

Fill in this information to identify the case:

Debtor name Blue Collar Enterprises, LLC
United States Bankruptcy Court for the: WESTERN DISTRICT OF LOUISIANA
Case number (if known) 18-50447

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

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

Declaration and signature

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

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

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

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

Executed on April 11, 2018

X /s/ Stephen Santillo & Andre Rodrigue

Signature of individual signing on behalf of debtor

Stephen Santillo & Andre Rodrigue

Printed name

Member

Position or relationship to debtor

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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 claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Andre Rodrigue C/O Rodrigue Foundation 747 Magazine Street New Orleans, LA 70130		Loan in the amount of \$24,353.17 and deferred distributions in the amount of \$85,131.26				\$109,484.43
Capital City Produce Co., Inc. 16550 Commerical Drive Baton Rouge, LA 70816		Trade debt				\$13,673.70
Chase Bank PO BOX 6294 Carol Stream, IL 60197		Credit card purchases				\$36,121.84
Cintas 101 Venture Way Lafayette, LA 70507		Trade Debt				\$4,168.33
Doerle Food Services, LLC 113 Kol Drive Broussard, LA 70518		Trade debt				\$18,340.49
Donielle Watkins, CPA 113 Oil Center Drive Lafayette, LA 70503		Services				\$10,925.00
Durio, McGoffin, P.C. Attn: Buzz Durio Post Office Box 51308 Lafayette, LA 70505			Contingent Unliquidated Disputed			\$52,683.90

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
George Godfrey Rdorigue, Jr. Family Trust C/O Robert Rowe Law Corp 113 Oil Center Dr. Lafayette, LA 70503		The George Godfrey Rodrigue, Jr. Family Trust shares its claim in indivision with Wendy Rodrigue				\$209,689.04
GR Restaurants, LLC C/O Jacques Rodrigue 747 Magazine Street New Orleans, LA 70130		Loans/Services. \$100,000.00 loan; \$90,870.89 consulting agreement				\$190,870.89
Hilton's PO Drawer 60880 Lafayette, LA 70596		Trade debt				\$3,243.90
Lafayette Parish Tax Department 705 W University Ave Lafayette, LA 70506						\$8,545.00
Lamar PO BOX 96030 Baton Rouge, LA 70896		Services				\$16,775.00
Lamm Foods PO BOX 2957 Lafayette, LA 70502		Trade debt				\$6,484.02
Langlinas Baking Company 814 West Congress Street Lafayette, LA 70501		Trade debt				\$3,179.10
Louisiana Department of Revenue 617 North Third Street Baton Rouge, LA 70802						\$28,937.00
Neuner Pate Attn: Jeffrey K. Coreil One Petroleum Center 1001 West Pinhook Road, Ste 200 Lafayette, LA 70503						\$15,022.27
Republic National Distributing PO BOX 3587 Lafayette, LA 70502		Trade debt				\$3,513.92

Debtor **Blue Collar Enterprises, LLC**
 Name _____

Case number (if known) **18-50447**

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of 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
Steve Santillo 114 Emery Lane Carencro, LA 70520		Loan				\$39,788.98
Sysco Food Services PO BOX 10950 New Orleans, LA 70123		Trade debt				\$39,421.20
U.S. Small Business Administration 14925 Kingsport Road Fort Worth, TX 76155		Loan				\$193,670.00

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Case number (if known) 18-50447

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

12/15

Part 1: Summary of Assets

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

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$	<u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$	<u>37,700.84</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$	<u>37,700.84</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$	<u>97,762.65</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)		
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$	<u>37,482.00</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$	<u>1,013,038.29</u>
4. Total liabilities Lines 2 + 3a + 3b	\$	<u>1,148,282.94</u>

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Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

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

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

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

Part 1: Cash and cash equivalents

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

- No. Go to Part 2.
- Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest
\$2,030.00

2. **Cash on hand**

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
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3.1. IberiaBank Operating Account		\$0.00
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4. **Other cash equivalents (Identify all)**

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$2,030.00

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.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

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

11. **Accounts receivable**

Debtor Blue Collar Enterprises, LLC
Name

Case number (if known) 18-50447

11a. 90 days old or less: 5,100.84 - 0.00 = \$5,100.84
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$5,100.84

Part 4: Investments

13. Does the debtor own any investments?

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

Part 5: Inventory, excluding agriculture assets

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

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

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale				
22.	Other inventory or supplies				
	Food		\$15,443.44	N/A	Unknown
	Liquor		\$18,618.55	N/A	Unknown

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$0.00

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 0 Valuation method Current Value 0

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.

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

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 Copier	\$0.00	Liquidation	\$150.00
	Leasehold Improvements	\$0.00	Tax records	\$0.00
	Security Cameras	\$0.00	Liquidation	\$900.00
	Cooler Refurbish	\$0.00	Tax records	\$0.00
	Baby Changing Table	\$0.00	Liquidation	\$100.00
	44 Dining Room Tables, 208 chairs, patio furniture, sofa, benches, and merchandize cabinets	\$0.00	Liquidation	\$9,470.00
	Fryer Machine	\$0.00		\$250.00
	Hot water heter	Unknown	Liquidation	\$4,000.00
	Office furniture	\$0.00		\$250.00
	2 Blodgett Ovens, Serial #0919127A015B and #091912YA013T	Unknown		\$0.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software Resgister System for Restaurant, located at Restaurant	\$0.00	Liquidation	\$400.00
	2 copiers	\$0.00	Liquidation	\$350.00
	4 Computers	\$0.00	Liquidation	\$1,600.00
	Safe	\$0.00	Liquidation	\$200.00
	Aloha POS System	\$0.00	Liquidation	\$2,500.00

Debtor Blue Collar Enterprises, LLC
Name

Case number (if known) 18-50447

Sound System \$0.00 Liquidation \$800.00

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

43. **Total of Part 7.** \$20,970.00
Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**
 No
 Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**
 No
 Yes

Part 8: Machinery, equipment, and vehicles

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

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

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) <u>Freezer Compressor, fryer grills, & burners</u>	<u>\$0.00</u>	<u>N/A</u>	<u>\$4,700.00</u>
Miscellaneous items (Coat hooks, popcorn machine, light fixtures, etc)	<u>\$0.00</u>	<u>Liquidation</u>	<u>\$100.00</u>
Kitchen Equipment and stainless tables/shelves	<u>\$0.00</u>	<u>Liquidation</u>	<u>\$2,300.00</u>

51. **Total of Part 8.** \$7,100.00
Add lines 47 through 50. Copy the total to line 87.

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

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

Debtor Blue Collar Enterprises, LLC
Name

Case number (if known) 18-50447

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. 55.1.	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
Restaurant	Lease	\$0.00		\$0.00

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 Menu	Unknown		Unknown
61. Internet domain names and websites Website	Unknown		Unknown
62. Licenses, franchises, and royalties Licensing Agreement with the George Godfrey Rodrigue, Jr. Family Trust and Wendy Rodrigue to place Artwork into Restaurant	Unknown		Unknown

Debtor Blue Collar Enterprises, LLC
Name

Case number (if known) 18-50447

**Licensing Agreement with the the George
Godfrey Rodrigue, Jr. Family Trust and Wendy
Rodrigue in connection with Blue Dog
Trademark**

Unknown

Unknown

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

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)

72. **Tax refunds and unused net operating losses (NOLs)**
Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

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

Lawsuits against Suzanne Santillo, and Stephen Santillo

Unknown

Nature of claim breach of contract, breach of
fiduciary duty, Unjust Enrich,
Fraudulent Transfers

Amount requested \$0.00

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

Debtor Blue Collar Enterprises, LLC
Name

Case number (if known) 18-50447

**Claims against Stephen Santillo, APLC, Suzanne Savoy
Santillo, LLC, Andre Rodrigue**

Unknown

Nature of claim _____
Amount requested \$0.00

76. **Trusts, equitable or future interests in property**

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

Electrical Work \$0.00

Misc., plates, utensils, wares and small appliances \$2,500.00

78. **Total of Part 11.**

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

\$2,500.00

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

- No
 Yes

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

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>	\$2,030.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$5,100.84	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$20,970.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$7,100.00	
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>	+ \$2,500.00	
91. Total. Add lines 80 through 90 for each column	\$37,700.84	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$37,700.84

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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

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

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

Part 1: List Creditors Who Have Secured Claims

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

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	
\$42,762.65	\$0.00

2.1 Farmers Merchants Bank & Trust
 Creditor's Name
 100 South Main Street
 Breaux Bridge, LA 70517
 Creditor's mailing address
 Creditor's email address, if known
 Date debt was incurred
 Last 4 digits of account number
 Do multiple creditors have an interest in the same property?
 No
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien
2 Blodgett Ovens, Serial #0919127A015B and #091912YA013T, accounts and personal property
 Describe the lien
Security Agreement/UCC
 Is the creditor an insider or related party?
 No
 Yes
 Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)
 As of the petition filing date, the claim is:
 Check all that apply
 Contingent
 Unliquidated
 Disputed

2.2 GR Restaurants, LLC
 Creditor's Name
 C/O Jacques Rodrigue
 747 Magazine Street
 New Orleans, LA 70130
 Creditor's mailing address
 Creditor's email address, if known
 Date debt was incurred
 Last 4 digits of account number
 Do multiple creditors have an interest in the same property?

Describe debtor's property that is subject to a lien
fixtures, equipment, personal property, accounts
 Describe the lien
Security Agreement/UCC
 Is the creditor an insider or related party?
 No
 Yes
 Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)
 As of the petition filing date, the claim is:
 Check all that apply

\$55,000.00	Unknown
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Debtor Blue Collar Enterprises, LLC
Name

Case number (if know) 18-50447

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

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. \$97,762.65

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

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

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

Name and address

On which line in Part 1 did
you enter the related creditor?

Last 4 digits of
account number for
this entity

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 United States Bankruptcy Court for the: WESTERN DISTRICT OF LOUISIANA
 Case number (if known) 18-50447

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Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

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

Part 1: List All Creditors with PRIORITY Unsecured Claims

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

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

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

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address IRS Centralized Insolvency Operation PO BOX 7317 Philadelphia, PA 19101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$0.00</u>	<u>\$0.00</u>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Lafayette Parish Tax Department 705 W University Ave Lafayette, LA 70506	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<u>\$8,545.00</u>	<u>\$8,545.00</u>
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

2.3	Priority creditor's name and mailing address Louisiana Department of Revenue 617 North Third Street Baton Rouge, LA 70802	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	\$28,937.00	\$28,937.00
Date or dates debt was incurred _____		Basis for the claim: _____		
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8) _____				

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

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

			Amount of claim
3.1	Nonpriority creditor's name and mailing address Acadiana Restaurant Supply, LLC 1428 Eraste Landry Road Lafayette, LA 70506	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,175.48
Date(s) debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address Alliance Electrical Services Inc 1008 Homestead Ave. Metairie, LA 70005	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,069.80
Date(s) debt was incurred _____		Basis for the claim: <u>Services</u>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.3	Nonpriority creditor's name and mailing address Andre Rodrigue C/O Rodrigue Foundation 747 Magazine Street New Orleans, LA 70130	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	\$109,484.43
Date(s) debt was incurred _____		Basis for the claim: <u>Loan in the amount of \$24,353.17 and deferred distributions in the amount of \$85,131.26</u>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.4	Nonpriority creditor's name and mailing address ASCAP 21678 Network Place Chicago, IL 60673	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	\$804.73
Date(s) debt was incurred _____		Basis for the claim: <u>Services</u>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.5	Nonpriority creditor's name and mailing address AT&T Mobility P.O. Box 650584 Dallas, TX 75265	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	\$347.79
Date(s) debt was incurred _____		Basis for the claim: <u>Trade debt</u>	
Last 4 digits of account number _____		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

3.6	Nonpriority creditor's name and mailing address Atmos Energy P.O. Box 790311 Saint Louis, MO 63179 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,835.69
3.7	Nonpriority creditor's name and mailing address Auto Chlor Auto Chlor Department #205 P.O. Box 4869 Houston, TX 77210 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$841.04
3.8	Nonpriority creditor's name and mailing address Bon Temps P.O. Box 52725 Lafayette, LA 70505 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$496.00
3.9	Nonpriority creditor's name and mailing address Capital City Produce Co., Inc. 16550 Commerical Drive Baton Rouge, LA 70816 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,673.70
3.10	Nonpriority creditor's name and mailing address Carbon Golden Malt PO Box 129 Concordville, PA 19331 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$691.92
3.11	Nonpriority creditor's name and mailing address Certified Folder Display 1324 Danville Street Unit A Kenner, LA 70062 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$658.71
3.12	Nonpriority creditor's name and mailing address Certified Web 5940 S Rainbow Blvd Ste. 400 #36968 Las Vegas, NV 89118 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$180.00

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

3.13	Nonpriority creditor's name and mailing address Champagne Market 454 Heymann Blvd. Lafayette, LA 70503 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,900.90
3.14	Nonpriority creditor's name and mailing address Charlie's Refrigeration, LLC PO BOX 60 Leonville Leonville, LA 70551 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,967.34
3.15	Nonpriority creditor's name and mailing address Chase Bank PO BOX 6294 Carol Stream, IL 60197 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Credit card purchases Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,121.84
3.16	Nonpriority creditor's name and mailing address Cintas 101 Venture Way Lafayette, LA 70507 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,168.33
3.17	Nonpriority creditor's name and mailing address Coca Cola Attn: Accounts Receivables PO BOX 105637 Drawer 2260 Atlanta, GA 30348 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,782.85
3.18	Nonpriority creditor's name and mailing address Coffee News Brandi Parfait PO BOX 82434 Lafayette, LA 70598 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.19	Nonpriority creditor's name and mailing address Community Coffee PO BOX 919149 Dallas, TX 75391 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,791.78

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

3.20	Nonpriority creditor's name and mailing address Computer World PO BOX 490 Scott, LA 70583 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,175.90
3.21	Nonpriority creditor's name and mailing address Cox Communications PO BOX 919243 Dallas, TX 75391 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$505.96
3.22	Nonpriority creditor's name and mailing address Credeur's Specialities 1238 Creswell Lane Opelousas, LA 70570 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$815.25
3.23	Nonpriority creditor's name and mailing address Crescent Crown Distributors PO Box 3970 Lafayette, LA 70501 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$365.50
3.24	Nonpriority creditor's name and mailing address Dixie Hood Kleeners PO BOX 272 Carencro, LA 70520 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$600.00
3.25	Nonpriority creditor's name and mailing address Doerle Food Services, LLC 113 Kol Drive Broussard, LA 70518 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,340.49
3.26	Nonpriority creditor's name and mailing address Donielle Watkins, CPA 113 Oil Center Drive Lafayette, LA 70503 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,925.00

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

3.27	Nonpriority creditor's name and mailing address DPE Inc 502 Dafney Drive Lafayette, LA 70503 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$625.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	Nonpriority creditor's name and mailing address Durio, McGoffin, P.C. Attn: Buzz Durio Post Office Box 51308 Lafayette, LA 70505 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$52,683.90 <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29	Nonpriority creditor's name and mailing address Eco Lab PO BOX 70343 Chicago, IL 60673 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,166.42 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30	Nonpriority creditor's name and mailing address First Insurance Funding Corp. PO BOX 700 Carol Stream, IL 60197 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31	Nonpriority creditor's name and mailing address George Godfrey Rdorigue, Jr. Family Trust C/O Robert Rowe Law Corp 113 Oil Center Dr. Lafayette, LA 70503 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$209,689.04 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: The George Godfrey Rodrigue, Jr. Family Trust shares its claim in indivision with Wendy Rodrigue Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32	Nonpriority creditor's name and mailing address Glazer Companies of Louisiana 939 West Pont des Mouton Lafayette, LA 70507 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$708.39 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.33	Nonpriority creditor's name and mailing address Go To My PC Legal Department 320 Summer Street Boston, MA 02210 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Blue Collar Enterprises, LLC**

Case number (if known) **18-50447**

Name

3.34	Nonpriority creditor's name and mailing address GR Restaurants, LLC C/O Jacques Rodrigue 747 Magazine Street New Orleans, LA 70130 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Loans/Services. \$100,000.00 loan; \$90,870.89 consulting agreement Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$190,870.89
3.35	Nonpriority creditor's name and mailing address Hamco PO BOX 23284 New Orleans, LA 70183 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$319.74
3.36	Nonpriority creditor's name and mailing address Hilton's PO Drawer 60880 Lafayette, LA 70596 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,243.90
3.37	Nonpriority creditor's name and mailing address IND Monthly PO BOX 52725 Lafayette, LA 70505 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$396.00
3.38	Nonpriority creditor's name and mailing address Inland Seafood PO BOX 93040 Atlanta, GA 30377 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,673.89
3.39	Nonpriority creditor's name and mailing address Lamar PO BOX 96030 Baton Rouge, LA 70896 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,775.00
3.40	Nonpriority creditor's name and mailing address Lamm Foods PO BOX 2957 Lafayette, LA 70502 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,484.02

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

3.41	Nonpriority creditor's name and mailing address Landry Harris & Co. C/O Frankie P. Harris, CIC 600 Jefferson Street Suite 200 Lafayette, LA 70501 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.42	Nonpriority creditor's name and mailing address Langlinas Baking Company 814 West Congress Street Lafayette, LA 70501 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,179.10</u>
3.43	Nonpriority creditor's name and mailing address Lowe's Companies, Inc. Lowe's Credit Services PO BOX 530954 Atlanta, GA 30353 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,579.16</u>
3.44	Nonpriority creditor's name and mailing address Meaders 602 SW Evangeline Thurway Lafayette, LA 70501 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,153.30</u>
3.45	Nonpriority creditor's name and mailing address Melancon I-49 Storage Center 3360 NE Evangeline Trwy Lafayette, LA 70507 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Storage of old scrap equipment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.46	Nonpriority creditor's name and mailing address Mr. Rooter Plumbing 736 Albertson Pkwy, Suite B Broussard, LA 70518 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$225.00</u>
3.47	Nonpriority creditor's name and mailing address Neuner Pate Attn: Jeffrey K. Coreil One Petroleum Center 1001 West Pinhook Road, Ste 200 Lafayette, LA 70503 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$15,022.27</u>

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

3.48	Nonpriority creditor's name and mailing address Nicholson Land Co. PO BOX 1214 Sunset, LA 70584 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Storage of old equipment and scrap Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.49	Nonpriority creditor's name and mailing address NuCo2, LLC PO BOX 9011 Fort Pierce, FL 34950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$323.02
3.50	Nonpriority creditor's name and mailing address One Acadiana PO BOX 51307 Lafayette, LA 70505 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00
3.51	Nonpriority creditor's name and mailing address Party Central 408 Maurice Street Lafayette, LA 70506 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$377.23
3.52	Nonpriority creditor's name and mailing address Perrone & Sons 1801 L and A Road Metairie, LA 70001 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,078.27
3.53	Nonpriority creditor's name and mailing address Premier Foods, LLC PO BOX 1304 Youngsville, LA 70592 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,410.00
3.54	Nonpriority creditor's name and mailing address R.L. Schreiber, Inc. PO BOX 95000-5970 Philadelphia, PA 19195 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,112.15

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

3.55	Nonpriority creditor's name and mailing address Red Book Solutions 4550 S. Windemere Street Englewood, CO 80110 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$398.85
3.56	Nonpriority creditor's name and mailing address Republic National Distributing PO BOX 3587 Lafayette, LA 70502 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,513.92
3.57	Nonpriority creditor's name and mailing address Retailers Casualty Insurance Co. PO BOX 32034 Lakeland, FL 33802 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,227.58
3.58	Nonpriority creditor's name and mailing address Schedulefly, Inc. 6005 Valencia Court Raleigh, NC 27614 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.59	Nonpriority creditor's name and mailing address Sherwin Williams Accounts Receivable Dept 215 Easte Kaliste Saloom Road Lafayette, LA 70508 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$502.73
3.60	Nonpriority creditor's name and mailing address Southern Oil Solutions, LLC 207 Gatesmere Court Lafayette, LA 70508 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
3.61	Nonpriority creditor's name and mailing address Steve Santillo 114 Emery Lane Carencro, LA 70520 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Loan Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39,788.98

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

3.62	Nonpriority creditor's name and mailing address Suzanne Savoy Santillo 1045 Kidder Road Carencro, LA 70520 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<u>Unknown</u>
3.63	Nonpriority creditor's name and mailing address Suzanne Savoy Santillo, LLC C/O Stephen C. Carleton Carleton, Hebert & Wittenbrink 445 North Blvd. #625 Baton Rouge, LA 70802 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	<u>Unknown</u>
3.64	Nonpriority creditor's name and mailing address Sysco Food Services PO BOX 10950 New Orleans, LA 70123 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$39,421.20</u>
3.65	Nonpriority creditor's name and mailing address Teche Electric PO BOX 61725 Lafayette, LA 70596 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$625.16</u>
3.66	Nonpriority creditor's name and mailing address Tremar Foods 919 Emar Drive Church Point, LA 70525 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,373.75</u>
3.67	Nonpriority creditor's name and mailing address U.S. Small Business Administration 14925 Kingsport Road Fort Worth, TX 76155 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$193,670.00</u>
3.68	Nonpriority creditor's name and mailing address Wendy Rodrigue C/O Robert Rowe Law Group 113 Oil Center Dr. Lafayette, LA 70503 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ms. Rodrigue shares the claim of the George Godfrey Rodrigue, Jr. Family Trust in indivision</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>

Debtor **Blue Collar Enterprises, LLC**
Name

Case number (if known) **18-50447**

3.69 Nonpriority creditor's name and mailing address
Yelp Inc.
140 New Montgomery Street
San Francisco, CA 94105
Date(s) debt was incurred __
Last 4 digits of account number __

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

Unknown

3.70 Nonpriority creditor's name and mailing address
Zen Reach
Building C, P500
1 Letterman Dr.
San Francisco, CA 94129
Date(s) debt was incurred __
Last 4 digits of account number __

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

Unknown

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 Wendy Rodrigue C/O Robert Rowe Law Group 113 Oil Center Dr. Lafayette, LA 70503	Line 3.31 <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.

5a. Total claims from Part 1
5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 37,482.00
5b. +	\$ 1,013,038.29
5c.	\$ 1,050,520.29

Fill in this information to identify the case:

Debtor name Blue Collar Enterprises, LLC
United States Bankruptcy Court for the: WESTERN DISTRICT OF LOUISIANA
Case number (if known) 18-50447

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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

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

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

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

2. List all contracts and unexpired leases

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

- | | | | |
|-------|---|---|--|
| 2.1. | State what the contract or lease is for and the nature of the debtor's interest | \$11,000/month to lease space for Blue Dog Cafe | |
| | State the term remaining | | |
| | List the contract number of any government contract | | Danton Corporation
165 Industrial Parkway
Lafayette, LA 70508 |
| <hr/> | | | |
| 2.2. | State what the contract or lease is for and the nature of the debtor's interest | Licensing Agreement with BCE to use Blue Dog Trademark | |
| | State the term remaining | Month to Month | |
| | List the contract number of any government contract | | George Godfrey Rodrigue, Jr.
Family Trust & Wendy Rodrigue
C/O Robert Rowe Law Corp
Lafayette, LA 70503 |
| <hr/> | | | |
| 2.3. | State what the contract or lease is for and the nature of the debtor's interest | Contract for use of art in restaurant | |
| | State the term remaining | | |
| | List the contract number of any government contract | | GR Restaurants, LLC
C/O Jacques Rodrigue
747 Magazine Street
New Orleans, LA 70130 |
| <hr/> | | | |
| 2.4. | State what the contract or lease is for and the nature of the debtor's interest | Contract with GRR Restaurants for use of art in Restaurant | |
| | State the term remaining | | |
| | List the contract number of any government contract | | Rodrigue Studios, LLC
C/O Rob Rowe
113 Oil Center Dr.
Lafayette, LA 70503 |

Fill in this information to identify the case:

Debtor name Blue Collar Enterprises, LLC

United States Bankruptcy Court for the: WESTERN DISTRICT OF LOUISIANA

Case number (if known) 18-50447

Check if this is an amended filing

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

12/15

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

1. Do you have any codebtors?

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

Yes

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

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	<i>Check all schedules that apply:</i>
2.1 Steve Santillo	114 Emery Lane Carencro, LA 70520	U.S. Small Business	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.67</u> <input type="checkbox"/> G _____