78265-9754  Date or dates 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 type="checkbox"/> Disputed  Basis for the claim: <u>credit card</u>  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 10,000.00
3. Nonpriority creditor's name and mailing address Law Offices of Lee Sachs  324 South Beverly Drive, Suite 496 Beverly Hills, CA 90212  Date or dates 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 type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ 8,509.00

**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
4.1. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.2. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.3. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.5. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.6. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.7. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.8. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.9. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.10. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.11. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.12. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _

**Part 3:****Additional Page for Others to Be Notified About Unsecured Claims**

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
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4. _____ _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _

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

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

**Total of claim amounts**

5a. Total claims from Part 1

5a.

\$ 477,679.00

5b. Total claims from Part 2

5b.

+

\$ 527,682.00

5c. Total of Parts 1 and 2

5c.

\$ 1,005,361.00

Lines 5a + 5b = 5c.

Fill in this information to identify the case:

Debtor name POST PRODUCTION, INC.  
United States Bankruptcy Court for the CENTRAL District of CALIFORNI  
(State)  
Case number (if known): \_\_\_\_\_ Chapter 11

☐ 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, numbering the entries consecutively.

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

- ☐ No. Check this box and file this form with the court 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 contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

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

2.1	State what the contract or lease is for and the nature of the debtor's interest	Premises - 6860 Lexington Ave.	12304 Santa Monica Blvd., #304 Los Angeles, CA 90025
	State the term remaining	Los Angeles, CA 90038	
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest	Various Equipment Leases	Multi Parties
	State the term remaining		
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest	Premises - 3401 & 3405 1/2 Cahuenga Blvd., West	Noel Chi, LP c/o Shawn Sanbar 170 S. Flower St. Burbank, CA 91502
	State the term remaining	Los Angeles, CA 90068	
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.5	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		

Fill in this information to identify the case:

Debtor name POST PRODUCTION, INC.  
United States Bankruptcy Court for the: CENTRAL District of CALIFORNI  
(State)  
Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206H

**Schedule H: 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. Does the debtor 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 John Frost	6860 Lexington Ave. Street  Los Angeles CA 90038 City State ZIP Code	guarantees	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.2 Pat Bird	6860 Lexington Ave. Street  Los Angeles CA 90038 City State ZIP Code	guarantees	<input checked="" type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.3	_____ Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4	_____ Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5	_____ Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6	_____ Street _____ City State ZIP Code	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G



Fill in this information to identify the case and this filing:

Debtor Name \_\_\_\_\_

United States Bankruptcy Court for the \_\_\_\_\_ District of \_\_\_\_\_

Case number (if any): \_\_\_\_\_

## 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 06/18/2018  
MM/DD/YYYY

x   
Signature of individual signing on behalf of debtor

John Frost  
Printed name

Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor name POST PRODUCTION, INC.  
United States Bankruptcy Court for the: CENTRAL District of CALIFORNI  
(State)  
Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy** 04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that apply

Gross revenue  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date: From 1/1/2018 to Filing date  
MM / DD / YYYY

☒ Operating a business  
☐ Other to May 1, 2018 \$ 1,043,180.00

For prior year: From 1/1/2017 to 12/31/2017  
MM / DD / YYYY MM / DD / YYYY

☒ Operating a business  
☐ Other \$ 4,565,167.00

For the year before that: From 1/1/2016 to 12/31/2016  
MM / DD / YYYY MM / DD / YYYY

☒ Operating a business  
☐ Other \$ 3,521,014.00

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Description of sources of revenue

Gross revenue from each source  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date: From \_\_\_\_\_ to Filing date  
MM / DD / YYYY

\$ \_\_\_\_\_

For prior year: From \_\_\_\_\_ to \_\_\_\_\_  
MM / DD / YYYY MM / DD / YYYY

\$ \_\_\_\_\_

For the year before that: From \_\_\_\_\_ to \_\_\_\_\_  
MM / DD / YYYY MM / DD / YYYY

\$ \_\_\_\_\_

Debtor POST PRODUCTION, INC.  
Name

Case number (if known) \_\_\_\_\_

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. <u>see attached schedule</u> Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____  Relationship to debtor _____	_____	\$ _____	_____
4.2. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____  Relationship to debtor _____	_____	\$ _____	_____

Debtor POST PRODUCTION, INC.  
Name

Case number (if known) \_\_\_\_\_

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

	Creditor's name and address	Description of the property	Date	Value of property
5.1.	Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____
5.2.	Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	_____	\$ _____
Last 4 digits of account number: XXXX- _____			

**Part 3: Legal Actions or Assignments**

**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None

	Case title	Nature of case	Court or agency's name and address	Status of case
7.1.	Russo Anastasio v Sonic P	contract	Arbitration before ADRS - LA Name _____ Street _____ Los Angeles CA City _____ State _____ ZIP Code _____	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Noel Chi, LP v Post Producti	unlawful detainer	LA Superior Court Name _____ Stanley Mosk Street _____ 111 N. Hill St LA CA 90012 City _____ State _____ ZIP Code _____	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor POST PRODUCTION, INC.  
Name

Case number (if known) \_\_\_\_\_

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Custodian's name and address	Description of the property	Value
Custodian's name _____ Street _____ City _____ State _____ ZIP Code _____	Case title _____ Case number _____ Date of order or assignment _____	\$ _____ Court name and address _____ Name _____ Street _____ City _____ State _____ ZIP Code _____

**Part 4: Certain Gifts and Charitable Contributions**

**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name _____ Street _____ City _____ State _____ ZIP Code _____ Recipient's relationship to debtor _____	_____	_____	\$ _____
9.2. Recipient's name _____ Street _____ City _____ State _____ ZIP Code _____ Recipient's relationship to debtor _____	_____	_____	\$ _____

**Part 5: Certain Losses**

**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss <small>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).</small>	Date of loss	Value of property lost
_____	_____	_____	\$ _____

Debtor POST PRODUCTION, INC.  
Name

Case number (if known) \_\_\_\_\_

**Part 6: Certain Payments or Transfers**

**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<u>KOGAN LAW FIRM, APC</u>		<u>5/07/2018</u>	\$ <u>15,000.00</u>
	<b>Address</b>			
	<u>1849 Sawtelle Blvd., Suite 700</u>			
	Street			
	<u>Los Angeles</u>	<u>CA</u>	<u>90025</u>	
	City	State	ZIP Code	
	<b>Email or website address</b>			
	<u>mkogan@koganlawfirm.co</u>			
	<b>Who made the payment, if not debtor?</b>			
	_____			

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.	_____	_____	_____	\$ _____
	<b>Address</b>			
	_____			
	Street			
	_____			
	_____	_____	_____	
	City	State	ZIP Code	
	<b>Email or website address</b>			
	_____			
	<b>Who made the payment, if not debtor?</b>			
	_____			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
_____	_____	_____	\$ _____
<b>Trustee</b>	_____		
_____			

Debtor POST PRODUCTION, INC. Case number (if known) \_\_\_\_\_  
Name

### 13. Transfers not already listed on this statement

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

	Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1.	_____	_____	_____	\$ _____
	<b>Address</b> _____ Street _____ _____ City State ZIP Code <b>Relationship to debtor</b> _____			
13.2.	_____	_____	_____	\$ _____
	<b>Address</b> _____ Street _____ _____ City State ZIP Code <b>Relationship to debtor</b> _____			

### Part 7: Previous Locations

#### 14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

	Address	Dates of occupancy
14.1.	_____	From _____ To _____
	_____ Street _____ _____ City State ZIP Code	
14.2.	_____	From _____ To _____
	_____ Street _____ _____ City State ZIP Code	

Debtor POST PRODUCTION, INC.  
Name

Case number (if known) \_\_\_\_\_

**Part 8: Health Care Bankruptcies**

**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

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

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1 Facility name _____  Street _____  City _____ State _____ ZIP Code _____	_____  _____  Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. _____  _____	_____  _____  How are records kept?  Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper
15.2 Facility name _____  Street _____  City _____ State _____ ZIP Code _____	_____  _____  Location where patient records are maintained (if different from facility address). If electronic, identify any service provider. _____  _____	_____  _____  How are records kept?  Check all that apply: <input type="checkbox"/> Electronically <input type="checkbox"/> Paper

**Part 9: Personally Identifiable Information**

**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.  
☐ Yes. State the nature of the information collected and retained. \_\_\_\_\_  
Does the debtor have a privacy policy about that information?  
☐ No  
☐ Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.  
☐ Yes. Does the debtor serve as plan administrator?  
☐ No. Go to Part 10.  
☐ Yes. Fill in below:  
Name of plan \_\_\_\_\_

Employer identification number of the plan

EIN: \_\_\_\_\_ - \_\_\_\_\_

Has the plan been terminated?

- ☐ No  
☐ Yes



Debtor POST PRODUCTION, INC.  
Name

Case number (if known) \_\_\_\_\_

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**

**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-____-____-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2.	Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-____-____-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____  Address _____ _____ _____	m _____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____  Address _____ _____ _____	_____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor POST PRODUCTION, INC. Case number (if known) \_\_\_\_\_  
Name

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**

**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name			\$ _____
Street			
City State ZIP Code			

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

☒ No

☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name		<input type="checkbox"/> Pending
	Street		<input type="checkbox"/> On appeal
	City State ZIP Code		<input type="checkbox"/> Concluded

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

☒ No

☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

Debtor

POST PRODUCTION, INC.  
Name

Case number (if known)

## 24. Has the debtor notified any governmental unit of any release of hazardous material?

☒ No☐ Yes. Provide details below.

Site name and address

Governmental unit name and address

Environmental law, if known

Date of notice

Name

Name

Street

Street

City

State

ZIP Code

City

State

ZIP Code

## Part 13:

## Details About the Debtor's Business or Connections to Any Business

## 25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name and address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

EIN: \_\_\_\_\_

Dates business existed

From \_\_\_\_\_ To \_\_\_\_\_

25.1.

Name

Street

City

State

ZIP Code

Business name and address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

EIN: \_\_\_\_\_

Dates business existed

From \_\_\_\_\_ To \_\_\_\_\_

25.2.

Name

Street

City

State

ZIP Code

Business name and address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

EIN: \_\_\_\_\_

Dates business existed

From \_\_\_\_\_ To \_\_\_\_\_

25.3.

Name

Street

City

State

ZIP Code

Debtor POST PRODUCTION, INC. Case number (if known) \_\_\_\_\_  
Name

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address

Dates of service

From \_\_\_\_\_ To present

26a.1. TAGAWA & HO LLP  
Name  
6101 W. Centinela Ave. #280  
Street

Culver City, CA 90230

City State ZIP Code

Name and address

Dates of service

From \_\_\_\_\_ To \_\_\_\_\_

26a.2.

Name

Street

City State ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address

Dates of service

From \_\_\_\_\_ To present

26b.1. TAGAWA & HO LLP  
Name  
6101 W. Centinela Ave., #280  
Street

Culver City, CA 90230

City State ZIP Code

Name and address

Dates of service

From \_\_\_\_\_ To \_\_\_\_\_

26b.2.

Name

Street

City State ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address

If any books of account and records are  
unavailable, explain why

26c.1.

Name

Street

City State ZIP Code

Debtor POST PRODUCTION, INC. Case number (if known) \_\_\_\_\_  
Name

**Name and address**

If any books of account and records are  
unavailable, explain why

26c.2.

Name

Street

City

State

ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

**Name and address**

26d.1.

Name

Street

City

State

ZIP Code

**Name and address**

26d.2.

Name

Street

City

State

ZIP Code

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of  
inventory

The dollar amount and basis (cost, market, or  
other basis) of each inventory

\_\_\_\_\_ \$ \_\_\_\_\_

Name and address of the person who has possession of inventory records

27.1.

Name

Street

City

State

ZIP Code

Debtor POST PRODUCTION, INC. Case number (if known) \_\_\_\_\_  
Name

Name of the person who supervised the taking of the inventory

Date of  
inventory

The dollar amount and basis (cost, market, or  
other basis) of each inventory

\$ \_\_\_\_\_

Name and address of the person who has possession of inventory records

27.2

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
John Frost	6860 Lexington Ave., LA, CA 90038	President	50
Pat Bird	6860 Lexington Ave., LA, CA 90038	Secretary	50

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
			From _____ To _____
			From _____ To _____
			From _____ To _____
			From _____ To _____

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No

☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1 John Frost Name 6860 Lexington Ave., LA, CA 90038 Street  City State ZIP Code		year	compens/wage
Relationship to debtor President			

Debtor POST PRODUCTION, INC.  
Name

Case number of debtor

Name and address of recipient	year	comp/wages
30.2 <u>Pat Bird</u> Name <u>6860 Lexington Ave., LA, CA 90038</u> Street  City State ZIP Code		
Relationship to debtor		

31 Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No  
☐ Yes. Identify below.

Name of the parent corporation \_\_\_\_\_

Employer identification number of the parent corporation  
EIN: \_\_\_\_\_

32 Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No  
☐ Yes. Identify below.

Name of the pension fund \_\_\_\_\_

Employer identification number of the pension fund  
EIN: \_\_\_\_\_

**Part 14: Signature and Declaration**

**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.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

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

Executed on 05/28/2018  
MM / DD / YYYY

x 

Signature of individual signing on behalf of the debtor

Position or relationship to debtor President

Printed name John Frost

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No  
☒ Yes

United States Bankruptcy Court  
CENTRAL DISTRICT OF CALIFORNIA

In re POST PRODUCTION, INC.

Case No. \_\_\_\_\_

Debtor

Chapter 11

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR**

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

For legal services, I have agreed to accept ..... \$ 35,000.00

Prior to the filing of this statement I have received ..... \$ 15000

Balance Due ..... \$ 20000

2. The source of the compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☒ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

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

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;



- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

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

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/18/2018  
*Date*

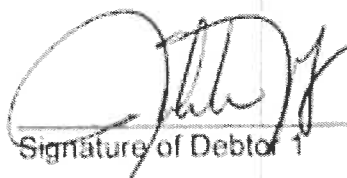
/s/Michael S. Kogan  
*Signature of Attorney*

Kogan Law Firm, APC  
*Name of law firm*

<p>Attorney or Party Name, Address, Telephone &amp; FAX Nos., State Bar No. &amp; Email Address</p> <p>Michael S. Kogan (SBN 128500) KOGAN LAW FIRM, APC 1849 Sawtelle Blvd., Suite 700 Los Angeles, California 90025 Telephone (310) 954-1690 mkogan@koganlawfirm.com</p> <p><input type="checkbox"/> Debtor(s) appearing without attorney <input checked="" type="checkbox"/> Attorney for Debtor</p>	<p>FOR COURT USE ONLY</p>
<p>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA - LOS ANGELES DIVISION</p>	
<p>In re: POST PRODUCTION, INC.</p> <p>Debtor(s)</p>	<p>CASE NO.: CHAPTER: 11</p> <p>VERIFICATION OF MASTER MAILING LIST OF CREDITORS [LBR 1007-1(a)]</p>

Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of \_\_\_ sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions.

Date: 06/18/2018

  
Signature of Debtor 1

Date: \_\_\_\_\_

Signature of Debtor 2 (joint debtor) (if applicable)

Date: \_\_\_\_\_

Signature of Attorney for Debtor (if applicable)

Post Production, Inc.  
6860 Lexington Ave.  
Los Angeles, CA 90038

Michael S. Kogan, Esq  
Kogan Law Firm, APC  
1849 Sawtelle Blvd.  
Suite 700  
Los Angeles, CA 90025

United States Trustee  
915 Wilshire Blvd.  
Suite 1850  
Los Angeles, CA 90017

Internal Revenue Service  
P.O. Box 7346  
Philadelphia, PA 19101

Franchise Tax Board  
Bankruptcy Section, MS:A-340  
P.O. Box 2952  
Sacramento, CA 95812-2952

Employment Development Department  
Bankruptcy Group MIC 92E  
P.O. Box 826880  
Sacramento, CA 94280-0001

State Board of Equalization  
Account Information Group, MIC:29  
P.O. Box 942879  
Sacramento, CA 94279-0029

CIT  
10201 Centurion Parkway N, #100  
Jacksonville, FL 32256

Western Equipment Finance  
P.O. Box 640  
530 Highway 2 West  
Devils Lake, ND 58301

Huntington Technology Finance  
P.O. Box 2743  
Bloomfield Hills, MI 48303-2017

Panasonic Finance Solutions  
PO Box 51657  
Los Angeles, CA 90051

De Lage Landen Financial Services, Inc.  
1111 Old Eagle School Road  
Wayne, PA 19087

Everbank Commercial Finance  
10 Waterview Blvd.  
Parsippany, NJ 07054

Bank of the West Equipment Finance  
P.O. Box 1767  
Pasadena, CA 91109-7167

Western Equipment Finance  
P.O. Box 640  
503 Highway 2 West  
Devils Lake, ND 58301

Unifi Equipment Finance  
3893 Research Park Drive  
Ann Arbor, MI 48108

Direct Capital Corp. (Apple)  
155 Commerce Way  
Portsmouth, NH 03801

Atlas Digital LLC (Noel Chi, L.P.)  
170 S. Flower Street  
Burbank, CA 91502

6850 Lexington Avenue  
12304 Santa Monica, Blvd., #304  
Los Angeles, CA 90025-2593

Wilcon  
624 S. Grand Avenue, Suite 2500  
Los Angeles, CA 90017

Wolf Internet Access  
800 Steward Street  
Seattle, WA 98101

Zayo Group, LLC  
1821 30<sup>th</sup> Street, Unit A  
Dallas, TX 75395-2136

LA Dept of Water & Power  
P.O. Box 515407  
Los Angeles, CA 90051-6707

TPX Communications  
3300 N. Cimarron Road  
Las Vegas, NY 89129

Blue Shield of California  
3021 Reynolds Ranch Parkway  
Lodi, CA 95240

Principal Financial Group  
P.O. Box 10372  
Des Moines, IA 50306-0372

Aflac  
Worldwide Headquarters  
Columbus, GA 31999

Harbor Building Maintenance  
5011 Argosy Ave., Suite 11  
Huntington Beach, CA 92469

Building Cleaning Services, Inc.  
820 Thompson Ave., #26  
Glendale, CA 91201

M & M Financial Consulting Inc.  
3927 N. Ashland Avenue  
Chicago, IL 60614

Penske Business Media LLC  
11175 Santa Monica Blvd., 9<sup>th</sup> Floor  
Los Angeles, CA 90025

Paul R. Torre  
Law Offices of Paul Torre  
5915 Ventura Blvd., Penthouse 2  
Encino, CA 91436

Universal Music Publishing Group  
2100 Colorado Avenue  
Santa Monica, CA 90404

Rhino Entertainment Company  
10585 Santa Monica Blvd.  
Los Angeles, CA 90025-4950

Mom & Dad Productions, LLC  
1121 Hilddale Avenue  
Los Angeles, CA 90069

Jason Yanuzzi  
1757 N. Beverly Glen  
Bel Air, CA 90077

Dan Kliman  
6343 Warner Drive  
Los Angeles, CA 90048

Luis Antonio  
6147 Serra Way  
Palmdale, CA 93552

Stimpert & Ford LLP (Daniel Stimpert)  
8500 Wilshire Blvd., Suite 640  
Beverly Hills, CA 90211

Russo Anastosio  
4165 Dixie Canyon Avenue  
Sherman Oaks, CA 91423

Vitac  
8300 E. Maplewood Ave., #300  
Greenwood Village, CO 80111

Chase Bank-Line of Credit  
P.O. Box 6026, Mailcode IL 1-0054  
Chicago, IL 60680-6026

Chase Bank INK Visa Card  
P.O. Box 659754  
San Antonio, TX 78265-9754

Law Offices of Lee Sachs  
324 South Beverly Drive, Suite 496  
Beverly Hills, CA 90212



UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA	
In re:  POST PRODUCTION, INC.  <div style="text-align: right;">Debtor(s).</div>	CASE NO.:  <div style="text-align: center;"><b>DEBTOR'S REQUEST TO <u>ACTIVATE</u> ELECTRONIC NOTICING (DeBN)</b></div>

Debtor Electronic Bankruptcy Noticing (DeBN) is a voluntary program that enables a debtor to receive by email the orders and court-generated notices normally sent by U.S. mail to a mailing address. **A debtor must complete and file this form with the court to activate a DeBN account. Joint debtors must each complete and file a separate form.**

ACTIVATION REQUEST	
<input checked="" type="checkbox"/> Pursuant to Federal Rule of Bankruptcy Procedure 9036, I request that the court deliver orders and court-generated notices to my email address rather than by U.S. mail to my mailing address.	
DEBTOR'S NAME AND EMAIL ADDRESS	
My name is: John Frost	
My email address is: (CAPITAL letters only)	F R O S T @ P O S T P R O D U C T I O N I N C . C O M
Confirm email address: (CAPITAL letters only)	F R O S T @ P O S T P R O D U C T I O N I N C . C O M
Select one:  <input type="checkbox"/> I am the Debtor in this bankruptcy case <input checked="" type="checkbox"/> The Debtor in this bankruptcy case is a corporation, partnership, or other legal entity, and I am the authorized representative	

DEBTOR'S SIGNATURE
<ol style="list-style-type: none"> <li>1. I understand that <b>my request is limited</b> to the email delivery of only orders and court-generated notices that are filed by the U.S. Bankruptcy Court. Documents filed by a bankruptcy trustee, creditors, and other parties that require service upon me must continue to be served by U.S. mail or in person as required by court rules.</li> <li>2. I understand that by requesting email notification, the court may establish my DeBN account and deliver to me, by email, documents filed by the court in <b>any current or future case</b> from any bankruptcy court in which I am listed with the same name and mailing address, including cases in which I am a creditor, plaintiff or defendant.</li> <li>3. I understand that I will be assigned a DeBN account number, and <b>my DeBN account will be activated only after I</b> <ol style="list-style-type: none"> <li>a. Complete, sign, and file this "Debtor's Request to Activate Electronic Noticing (DeBN)" form; and</li> <li>b. Verify that I received the confirmation email sent to my email address.</li> </ol> </li> <li>4. I understand that my DeBN account will be deactivated by the court if an email is returned undelivered or "bounced-back", and the court will instead deliver orders and court-generated notices by U.S. mail to my mailing address.</li> </ol> <p><i>I have read and understand the requirements set forth above and I agree to the terms and conditions of the Debtor Electronic Bankruptcy Noticing (DeBN) program. I request delivery of orders and court-generated notices to my email address indicated above rather than to my mailing address.</i></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;">Date: 06/18/2018</div> <div style="width: 60%;">           Signature  </div> </div>

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

Attorney or Party Name, Address, Telephone & FAX Numbers, and California State Bar Number <b>Michael S. Kogan (SBN 128500)</b> <b>KOGAN LAW FIRM, APC</b> 1849 Sawtelle Blvd., Suite 700 Los Angeles, California 90025 Telephone (310) 954-1690 mkogan@koganlawfirm.com <input checked="" type="checkbox"/> <b>Attorney for: Debtor</b>	FOR COURT USE ONLY
<b>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA</b>	
<b>In re:</b> <b>POST PRODUCTION, INC.,</b>  <b>Debtor(s).</b>	<b>CASE NO.</b> <b>CHAPTER: 11</b>

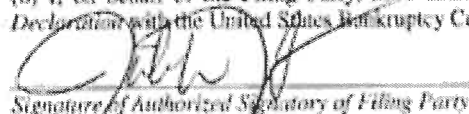
**ELECTRONIC FILING DECLARATION  
(CORPORATION/PARTNERSHIP)**

- ☒ Petition, statement of affairs, schedules or lists  
☒ Amendments to the petition, statement of affairs, schedules or lists  
☒ Other: Declarations in Support of Motions

Date Filed:  
 Dated Filed:  
 Date Filed: Various

**PART I — DECLARATION OF AUTHORIZED SIGNATORY OF DEBTOR OR OTHER PARTY**

I, the undersigned, hereby declare under penalty of perjury that: (1) I have been authorized by the Debtor or other party on whose behalf the above-referenced document is being filed (Filing Party) to sign and to file, on behalf of the Filing Party, the above-referenced document being filed electronically (Filed Document); (2) I have read and understand the Filed Document; (3) the information provided in the Filed Document is true, correct and complete; (4) the "I/s," followed by my name, on the signature lines for the Filing Party in the Filed Document serves as my signature on behalf of the Filing Party and denotes the making of such declarations, requests, statements, verifications and certifications by me and by the Filing Party to the same extent and effect as my actual signature on such signature lines; (5) I have actually signed a true and correct hard copy of the Filed Document in such places on behalf of the Filing Party and provided the executed hard copy of the Filed Document to the Filing Party's attorney; and (6) I, on behalf of the Filing Party, have authorized the Filing Party's attorney to file the electronic version of the Filed Document and this Declaration with the United States Bankruptcy Court for the Central District of California.

  
 Signature of Authorized Signatory of Filing Party

June 18, 2018  
 Date

**John Frost**  
 Printed Name of Authorized Signatory of Filing Party

**President**  
 Title of Authorized Signatory of Filing Party

**PART II — DECLARATION OF ATTORNEY FOR FILING PARTY**

I, the undersigned Attorney for the Filing Party, hereby declare under penalty of perjury that: (1) the "I/s," followed by my name, on the signature lines for the Attorney for the Filing Party in the Filed Document serves as my signature and denotes the making of such declarations, requests, statements, verifications and certifications to the same extent and effect as my actual signature on such signature lines; (2) an authorized signatory of the Filing Party signed the Declaration of Authorized Signatory of Debtor or Other Party before I electronically submitted the Filed Document for filing with the United States Bankruptcy Court for the Central District of California; (3) I have actually signed a true and correct hard copy of the Filed Document in the locations that are indicated by "I/s," followed by my name, and have obtained the signature of the authorized signatory of the Filing Party in the locations that are indicated by "V," followed by the name of the Filing Party's authorized signatory, on the true and correct hard copy of the Filed Document; (4) I shall maintain the executed originals of this Declaration, the Declaration of Authorized Signatory of Debtor or Other Party, and the Filed Document for a period of five years after the closing of the case in which they are filed; and (5) I shall make the executed originals of this Declaration, the Declaration of Authorized Signatory of Debtor or Other Party, and the Filed Document available for review upon request of the Court or other parties.

  
 Signature of Attorney for Filing Party

June 18, 2018  
 Date

**Michael S. Kogan (mkogan@koganlawfirm.com)**  
 Printed Name of Attorney for Filing Party