

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF NEVADA

Case number *(if known)* _____ Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

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 case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Starving Students of Nevada LLC

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

3. Debtor's federal Employer Identification Number (EIN) 46-3544266

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>2655 Rainbow Blvd., Ste. 110</u> <u>Las Vegas, NV 89146</u> Number, Street, City, State & ZIP Code <u>Clark</u> County	_____ P.O. Box, Number, Street, City, State & ZIP Code Location of principal assets, if different from principal place of business _____ Number, Street, City, State & ZIP Code

5. Debtor's website (URL) _____

6. Type of debtor

Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))

Partnership (excluding LLP)

Other. Specify: _____

Debtor Starving Students of Nevada LLC
Name

Case number (if known) _____

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.uscourts.gov/four-digit-national-association-naics-codes>.

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.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

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

- No
- Yes.

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

Debtor <u>Starving Students, Inc.</u>	Relationship <u>100% owner</u>
District <u>Nevada</u>	When <u>2/29/2016</u>
	Case number, if known <u>16-10936-MKN</u>

Debtor **Starving Students of Nevada LLC**
 Name _____

Case number (if known) _____

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 to unsecured creditors.

14. Estimated number of creditors

<input 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"/> 5001-10,000	<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 checked="" type="checkbox"/> 200-999		

15. Estimated Assets

<input checked="" type="checkbox"/> \$0 - \$50,000	<input 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

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

Debtor **Starving Students of Nevada LLC**
Name

Case number (if known)

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

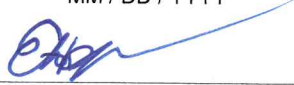
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

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 **June 8, 2016**
MM / DD / YYYY

X 
Signature of authorized representative of debtor

Ethan Margalith
Printed name

Title **Sole member of Starving Students, Inc., Debtor's managing member**

18. Signature of attorney **X** 
Signature of attorney for debtor

Date **June 8, 2016**
MM / DD / YYYY

Mark M. Weisenmiller, Esq.
Printed name

Garman Turner Gordon LLP
Firm name

650 White Drive, Ste. 100
Las Vegas, NV 89119
Number, Street, City, State & ZIP Code

Contact phone **(725) 777-3000** Email address **mweisenmiller@gtg.legal**

12128
Bar number and State

Fill in this information to identify the case:

Debtor name Starving Students of Nevada LLC

United States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

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

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

Declaration and signature


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

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

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

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

Executed on June 8, 2016

X 
Signature of individual signing on behalf of debtor

Ethan Margalith
Printed name

Sole member of Starving Students, Inc., Debtor's managing member
Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **Starving Students of Nevada LLC**
 United States Bankruptcy Court for the: **DISTRICT OF NEVADA**
 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 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
Altus GTS Inc. PO Box 1389 Kenner, LA 70063		Service	Unliquidated			\$58,718.34
CDS Moving Equipment 375 Manville Street Compton, CA 90220		Service and Supplies	Unliquidated			\$508,809.00
Char EM LLC 83 Wexford Way Basking Ridge, NJ 07920		Service	Disputed			\$32,063.30
Flyers Energy, LLC PO Box 479 Bloomington, CA 92316		Service	Unliquidated			\$102,491.69
Gittler & Bradford Trust Account 10537 Santa Monica Blvd 3/F Los Angeles, CA 90025-4952		Service	Unliquidated			\$66,392.24
Google, Inc. Dept. 33854 PO Box 38000 San Francisco, CA		Service	Unliquidated			\$261,092.99
Gursey Schneider LLP 1888 Century Park East Suite 900 Los Angeles, CA 90067-1735		Accounting Services	Unliquidated			\$79,105.02
HOLTHOUSE CARLIN AND VAN TRIGT LLP 350 W COLORADO 5TH Pasadena, CA 91105		Accounting Services	Unliquidated			\$37,424.24

Debtor **Starving Students of Nevada LLC**
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 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
IRS		Taxes				\$1,200,000.00
LNEW & B LAW OFFICES 10250 CONSTELLATION BLVD. SUITE 1700 Los Angeles, CA 90067		Service	Unliquidated			\$32,241.80
NAVISTAR FINANCIAL CORP P.O. BOX 96070 Chicago, IL 60693-6070		Loan	Unliquidated Disputed			\$53,000.00
New Hampshire Insurance Company 175 WATER ST FL 18 New York, NY 10038-4976		Service	Unliquidated			\$47,000.00
Nextel Communications PO Box 4161 Carol Stream, IL 60197-4181		Service	Unliquidated			\$95,219.74
Sandra Kuhn McCormack 330 Once Center Court, Sulle C Bakersfield, CA 93309		Service	Unliquidated			\$47,855.58
Squire Sanders (US) LLP 555 SOUTH FLOWER STREET 31ST FLOOR Los Angeles, CA 90071		Service	Unliquidated			\$56,661.80
SUPERMEDIA LLC PO BOX 619009 Dallas, TX 75261-8009		Service	Unliquidated			\$38,957.46
TBF Financial		Service	Unliquidated			\$46,801.08
Valley Yellowpages DEPT. 33302 P. O. BOX 39000 San Francisco, CA 94139-3302		Service	Unliquidated			\$66,392.24

Debtor **Starving Students of Nevada LLC**
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 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
VANLINER INSURANCE COMPANY PO Box 956586 Saint Louis, MO 63195-6586		Service	Unliquidated Disputed			\$40,969.06
ZURICH DEDUCTIBLE RECOVERY GROUP PO BOX 8066-11 Hermitage, PA 16148-1066		Service	Unliquidated			\$37,064.00

Fill in this information to identify the case:

Debtor name Starving Students of Nevada LLC

United States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

Check if this is an amended filing

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

12/15

Part 1: Summary of Assets

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

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>5,656.98</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>5,656.98</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>0.00</u>
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ <u>1,201,503.07</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>2,717,133.35</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>3,918,636.42</u>

Fill in this information to identify the case:

Debtor name Starving Students of Nevada LLC

United States Bankruptcy Court for the: DISTRICT OF NEVADA

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

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

3.1. Wells Fargo Checking account ending 1192 1192 \$210.68

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.

\$210.68

Part 2: Deposits and Prepayments**6. Does the debtor have any deposits or prepayments?**

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

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. Lease for premises at 2625-2685 S. Rainbow Blvd., Las Vegas, NV 89146 \$2,946.30

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$2,946.30

Part 3: Accounts receivable

Debtor Starving Students of Nevada LLC
Name

Case number (If known) _____

10. Does the debtor have any accounts receivable?

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

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.

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

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

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

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

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 Office goods and computer			\$1,500.00
Warehouse goods			\$1,000.00

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

43. **Total of Part 7.**
Add lines 39 through 42. Copy the total to line 86. \$2,500.00

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

Debtor Starving Students of Nevada LLC
Name

Case number (If known) _____

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

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

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. Debtor leases the premises located at 2625-2685 S. Rainbow Blvd., Las Vegas, Nevada 89146	Lessee			\$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.

<u>\$0.00</u>

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.

Part 11: All other assets

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

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

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

Debtor Starving Students of Nevada LLC
Name

Case number (if known) _____

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>	<u>\$210.68</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$2,946.30</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$2,500.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$5,656.98</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$5,656.98</u>

Fill in this information to identify the case:

Debtor name Starving Students of Nevada LLC

United States Bankruptcy Court for the: DISTRICT OF NEVADA

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.

Fill in this information to identify the case:

Debtor name Starving Students of Nevada LLC

United States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

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

Part 1: List All Creditors with PRIORITY Unsecured Claims

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

No. Go to Part 2.

Yes. Go to line 2.

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

		Total claim	Priority amount	
2.1	Priority creditor's name and mailing address IRS 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) (8)	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: Taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,200,000.00	\$1,200,000.00
2.2	Priority creditor's name and mailing address Seattle Municipal Court 600 Fifth Avenue Seattle, WA 98104 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) (8)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$156.00	\$156.00

Debtor Name	Case number (if known)		
Starving Students of Nevada LLC <small>Name</small>			
2.3 Priority creditor's name and mailing address State of Nevada Dept. of Motor Vehicles 555 Wright Way Carson City, NV 89711	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$456.00	\$456.00
Date or dates debt was incurred	Basis for the claim: Service		
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		
2.4 Priority creditor's name and mailing address State of Texas Corporations Section PO Box 13697 Austin, TX 78711-3697	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$27.00	\$27.00
Date or dates debt was incurred	Basis for the claim: Service		
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		
2.5 Priority creditor's name and mailing address Superior Court of CA-NE District Alhambra Courthouse 150 West Commonwealth Ave. Alhambra, CA 91801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$20.00	\$20.00
Date or dates debt was incurred	Basis for the claim: Service		
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		
2.6 Priority creditor's name and mailing address The City of San Diego Public Utilities Department PO Box 129020 San Diego, CA 92112	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$127.85	\$127.85
Date or dates debt was incurred	Basis for the claim: Service		
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	Starving Students of Nevada LLC <small>Name</small>	Case number (if known)	
2.7	Priority creditor's name and mailing address Utah State Tax Commission-DMV Division of Motor Vehicles 8800 Motor Vehicle Division Salt Lake City, UT 84134-6800	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$716.22 \$716.22
	Date or dates debt was incurred _____	Basis for the claim: Service	
	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 1-800-PACK-RAT, LLC c/o Todd A. Brisco, Esq. 1900 South State College Blvd, Suite 275 Anaheim, CA 92806	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown
	Date(s) debt was incurred _____	Basis for the claim: Notice Only	
	Last 4 digits of account number 2580	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

			Unknown
3.2	Nonpriority creditor's name and mailing address 24 Seven Staffing, Inc. c/o William A. Brown, Jr., Esq. Law Office of William A. Brown, Jr. 865 South Figueroa Street Suite 2640 Los Angeles, CA 90017	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	
	Date(s) debt was incurred _____	Basis for the claim: Notice Only	
	Last 4 digits of account number 4581	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

			\$22,657.50
3.3	Nonpriority creditor's name and mailing address 24 Seven Staffing, Inc. 120 Wooster Street 4th Floor New York, NY 10012	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Service	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

			Unknown
3.4	Nonpriority creditor's name and mailing address 2501 S. 12th Street, LLC PO Box 5911 Tacoma, WA 98415	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	
	Date(s) debt was incurred _____	Basis for the claim: Rent	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

			\$29,265.02
3.5	Nonpriority creditor's name and mailing address 2650 Poplar Associates 2200 Adeline Street #350 Oakland, CA 94607	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
	Date(s) debt was incurred _____	Basis for the claim: Service	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.6	Nonpriority creditor's name and mailing address 3rd and Vine, LLC 32823 Temecula Parkway Temecula, CA 92592 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> \$10,000.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address 950 S&E LLC 950 N. Tustin Ave. Anaheim, CA 92807 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,528.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address A Thread Ahead PO Box 889 San Fernando, CA 91341 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,382.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address A&W Service, Inc. PO Box 161755 Fort Worth, TX 76161 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> \$291.72 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address AAA Fire and Safety, Inc. 3013 Third Avenue North Seattle, WA 98109-1602 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> \$186.18 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	Nonpriority creditor's name and mailing address Aaron Kvitek 519 Maryland Street El Segundo, CA 90245 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> \$12,066.10 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	Nonpriority creditor's name and mailing address Abo Biglarpour 12407 Wagner St. #206 Los Angeles, CA 90066 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> \$150.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.13 Nonpriority creditor's name and mailing address Ace Cash Express 5150 Rugsby Avenue San Antonio, TX 78222 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$107.11 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14 Nonpriority creditor's name and mailing address Acton Mobile 809 Gleneagles Court Suite 300 Baltimore, MD 21286 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$2,520.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15 Nonpriority creditor's name and mailing address Advanced Mobile Truck & Trailer Repair 501-I South Reno Road #236 Newbury Park, CA 91320 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$190.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16 Nonpriority creditor's name and mailing address Alarmco Inc.-57 2007 Las Vegas Blvd South Las Vegas, NV 89104-2555 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$80.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17 Nonpriority creditor's name and mailing address Alarmco, Inc.-37 2007 Las Vegas Blvd S. Las Vegas, NV 89104-2555 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$45.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18 Nonpriority creditor's name and mailing address Alarmco, Inc.-39 2007 Las Vegas Blvd S Las Vegas, NV 89104-2555 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$45.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19 Nonpriority creditor's name and mailing address Aldo Crotee PO Box 24412 San Francisco, CA 94124 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. Unknown <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Notice Only Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Starving Students of Nevada LLC** Case number (if known) _____
Name

3.20 Nonpriority creditor's name and mailing address **Alex Vasquez**
11016 Rainbow River
Rancho Cordova, CA 95670
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$250.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **Service**
 Is the claim subject to offset? No Yes

3.21 Nonpriority creditor's name and mailing address **Alexandro Lopez**
c/o William Turley, Esq.
The Turley Law Firm
7428 Trade Street
San Diego, CA 92121
 Date(s) debt was incurred _____
 Last 4 digits of account number **ECTL**

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

3.22 Nonpriority creditor's name and mailing address **All Ways Towing & Transport**
1 E. 14 Street
San Leandro, CA 94577
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$650.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **Service**
 Is the claim subject to offset? No Yes

3.23 Nonpriority creditor's name and mailing address **Alliance Receivables Management, Inc.**
PO Box 2449
Gig Harbor, WA 98335-2449
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$1,856.00**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **Service**
 Is the claim subject to offset? No Yes

3.24 Nonpriority creditor's name and mailing address **Allied Trailers Sales and Rental**
9299 Washington Boulevard
Savage, MD 20763
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$3,647.05**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **Service**
 Is the claim subject to offset? No Yes

3.25 Nonpriority creditor's name and mailing address **Allied Waste Services #210-38**
PO Box 78829
Phoenix, AZ 85062
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$303.08**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **Service**
 Is the claim subject to offset? No Yes

3.26 Nonpriority creditor's name and mailing address **Alpine Water Systems**
PO Box 94438
Las Vegas, NV 89193-4436
 Date(s) debt was incurred _____
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$330.25**
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: **Service**
 Is the claim subject to offset? No Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.27 Nonpriority creditor's name and mailing address Altus GTS Inc. PO Box 1389 Kenner, LA 70063 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$58,718.34 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28 Nonpriority creditor's name and mailing address Always Towing and Transport 31086 San Benito St. Hayward, CA 94544 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$4,805.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.29 Nonpriority creditor's name and mailing address AM Best Service Center PO Box 1000 Dept 959 Memphis, TN 38148-0959 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$4,366.83 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30 Nonpriority creditor's name and mailing address American Building Janitorial, Inc.d 2675 Junipero Ave Suite 300 Signal Hill, CA 90755 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$1,733.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31 Nonpriority creditor's name and mailing address AMSA American Moving & Storage Assoc. 1611 Duke Street Alexandria, VA 22314 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$2,930.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32 Nonpriority creditor's name and mailing address Anat Levy & Associates, P.C. 5841 E. Charleston Blvd. Ste 300 PMB 421 Las Vegas, NV 89142 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$2,331.32 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.33 Nonpriority creditor's name and mailing address Andrea Barranco 7210 Harlan Lane Sykesville, MD 21784 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$300.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.34	Nonpriority creditor's name and mailing address Angelina Mendoza 6828 Frances St. Riverside, CA 92506 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> \$303.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35	Nonpriority creditor's name and mailing address Anne Marie Fine 280 Cagney Lane #317 Newport Beach, CA 92663 Date(s) debt was incurred __ Last 4 digits of account number <u>CHNB</u>	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36	Nonpriority creditor's name and mailing address Aqua Chill, Inc. #10 PO Box 24742 Tempe, AZ 85285-4742 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> \$227.06 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.37	Nonpriority creditor's name and mailing address Arby & Me, LLC 4920 West Pico Blvd Los Angeles, CA 90018 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,750.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38	Nonpriority creditor's name and mailing address Arete, LLC c/o Parker Realty 7465 W. Lake Mead Blvd #100 Las Vegas, NV 89128 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> \$2,340.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39	Nonpriority creditor's name and mailing address Arizona Work Trucks 1251 West Florence Drive Tucson, AZ 85705 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,474.60 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.40	Nonpriority creditor's name and mailing address Arrow Liquor 18150 Arrow Blvd Ste 8 Fontana, CA 92335 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> \$330.84 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.41 Nonpriority creditor's name and mailing address ASCENSUS, INC. Attn: Finance Department PO Box 10399 Fargo, ND 58106 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$295.45
3.42 Nonpriority creditor's name and mailing address ASG Security PO Box 650837 Dallas, TX 75265-0837 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$954.35
3.43 Nonpriority creditor's name and mailing address Ashleigh Schmitt 9204 Oswald Way Apt #3D Baltimore, MD 21237 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$156.00
3.44 Nonpriority creditor's name and mailing address Assurant Employee Benefits PO Box 807009 Kansas City, MO 64184 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,717.14
3.45 Nonpriority creditor's name and mailing address AT&T ADVANCED AD SOLUTIONS PO Box 505105 Saint Louis, MO 63150-5105 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$17,708.04
3.46 Nonpriority creditor's name and mailing address AT&T U verse PO Box 5014 Carol Stream, IL 60197-5014 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$213.00
3.47 Nonpriority creditor's name and mailing address AT&T U Verse 03 PO Box 5014 Carol Stream, IL 60197-5014 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$93.00

Debtor **Starving Students of Nevada LLC** Case number (if known) _____
Name

3.48 Nonpriority creditor's name and mailing address **AT&T U Verse-05** **PO Box 5014** **Carol Stream, IL 60197-5014** **As of the petition filing date, the claim is:** *Check all that apply.* **\$71.00**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.49 Nonpriority creditor's name and mailing address **AT&T U Verse-16** **PO Box 5014** **Carol Stream, IL 60197-5014** **As of the petition filing date, the claim is:** *Check all that apply.* **\$92.84**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.50 Nonpriority creditor's name and mailing address **AT&T U Verse-32** **PO Box 5014** **Carol Stream, IL 60197-5014** **As of the petition filing date, the claim is:** *Check all that apply.* **\$81.23**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.51 Nonpriority creditor's name and mailing address **AT&T U-Verse** **PO Box 5014** **Carol Stream, IL 60197-5014** **As of the petition filing date, the claim is:** *Check all that apply.* **\$288.00**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.52 Nonpriority creditor's name and mailing address **AT&T U-Verse 61** **PO Box 5014** **Carol Stream, IL 60197** **As of the petition filing date, the claim is:** *Check all that apply.* **\$40.00**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.53 Nonpriority creditor's name and mailing address **AT&T-T1** **PO Box 5019** **Carol Stream, IL 60197-5019** **As of the petition filing date, the claim is:** *Check all that apply.* **\$2,762.60**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.54 Nonpriority creditor's name and mailing address **At&T-T2** **PO Box 5019** **Carol Stream, IL 60197-5019** **As of the petition filing date, the claim is:** *Check all that apply.* **\$2,061.25**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC Name	
3.55 Nonpriority creditor's name and mailing address AT&TFWD PO Box 5025 Carol Stream, IL 60197-5025 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> \$384.73 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.56 Nonpriority creditor's name and mailing address Athens Services-01 PO Box 600009 City of Industry, CA 91716-0009 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$591.66 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.57 Nonpriority creditor's name and mailing address Athens Services-04 PO Box 600009 City of Industry, CA 91716-0009 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$440.26 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58 Nonpriority creditor's name and mailing address Atlas Disposal-13 PO Box 29875 Dept 2056 Phoenix, AZ 85038-9675 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> \$129.02 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59 Nonpriority creditor's name and mailing address Atlas Disposal-32 PO Box 511241 Los Angeles, CA 90051-3039 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,208.80 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.60 Nonpriority creditor's name and mailing address Atlas Towing Service PO Box 880370 San Francisco, CA 94160-6370 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,640.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.61 Nonpriority creditor's name and mailing address ATT32 Payment Center Sacramento, CA 95887-0001 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$801.18 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.62 Nonpriority creditor's name and mailing address ATT36 PO Box 501 Carol Stream, IL 60197-5001 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> \$279.01 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63 Nonpriority creditor's name and mailing address Auerbach Waste, LLC 1201 W. Peoria Ave. El Mirage, AZ 85335 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> \$270.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64 Nonpriority creditor's name and mailing address Autos Northwest, LLC c/o Brian M. King, Esq. Davies Pearson, P.C. 920 Fawsett PO Box 1657 Tacoma, WA 98401 Date(s) debt was incurred __ Last 4 digits of account number <u>5150</u>	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65 Nonpriority creditor's name and mailing address Autos Northwest, LLC 6434 South Tacoma Way Tacoma, WA 98409 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> \$2,168.88 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66 Nonpriority creditor's name and mailing address Avon Rent-A-Car 7080 Santa Monica Boulevard Los Angeles, CA 90038 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,389.54 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67 Nonpriority creditor's name and mailing address B.H. Rainbow Plaza, LLC Attn: Arsalan Caozini P.O. Box 49993 Los Angeles, CA 90049 Date(s) debt was incurred <u>2/12/2016</u> 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68 Nonpriority creditor's name and mailing address Baltimore Truck Rental-STR 7920 Tarbay Drive Jessup, MD 20794 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,195.41 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.69 Nonpriority creditor's name and mailing address Bay Alarm Company PO Box 7137 San Francisco, CA 94120-7137 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> \$181.37 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.70 Nonpriority creditor's name and mailing address Bay Point Towing, Inc. PO Box 5636 Concord, CA 94524 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,944.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.71 Nonpriority creditor's name and mailing address Berkeley Capital Trust PO Box 2689 San Francisco, CA 94128 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> \$25.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72 Nonpriority creditor's name and mailing address Berry Network, Inc. s/o Richard M. Howe 4385 Kimball Bridge Rd. Ste 100 Alpharetta, GA 30022 Date(s) debt was incurred __ Last 4 digits of account number <u>0950</u>	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.73 Nonpriority creditor's name and mailing address BGE PO Box 13070 Philadelphia, PA 19101 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,307.91 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74 Nonpriority creditor's name and mailing address Bill's Towing, Inc. 1210 South Sprague Tacoma, WA 98405 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> \$15,052.70 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.75 Nonpriority creditor's name and mailing address Blue Chip Moving and Storage, Inc. 13525 Crenshaw Blvd Hawthorne, CA 90250 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,575.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.76	Nonpriority creditor's name and mailing address Blue Ribbon Tire Co., Inc. 1448 N. 24th Phoenix, AZ 85008 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$727.01
3.77	Nonpriority creditor's name and mailing address Bolero Co. PO Box 8040 Emeryville, CA 94562 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$2,073.35
3.78	Nonpriority creditor's name and mailing address Bonnie Phippen PO Box 800902 Valencia, CA 91380 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$160.97
3.79	Nonpriority creditor's name and mailing address Brager Tax Law Group 10880 Wilshire Boulevard Suite 880 Los Angeles, CA 90024 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.80	Nonpriority creditor's name and mailing address Brandon Schilperoot 1709 East Brockton Ave. Redlands, CA 92374 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$150.00
3.81	Nonpriority creditor's name and mailing address Broyles Auto & Wrecker Service, Inc. 1601 Mountain Rd. Glen Allen, VA 23060 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$13,681.30
3.82	Nonpriority creditor's name and mailing address Bruce L. Ross & Company 609 Deep Valley Drive, Suite 290 Rolling Hills Estates, CA 90274-3629 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.83 Nonpriority creditor's name and mailing address Burrtec Waste Industries, Inc. Payment Processing Center PO Box 7166 Buena Park, CA 90622-7166 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> \$261.14 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.84 Nonpriority creditor's name and mailing address C.S. Tang M.D., Inc. DBA: Careonsite PO Box 18149 Long Beach, CA 90808 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> \$571.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.85 Nonpriority creditor's name and mailing address Cal Tex Truck 372 Phelan Ave. San Jose, CA 95112 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,751.59 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.86 Nonpriority creditor's name and mailing address California Automobile Insurance Company c/o Mark R. Nivinskus Nivinskus Law Group, A Law Corporation 134 W. Wilshire Ave. Santa Ana, CA 92702 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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.87 Nonpriority creditor's name and mailing address California Automobile Insurance Company 555 West Imperial Highway Brea, CA 92821 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,300.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.88 Nonpriority creditor's name and mailing address California Diesel Compliance 1985 Friendship Dr. Suite L El Cajon, CA 92020 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> \$225.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.89 Nonpriority creditor's name and mailing address Call Source PO Box 60280 Los Angeles, CA 90060 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> \$882.69 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.90	Starving Students of Nevada LLC Carol Sanders 5732 Parkhurst Court Chino Hills, CA 91709 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> \$162.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.91	Carrie Featherston 2830 Orbeck Ct. Auburn, CA 95603 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> \$419.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.92	Cassie Schmitt 2905 S. 7th Street Richmond, CA 94805 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> \$140.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.93	CBE Group 1309 Technology Parkway Cedar Falls, IA 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> \$397.57 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.94	CCCH, A General Partnership 5180 Naranja Street San Diego, CA 92113 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,489.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.95	CDS Moving Equipment 375 Manville Street Compton, CA 90220 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> \$508,809.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service and Supplies</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.96	Centurylink-12-58 PO Box 29040 Phoenix, AZ 85038-9040 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> \$676.03 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.97 Nonpriority creditor's name and mailing address Centurylink-18-08 PO Box 91155 Seattle, WA 98111-9255 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$975.08 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.98 Nonpriority creditor's name and mailing address CenturyLink-25 PO Box 29040 Phoenix, AZ 85038-9040 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$1,102.32 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.99 Nonpriority creditor's name and mailing address CenturyLink-34 PO Box 29040 Phoenix, AZ 85038-9040 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$1,122.49 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.100 Nonpriority creditor's name and mailing address Centurylink-37 PO Box 2961 Phoenix, AZ 85062-2961 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$226.40 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.101 Nonpriority creditor's name and mailing address CenturyLink-57 PO Box 660068 Dallas, TX 75266-0068 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$1,662.33 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.102 Nonpriority creditor's name and mailing address Ceridian PO Box 10989 Newark, NJ 07193-0989 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$198.01 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.103 Nonpriority creditor's name and mailing address Char EM LLC 83 Wexford Way Basking Ridge, NJ 07920 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$32,063.30 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.104 Nonpriority creditor's name and mailing address Church of Riverside, Inc. PO Box 3510 Riverside, CA 92519 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> \$2,232.56 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.105 Nonpriority creditor's name and mailing address City of Beverly Hills Parking Citations PO Box 515257 Los Angeles, CA 90005-6556 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> \$186.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.106 Nonpriority creditor's name and mailing address City of Beverly Hills PO Box 515258 Los Angeles, CA 90005-6556 Date(s) debt was incurred __ Last 4 digits of account number <u>3254</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$186.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.107 Nonpriority creditor's name and mailing address City of Long Beach PO Box 630 Long Beach, CA 90842-0001 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$284.74 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.108 Nonpriority creditor's name and mailing address City of Pheonix Arizona PO BOX 78683 Phoenix, AZ 85062-8663 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> \$195.49 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109 Nonpriority creditor's name and mailing address City of Richmond B/L Divisions of Collections Richmond, VA 23261-6624 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> \$49.25 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.110 Nonpriority creditor's name and mailing address City of San Bernardino Municipal Water Department PO Box 710 San Bernardino, CA 92402 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> \$907.90 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.111 Nonpriority creditor's name and mailing address City of Seattle Fas City of Seattle PO Box 34904 Seattle, WA 98124-1904 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> \$110.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.112 Nonpriority creditor's name and mailing address City of South San Francisco PO Box 27947 Fresno, CA 93729 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$125.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.113 Nonpriority creditor's name and mailing address City of West Hollywood PO Box 51852 Los Angeles, CA 90051-8152 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> \$76.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.114 Nonpriority creditor's name and mailing address City Treasurer-SD Police Department Attn: Permits & Licensing MS 735 PO Box 121431 San Diego, CA 92112-1431 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> \$173.24 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.115 Nonpriority creditor's name and mailing address CM Mobile Truck Service 16716 El Bacon Ave San Leandro, CA 94578 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,515.44 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.116 Nonpriority creditor's name and mailing address Commercial Carrier Serv. 325 E. Arrow Highway Unit 505 San Dimas, CA 91773 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> \$595.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.117 Nonpriority creditor's name and mailing address Commercial Tire Company 806 Bayshore Blvd. San Francisco, CA 94124 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> \$280.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.118 Nonpriority creditor's name and mailing address Commercial Trade, Inc. c/o Sandra Kuhn McCormack Attorney At Law Bakersfield, CA 93309 Date(s) debt was incurred __ Last 4 digits of account number 3037	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>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.119 Nonpriority creditor's name and mailing address Commercial Trade, Inc. 5330 Office Center Court Bakersfield, CA 93309 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$27,000.00
3.120 Nonpriority creditor's name and mailing address Continental Currency Services, Inc. 1108 E. 177th Street Santa Ana, CA 92701 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,278.65
3.121 Nonpriority creditor's name and mailing address Convergent 800 SW 39th Renton, WA 98057 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$32.87
3.122 Nonpriority creditor's name and mailing address Cox Communication-Phoenix PO Box 53249 Phoenix, AZ 85072-3249 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$3,396.02
3.123 Nonpriority creditor's name and mailing address Cox Communications Phoenix 25 PO Box 53249 Phoenix, AZ 85713 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$200.31
3.124 Nonpriority creditor's name and mailing address CT Corporation PO Box 4349 Carol Stream, IL 60197-4349 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,305.00

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.125	Nonpriority creditor's name and mailing address CT Loan Solutions PO Box 301133 Dallas, TX 75303 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$141.00
3.126	Nonpriority creditor's name and mailing address Culligan-08 25 E. 3rd Avenue Spokane, WA 99202-1492 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$24.18
3.127	Nonpriority creditor's name and mailing address Dajon Truck Repair 1601 Little Orchard ST. STE A San Jose, CA 95110 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$236.98
3.128	Nonpriority creditor's name and mailing address Dale Evans 1883 Galleria Spata St. Henderson, NV 89044 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$210.00
3.129	Nonpriority creditor's name and mailing address Dana Craig 2428 Gel Bray Place Fort Worth, TX 76131 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$306.00
3.130	Nonpriority creditor's name and mailing address David Alvarez 200 Dublin Street San Francisco, CA 94112 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$4,945.00
3.131	Nonpriority creditor's name and mailing address Davis Wright Tremaine, LLP 1201 Third Avenue, Suite 2200 Clovis, NM 88101-3045 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.132	Nonpriority creditor's name and mailing address Day & Night Airconditioning-Heating-Plumbing 2138 E. Indian School Road Phoenix, AZ 85016 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$477.69
3.133	Nonpriority creditor's name and mailing address De Lage Landen Financial Services PO Box 41602 Philadelphia, PA 19101-1602 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$3,188.55
3.134	Nonpriority creditor's name and mailing address Dean Markle 122 Broderick Dr. Brentwood, CA 94513 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		Unknown
3.135	Nonpriority creditor's name and mailing address Debco 24 Hour Tow 1102 South Aurora St. Stockton, CA 95206 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$250.00
3.136	Nonpriority creditor's name and mailing address Deborah Rovelli 3012 Hampshire Dr. Sacramento, CA 95821 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$10.00
3.137	Nonpriority creditor's name and mailing address Delaware Corporate Agents, Inc. 4408 Tennyson Road Wilmington, DE 19802 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$950.00
3.138	Nonpriority creditor's name and mailing address Delia Law 1207 High Bluff Dr. Suite 200 San Diego, CA 92130 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$2,645.00

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.139 Nonpriority creditor's name and mailing address Delmarva Power PO Box 17000 Wilmington, DE 19886 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> \$171.29 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.140 Nonpriority creditor's name and mailing address Demicia Cain 3560 Wilshire Ivd Suite 1260 Los Angeles, CA 90010 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> \$23,582.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.141 Nonpriority creditor's name and mailing address Dempsey Alarms 9949 Maya Linda Rd. #34 San Diego, CA 92128 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> \$89.97 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.142 Nonpriority creditor's name and mailing address Department of Motor Vehicles PO Box 932317 Sacramento, CA 94232-3170 Date(s) debt was incurred __ Last 4 digits of account number <u>1632</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$12,320.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.143 Nonpriority creditor's name and mailing address Department of Motor Vehicles PO Box 932317 Sacramento, CA 94232-3170 Date(s) debt was incurred __ Last 4 digits of account number <u>8898</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$12,320.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.144 Nonpriority creditor's name and mailing address Department of Motor Vehicles PO Box 932317 Sacramento, CA 94232-3170 Date(s) debt was incurred __ Last 4 digits of account number <u>5424</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$12,320.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.145 Nonpriority creditor's name and mailing address Department of Motor Vehicles PO Box 932317 Sacramento, CA 94232-3170 Date(s) debt was incurred __ Last 4 digits of account number <u>1984</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$12,320.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Starving Students of Nevada LLC** Case number (if known) _____
Name

3.146 Nonpriority creditor's name and mailing address **Department of Motor Vehicles** **PO Box 932317** **Sacramento, CA 94232-3170** **As of the petition filing date, the claim is:** *Check all that apply.* **\$12,320.00**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number **9277** **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.147 Nonpriority creditor's name and mailing address **Department of Motor Vehicles** **PO Box 825339** **Sacramento, CA 94232-5339** **As of the petition filing date, the claim is:** *Check all that apply.* **\$55.00**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.148 Nonpriority creditor's name and mailing address **Department of Motor Vehicles-VA** **PO Box 25850** **Richmond, VA 23260-5850** **As of the petition filing date, the claim is:** *Check all that apply.* **\$275.90**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.149 Nonpriority creditor's name and mailing address **Dex Media** **c/o John D. Guerrini** **The Guerrini Law Firm** **106 S. Mentor Ave. Suite 150** **Pasadena, CA 91106** **As of the petition filing date, the claim is:** *Check all that apply.* **Unknown**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number **1925** **Basis for the claim:** Notice Only
 Is the claim subject to offset? No Yes

3.150 Nonpriority creditor's name and mailing address **Dex Media West** **PO Box 79167** **Phoenix, AZ 85062-9167** **As of the petition filing date, the claim is:** *Check all that apply.* **\$19,278.62**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.151 Nonpriority creditor's name and mailing address **Dex One** **PO Box 650834** **Dallas, TX 75266** **As of the petition filing date, the claim is:** *Check all that apply.* **\$9,291.84**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

3.152 Nonpriority creditor's name and mailing address **Diana Paone** **4356 1/2 Banning St.** **San Diego, CA 92106** **As of the petition filing date, the claim is:** *Check all that apply.* **\$270.00**
 Date(s) debt was incurred _____ Contingent Unliquidated Disputed
 Last 4 digits of account number _____ **Basis for the claim:** Service
 Is the claim subject to offset? No Yes

Debtor **Starving Students of Nevada LLC** Case number (if known) _____
Name

3.153 Nonpriority creditor's name and mailing address **Diesel Pros, LLC** As of the petition filing date, the claim is: *Check all that apply.* **\$1,000.08**
1347 W. Hurst Blvd
Hurst, TX 76053
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.154 Nonpriority creditor's name and mailing address **Dion International Trucks** As of the petition filing date, the claim is: *Check all that apply.* **\$72.42**
5255 Federal Boulevard
San Diego, CA 92105
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.155 Nonpriority creditor's name and mailing address **DMV Renewal** As of the petition filing date, the claim is: *Check all that apply.* **\$1,189.00**
PO Box 94294
Sacramento, CA 94294-0895
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.156 Nonpriority creditor's name and mailing address **Dolnee Lee** As of the petition filing date, the claim is: *Check all that apply.* **\$37.65**
171 Coventry Dr.
Las Vegas, NV 89074
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.157 Nonpriority creditor's name and mailing address **Donald Ray Wilson Trust** As of the petition filing date, the claim is: *Check all that apply.* **\$544.03**
4944 E. Hillside Ave.
Orange, CA 92867
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.158 Nonpriority creditor's name and mailing address **Donna McDermoth** As of the petition filing date, the claim is: *Check all that apply.* **\$140.00**
2128 Eagle Stick Dr.
Henderson, NV 89012
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.159 Nonpriority creditor's name and mailing address **Double M Towing** As of the petition filing date, the claim is: *Check all that apply.* **\$1,240.00**
25880 Waldon Rd.
Menifee, CA 92584
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
 Basis for the claim: Service
 Is the claim subject to offset? No Yes

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.160	Nonpriority creditor's name and mailing address Dovell & Williams 1120 Crain Highway NW Glen Burnie, MD 21061 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> \$404.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.161	Nonpriority creditor's name and mailing address Dragon Sea Moving, Inc. c/o XI LI 2501 Medallion Dr. Apt 43 Union City, CA 94587 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> \$315.68 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.162	Nonpriority creditor's name and mailing address Duke's Truck Repair, Inc. 2401 Airport Way So. Seattle, WA 98134 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> \$838.79 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.163	Nonpriority creditor's name and mailing address Dumas Diesel Injection, Inc. 646 West Esther Street Long Beach, CA 90813 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> \$2,800.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.164	Nonpriority creditor's name and mailing address E.J. Harrison & Sons, Inc. PO Box 4009 Ventura, CA 93007-4009 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> \$628.22 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.165	Nonpriority creditor's name and mailing address Edison PO Box 300 Rosemead, CA 91772-0010 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> \$134.05 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.166	Nonpriority creditor's name and mailing address Effie Michaels 1719 Fremont Ave. Apt 3307 South Pasadena, CA 91030 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> \$260.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.177 Nonpriority creditor's name and mailing address Eisenberg & Associates 3580 Wilshire Blvd Suite 1260 Los Angeles, CA 90010 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$23,562.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.168 Nonpriority creditor's name and mailing address eMobus 6215 Ferris Square, Ste. 250 San Diego, CA 92121 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$2,755.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.169 Nonpriority creditor's name and mailing address Enterprise Commercial Truck 1925 W 3500 S West Valley City, UT 84119 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$445.32 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.170 Nonpriority creditor's name and mailing address Enterprise Rent-A-Car Attn: Legal Dept. 600 Corporate Park Drive Saint Louis, MO 63105 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$1,000.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.171 Nonpriority creditor's name and mailing address Epstein Becker & Green PC PO Box 30038 New York, NY 10087 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$1,385.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.172 Nonpriority creditor's name and mailing address Equipment Works, Inc. PO Box 708 Newington, VA 22122 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$2,091.71 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.173 Nonpriority creditor's name and mailing address Eric Abraham 1251 S. Cimarron Road #7 Las Vegas, NV 89117 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. Unknown <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC Name	
3.174 Nonpriority creditor's name and mailing address ESI-MD Corporation PO Box 650546 Dallas, TX 75285-0546 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> \$91.98 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.175 Nonpriority creditor's name and mailing address Eustus D. Nelson 2283 Lalique Circle Colton, CA 92324 Date(s) debt was incurred __ Last 4 digits of account number 0005	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.176 Nonpriority creditor's name and mailing address Express Working Capital, LLC 545 E. John W Carpenter Fwy, Ste 670 Irving, TX 75062 Date(s) debt was incurred __ Last 4 digits of account number 0450	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.177 Nonpriority creditor's name and mailing address Express Working Capital, LLC c/o Farhad Novian & David Felsenthal Novian & Novian, LLP 1801 Century Park East Ste. 1201 Los Angeles, CA 90067 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 checked="" 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
3.178 Nonpriority creditor's name and mailing address Fast Towing 3850 Losee Road North Las Vegas, NV 89030 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> \$886.25 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.179 Nonpriority creditor's name and mailing address Fastrak Violation Processing Department PO Box 26925 San Francisco, CA 94126-6925 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> \$225.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.180 Nonpriority creditor's name and mailing address Fedex PO Box 7221 Pasadena, CA 91109-7321 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,276.99 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Starving Students of Nevada LLC** Case number (if known) _____
Name

3.181 Nonpriority creditor's name and mailing address **File & Serve Xpress** **105 Decker Court Ste #1100** **Irving, TX 75062** **As of the petition filing date, the claim is:** *Check all that apply.* **\$169.00**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.182 Nonpriority creditor's name and mailing address **Fire Code Safety Equipment, Inc.** **2722 W. Pacific Ave.** **Sacramento, CA 95820** **As of the petition filing date, the claim is:** *Check all that apply.* **\$116.97**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.183 Nonpriority creditor's name and mailing address **Fire Services Corp.** **c/o Universal Funding Corporation** **PO Box 13115** **Spokane, WA 99213** **As of the petition filing date, the claim is:** *Check all that apply.* **\$375.00**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.184 Nonpriority creditor's name and mailing address **Firemaster** **PO Box 121019** **Dallas, TX 75312-1019** **As of the petition filing date, the claim is:** *Check all that apply.* **\$358.48**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.185 Nonpriority creditor's name and mailing address **Fleet Service, Inc.** **5190 Raynor Ave.** **Linthicum Heights, MD 21090** **As of the petition filing date, the claim is:** *Check all that apply.* **\$4,056.59**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.186 Nonpriority creditor's name and mailing address **Fleet Tech Truck Repair** **14521 S. Avalon Avenue** **Gardena, CA 90248** **As of the petition filing date, the claim is:** *Check all that apply.* **\$150.00**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.187 Nonpriority creditor's name and mailing address **Fleetmatics USA, Inc.** **PO Box 347472** **Pittsburgh, PA 15251-4472** **As of the petition filing date, the claim is:** *Check all that apply.* **\$14,175.00**
 Contingent
 Unliquidated
 Disputed
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
Basis for the claim: Service
 Is the claim subject to offset? No Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.188 Nonpriority creditor's name and mailing address Flyers Energy, LLC PO Box 479 Bloomington, CA 92316 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> \$102,491.69 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.189 Nonpriority creditor's name and mailing address Formcenter 231 Croton Avenue Cortlandt Manor, NY 10567-9903 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> \$444.09 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.190 Nonpriority creditor's name and mailing address Frontier PO Box 2951 Phoenix, AZ 85062-2951 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> \$398.12 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.191 Nonpriority creditor's name and mailing address Fuller Mobile Service 6621 Haas Avenue Los Angeles, CA 90047 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> \$25.53 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.192 Nonpriority creditor's name and mailing address G&R Mobile Diesel Mechanics 11811 N Hwy 99 SP #4 Lodi, CA 95240 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,359.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.193 Nonpriority creditor's name and mailing address Gemini Duplication 4004 S. Demaree St. Ste. A Visalia, CA 93277 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> \$119.36 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.194 Nonpriority creditor's name and mailing address George's Mobile Service & Repair 11392 High Ranch Road Lakeside, CA 92040-1014 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> \$558.69 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC Name <hr/> 3.195 Nonpriority creditor's name and mailing address GGB Toll Processing Department PO Box 26878 San Francisco, CA 94128 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> \$21.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.196 Nonpriority creditor's name and mailing address Gibbs Int'l Truck Centers PO Box Oxnard, CA 93036 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,252.34 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.197 Nonpriority creditor's name and mailing address Gisela M. Saarikoski 14000 Tahiti Way, Unit 316 Marina Del Rey, CA 90292 Date(s) debt was incurred __ Last 4 digits of account number <u>7871</u>	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.198 Nonpriority creditor's name and mailing address Gittler & Bradford Trust Account 10537 Santa Monica Blvd 3/F Los Angeles, CA 90025-4952 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> \$66,392.24 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.199 Nonpriority creditor's name and mailing address Global Capacity Department 33408 PO Box 39000 San Francisco, CA 94139-0001 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$256.43 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.200 Nonpriority creditor's name and mailing address Gloria Rosas 12604 Lime Placew Chino, CA 91710 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> \$150.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.201 Nonpriority creditor's name and mailing address GMS Autoglass File 749279 Los Angeles, CA 90074-9279 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> \$643.28 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.202	Nonpriority creditor's name and mailing address Google, Inc. Dept. 33854 PO Box 38000 San Francisco, CA 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$261,092.99
3.203	Nonpriority creditor's name and mailing address Graham Vernon 4055 Obsidian Rd. San Bernardino, CA 92407 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$250.00
3.204	Nonpriority creditor's name and mailing address Greg Smith Petty Cash Custodian-Br.#38 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$129.80
3.205	Nonpriority creditor's name and mailing address Greg Spears Backflow Testing 7745 Boulder Ave. #358 Highland, CA 92346 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$50.00
3.206	Nonpriority creditor's name and mailing address Gursey Schneider LLP 1888 Century Park East Suite 900 Los Angeles, CA 90067-1735 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accounting Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$79,105.02
3.207	Nonpriority creditor's name and mailing address Hani & Frances Sayegh Trust 1576 E. Gaywood Drive Altadena, CA 91001 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$1,243.50
3.208	Nonpriority creditor's name and mailing address Harborview Business Park, LIC c/o Wilson Property serv, Inc., 8120 East Cactus Road, Suite 300 Scottsdale, AZ 85260 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		\$3,262.95

Debtor Name	Case number (if known)
Starving Students of Nevada LLC Name	
3.209 Nonpriority creditor's name and mailing address HCC Surety Group Dept 9362 Los Angeles, CA 90084-9362 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,000.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.210 Nonpriority creditor's name and mailing address HOLTHOUSE CARLIN AND VAN TRIGT LLP 350 W COLORADO 5TH Pasadena, CA 91105 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> \$37,424.24 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accounting Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.211 Nonpriority creditor's name and mailing address Hotel Erwin 1697 Pacific Avenue Venice, CA 90291 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> \$525.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.212 Nonpriority creditor's name and mailing address Hunter Macdonald 1128 Floyd Ave. Richmond, VA 23220 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> \$126.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.213 Nonpriority creditor's name and mailing address Independent Tire, Inc. 1425 S. Industrial Rd. Bldg #13 Salt Lake City, UT 84104 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> \$69.45 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.214 Nonpriority creditor's name and mailing address Inez Property c/o Robert Charbonneau, Partner PO Box 4829 Ventura, CA 93007-7000 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,700.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.215 Nonpriority creditor's name and mailing address INFORMS 3860 Eagle Drive Anaheim, CA 92807 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> \$768.29 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.216 Nonpriority creditor's name and mailing address Inna Gerlovinia 839 Miramar Ave. Berkeley, CA 94707 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> \$250.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.217 Nonpriority creditor's name and mailing address Insight Investigations, Inc. PO Box 8981571 Temecula, CA 92589 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,550.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.218 Nonpriority creditor's name and mailing address Intellicheck 1748 W. Katella Ave. Ste. #114 Orange, CA 92867 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> \$2,132.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.219 Nonpriority creditor's name and mailing address Interstate Automobile Network, Inc. dba Luxury Auto Leasing c/o William P. Gemmill, Esq. 6380 Wilshire Blvd, Suite 909 Los Angeles, CA 90048 Date(s) debt was incurred __ Last 4 digits of account number 8364	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.220 Nonpriority creditor's name and mailing address Interstate Truck Center 825 Navy Drive Stockton, CA 95208 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20,168.71 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.221 Nonpriority creditor's name and mailing address J&H Truck Repair 443 Everett Ave Suite C Monterey Park, CA 91755 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,981.90 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.222 Nonpriority creditor's name and mailing address J&R Truck Tire Service, Inc. 8935 Dyson Road Brandywine, MD 20613 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> \$971.22 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.223 Nonpriority creditor's name and mailing address Jade Properties 1900 Point West Way Suite 142 Sacramento, CA 95815 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,588.28 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.224 Nonpriority creditor's name and mailing address Jennifer Lloyd 7521 Edinger Ave. #4232 Huntington Beach, CA 92647 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> \$108.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.225 Nonpriority creditor's name and mailing address Jet Fleet Services 6152 Forester Drive Huntington Beach, CA 92648 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> \$64.52 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.226 Nonpriority creditor's name and mailing address JEV Properties 3621 Madelyn San Jose, CA 95127-2022 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,700.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.227 Nonpriority creditor's name and mailing address Jim's Towing 1170 South 200 West Salt Lake City, UT 84101 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> \$195.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.228 Nonpriority creditor's name and mailing address John Baudhuin 408 20th Street Santa Monica, CA 90402 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.229 Nonpriority creditor's name and mailing address John or Patricia Toscano 9151 Southland Road Manteca, CA 95336 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> \$159.63 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.230	Nonpriority creditor's name and mailing address John Ruppel c/o Utah Division of Consumer Protection 160 E. 300 South Second Floor PO Box 146704 Salt Lake City, UT 84114 Date(s) debt was incurred __ Last 4 digits of account number 2927	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>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Unknown
3.231	Nonpriority creditor's name and mailing address Johnny Mendieta 14606 Main Street #X-4 Mill Creek, WA 98012 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,175.24
3.232	Nonpriority creditor's name and mailing address Joseph K O'Connor 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$1,208.00
3.233	Nonpriority creditor's name and mailing address Joy Soldan 7243 East Cambria Circle Orange, CA 92869 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$3,326.63
3.234	Nonpriority creditor's name and mailing address Joyce Staples 380 Winesap Brentwood, CA 94513 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$67.34
3.235	Nonpriority creditor's name and mailing address Juan C. Mamoros 3429 Durtmouth Irving, TX 75062 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$371.41
3.236	Nonpriority creditor's name and mailing address Julie Landeros 140 N. 10th. Santa Paula, CA 93060 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$45.00

Debtor	Name	Case number (if known)
Starving Students of Nevada LLC		
3.237	Nonpriority creditor's name and mailing address Kara Kramer 2471 Five Fathom Circle Woodbridge, VA 22191 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> \$481.80 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.238	Nonpriority creditor's name and mailing address Katharine Griffin 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> \$337.67 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.239	Nonpriority creditor's name and mailing address Kathryn Mccrea 18 Homewood Road Wilmington, DE 19803 Date(s) debt was incurred __ Last 4 digits of account number <u>2508</u>	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.240	Nonpriority creditor's name and mailing address Katy Kelley 5950 Buckingham Parkway #406 Culver City, CA 90230 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> \$101.99 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.241	Nonpriority creditor's name and mailing address KBS Messenger Service 3336 South Robertson Blvd Los Angeles, CA 90034 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> \$182.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.242	Nonpriority creditor's name and mailing address Kenworth Sales 2125 S. Constitution Blvd West Valley, UT 84149 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> \$952.56 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.243	Nonpriority creditor's name and mailing address Key Equipment Finance PO Box 74713 Cleveland, OH 44194-0798 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> \$22,834.13 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.244 Nonpriority creditor's name and mailing address KH Mountain Investments 2630 South 3270 West Suite B Salt Lake City, UT 84119 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> \$2,850.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.245 Nonpriority creditor's name and mailing address Kinecta Federal Credit Union dba NIX Financial 1440 Rosecrans Ave. Manhattan Beach, CA 90266 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> \$192.18 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.246 Nonpriority creditor's name and mailing address Knight Security & Fire Systems 2418 Auto Park Way Escondido, CA 92029 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> \$140.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.247 Nonpriority creditor's name and mailing address Kreative Art & Painting 5922 Kester Ave. Van Nuys, CA 91411 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> \$21,915.02 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.248 Nonpriority creditor's name and mailing address L.A. Commercial Group, Inc. dba Continental Commercial Group c/o Jessica L. Lemoine, Esq. 317 So. Brand Blvd. Glendale, CA 91204 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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.249 Nonpriority creditor's name and mailing address LA DWP-01 PO Box 30808 Los Angeles, CA 90030-0808 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> \$726.42 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.250 Nonpriority creditor's name and mailing address Labor Ready Southwest, Inc. PO Box 31001-0257 Pasadena, CA 91110-0257 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,122.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.251 Nonpriority creditor's name and mailing address LADWP-04 PO Box 30808 Los Angeles, CA 90030-0808 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$289.48 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.252 Nonpriority creditor's name and mailing address Lantelligence 6072 Corte Del Cedro Carlsbad, CA 92008-8583 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$3,190.42 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.253 Nonpriority creditor's name and mailing address Larry's Towing Service 1900 First Street San Fernando, CA 91340 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$3,055.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.254 Nonpriority creditor's name and mailing address Law Fire Protection Accounts Receivable PO Box 875908 Los Angeles, CA 90087 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$65.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.255 Nonpriority creditor's name and mailing address Law Offices of Lawrence Zerner 1801 Century Park East Suite 2400 Los Angeles, CA 90067 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$155.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.256 Nonpriority creditor's name and mailing address Leadmasters Solutions, LLC 1647 Willow Pass Rd S-247 Concord, CA 94520 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$850.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.257 Nonpriority creditor's name and mailing address Leaf PO Box 644006 Cincinnati, OH 45264-4006 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$22.41 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.258	Nonpriority creditor's name and mailing address Lina Devera 11370 Tesoto Loop St. Corona, CA 92883 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> \$222.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.259	Nonpriority creditor's name and mailing address Lincoln Waste Solutions, LLC 234 Murphy Road Hartford, CT 06114 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,742.08 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.260	Nonpriority creditor's name and mailing address Lloyd Owings 4421 W. South Butte Rd. Queen Creek, AZ 85142 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> \$250.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.261	Nonpriority creditor's name and mailing address LNEW & B LAW OFFICES 10250 CONSTELLATION BLVD. SUITE 1700 Los Angeles, CA 90067 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> \$32,241.80 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.262	Nonpriority creditor's name and mailing address Longhorn 5288 Boulder Highway Las Vegas, NV 89122 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> \$211.32 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.263	Nonpriority creditor's name and mailing address Lori Barrios 5571 Jaffe Cort Apt 1 San Diego, CA 92119 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.60 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.264	Nonpriority creditor's name and mailing address Luis Olascoaga c/o Kitty Szero, Esq. R. Rex Parris Law Firm 43364 10th Street West Lancaster, CA 93534 Date(s) debt was incurred __ Last 4 digits of account number <u>5164</u>	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.265 Nonpriority creditor's name and mailing address Luxury Auto Leasing 4163 Lincoln Blvd Marina Del Rey, CA 90292 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$26,000.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.266 Nonpriority creditor's name and mailing address Lyndsi Gardner 11304 18th Avenue S Apt #F303 Tacoma, WA 98444 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$166.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.267 Nonpriority creditor's name and mailing address M&M Diesel & Auto Repair, LLC 2007 E. Cindy Street Chandler, AZ 85225 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$4,621.05 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.268 Nonpriority creditor's name and mailing address Mailfinance 25881 Network Place Chicago, IL 60673-1258 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$1,097.23 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.269 Nonpriority creditor's name and mailing address Marlin Leasing Group PO Box 13604 Philadelphia, PA 19101-3604 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$28.11 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.270 Nonpriority creditor's name and mailing address Matturo's Service & Repair, LLC 1817 S. Home, Ste. 4 Mesa, AZ Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$7,114.13 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.271 Nonpriority creditor's name and mailing address Men Investments, LLC Patron Diesel Repair PO Box 444 Mira Loma, CA 92571 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$15,127.44 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.272 Nonpriority creditor's name and mailing address Menefee Ashley Uptown Movers 8025 Orio Dr. #10101 Plano, TX 75024 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> \$360.22 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.273 Nonpriority creditor's name and mailing address Michelle Dummond 1830 E. Yosemite Ave., SPC 228 Manteca, CA 95336 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> \$400.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.274 Nonpriority creditor's name and mailing address Mid Atlantic Waste Systems 7700 Old Alexandria Ferry Rd. Clinton, MD 20735 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,572.23 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.275 Nonpriority creditor's name and mailing address Mike Stella 1519 KKinslen Ct. Brea, CA 92821 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> \$45.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.276 Nonpriority creditor's name and mailing address Mobile Mini, LLC-CA PO Box 79149 Phoenix, AZ 85082-9149 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,958.24 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.277 Nonpriority creditor's name and mailing address Modspace 1200 Swedesford Rd. Temecula, CA 92589 Date(s) debt was incurred ___ Last 4 digits of account number ___	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,523.25 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.278 Nonpriority creditor's name and mailing address Moneyquest Corp. PO Box 73475 Metairie, LA 70033-3475 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> \$58.99 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.279 Nonpriority creditor's name and mailing address Moneytree Payment Center Check Team PO Box 58363 Seattle, WA 98136 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> \$573.11 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.280 Nonpriority creditor's name and mailing address Motor Carriers Forms Inc. 2703 Industrial Ave #2 Fort Pierce, FL 34948 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> \$810.86 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.281 Nonpriority creditor's name and mailing address Mountain Mist PO Box 44427 Tacoma, WA 98445-0427 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> \$69.74 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.282 Nonpriority creditor's name and mailing address Move Central, Inc. 5885 Pacific Center Blvd #204 San Diego, CA 92121 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> \$753.99 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.283 Nonpriority creditor's name and mailing address Moving.com Attn: Accounts Receivable PO Box 4455 Scottsdale, AZ 85621-4455 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> \$101.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.284 Nonpriority creditor's name and mailing address MSG Rentals, LLC 2750 Jim Hampton Court Las Vegas, NV 89117 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,482.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.285 Nonpriority creditor's name and mailing address Myrna Jewell 4045 Prospect Ave. #205 Yorba Linda, CA 92886 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> \$250.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.286	Nonpriority creditor's name and mailing address Nando's Fleet Service 2078 Logan Ave San Diego, CA 92113 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,199.65 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.287	Nonpriority creditor's name and mailing address National Positions 5012 Cheesboro Road, 2nd Floor Agoura Hills, CA 91301 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,178.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.288	Nonpriority creditor's name and mailing address Nattineque A. McClain 3943 Cherrywood Ave Los Angeles, CA 90008 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,640.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.289	Nonpriority creditor's name and mailing address NAVISTAR FINANCIAL CORP P.O. BOX 96070 Chicago, IL 60693-6070 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> \$53,000.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" 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
3.290	Nonpriority creditor's name and mailing address Nemecek & Cole 15260 Ventura Blvd Suite 920 Sherman Oaks, CA 91403-5344 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,296.81 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.291	Nonpriority creditor's name and mailing address New Hampshire Insurance Company c/o Adam Van Susteren 6031 Cirrus St. San Diego, CA 92110 Date(s) debt was incurred __ Last 4 digits of account number <u>9797</u>	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.292	Nonpriority creditor's name and mailing address New Hampshire Insurance Company 175 WATER ST FL 18 New York, NY 10038-4976 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> \$47,000.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.293	Starving Students of Nevada LLC Nonpriority creditor's name and mailing address New Haven Moving Equipment 1521 Essex St Los Angeles, CA 90021 Date(s) debt was incurred __ Last 4 digits of account number __	\$13,000.00 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
3.294	Nonpriority creditor's name and mailing address Nextel Communications PO Box 4161 Carol Stream, IL 60197-4181 Date(s) debt was incurred __ Last 4 digits of account number __	\$95,219.74 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.295	Nonpriority creditor's name and mailing address Nicole Latiolait 10408 Orange Port Court Las Vegas, NV 89129 Date(s) debt was incurred __ Last 4 digits of account number __	\$338.00 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.296	Nonpriority creditor's name and mailing address Nita Anglin 2682 Sonoma Run Riverside, CA 92504 Date(s) debt was incurred __ Last 4 digits of account number __	\$141.08 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.297	Nonpriority creditor's name and mailing address Nor-Cal Truck Repair & Tire Service 29303 Pacific Street Hayward, CA 94544 Date(s) debt was incurred __ Last 4 digits of account number __	\$5,533.08 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.298	Nonpriority creditor's name and mailing address Nusbaum-Corwin Trust 4413 Keystone Ave Culver City, CA 90232 Date(s) debt was incurred __ Last 4 digits of account number __	\$3,400.00 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.299	Nonpriority creditor's name and mailing address NV Energy PO Box 30088 Reno, NV 89520 Date(s) debt was incurred __ Last 4 digits of account number __	\$626.62 As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Starving Students of Nevada LLC** Case number (if known) _____
Name

3.300 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$832.54**
NV Energy-57
PO Box 30086
Reno, NV 89520-3086
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.301 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$158.00**
Oakland Fire Department
Fire Prevention Bureau
250 Frank H. Ogawa Plaza Suite 3341
Oakland, CA 94612
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.302 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$2,971.77**
OC Fleet Service
3731 W Warner Ave
Santa Ana, CA 92704
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.303 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$72.50**
Occupational Health Centers-AZ
of the Southwest PA
1818 E. Sky Harbor Cir N #150
Phoenix, AZ 85034-3407
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.304 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$399.78**
Occupational Health Ctr. of the Southwes
PO Box 9010
Broomfield, CO 80021
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.305 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$2,970.50**
Occupational Health Services of SW PA
PO Box 9010
Broomfield, CO 80021
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: Service
 Is the claim subject to offset? No Yes

3.306 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* **\$60.50**
Occupational Healthcenters
of the Southwest, P.A.
PO Box 9008
Broomfield, CO 80021-9008
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Contingent
 Unliquidated
 Disputed
Basis for the claim: Service
 Is the claim subject to offset? No Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.307 Nonpriority creditor's name and mailing address Occupational Healthcenters of the Southwest, P.A. PO Box 18277 Baltimore, MD 21227-0277 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> \$62.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.308 Nonpriority creditor's name and mailing address Office Depot PO BOX 70025 Los Angeles, CA 90074-0025 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> \$511.51 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.309 Nonpriority creditor's name and mailing address Office Of Finance City of Los Angeles-Bus. Tax PO Box 513996 Los Angeles, CA 90051-3996 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,153.03 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.310 Nonpriority creditor's name and mailing address Oleg Barkovski 550 N. Figueroa St. Los Angeles, CA 90012 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,458.33 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.311 Nonpriority creditor's name and mailing address On Trac 551 Courier St. Henderson, NV 89011 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> \$12,488.03 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.312 Nonpriority creditor's name and mailing address On-Site Mobile Truck Repair 5268 Niland Street Lynwood, CA 90262 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,711.32 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.313 Nonpriority creditor's name and mailing address Onsite Mechanics 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> \$110.55 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.314 Nonpriority creditor's name and mailing address OnTrac 274 Watts Way South San Francisco, CA 94080 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> \$2,409.22 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.315 Nonpriority creditor's name and mailing address Orange County Urology Assc. 25200 La Paz Rd. Ste. 200 Laguna Hills, CA 92653 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> \$286.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.316 Nonpriority creditor's name and mailing address Orange Grove Lincoln Group 656 N. Lincoln Ave Pasadena, CA 91103 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,200.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.317 Nonpriority creditor's name and mailing address Orange Towing, Inc. 832 N. Lemon St. Orange, CA 92867 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$90.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.318 Nonpriority creditor's name and mailing address Oscar Morales 4447 Posada Dr. Dallas, TX 75211 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> \$45.13 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.319 Nonpriority creditor's name and mailing address PACBL PO Box 5025 Carol Stream, IL 60197-5025 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,708.23 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.320 Nonpriority creditor's name and mailing address PACBN Payment Center CA 95857-0001 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,705.77 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.321 Nonpriority creditor's name and mailing address PAETEC-Cavalier PO Box 9001111 Louisville, KY 40290-1111 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$313.91 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.322 Nonpriority creditor's name and mailing address Parkerson Tire & Casing PO Box 961102 Fort Worth, TX 76161-1102 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$172.76 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.323 Nonpriority creditor's name and mailing address Patron Truck & Trailer Repair PO Box 444 Mira Loma, CA 91752 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$1,750.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.324 Nonpriority creditor's name and mailing address Peak Alarm Company, Inc. PO Box 27127 Salt Lake City, UT 84127-0127 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$821.25 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.325 Nonpriority creditor's name and mailing address Penske Truck Leasing PO Box 7429 Pasadena, CA 91109 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$4,986.25 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.326 Nonpriority creditor's name and mailing address Penske Truck Leasing Company, LP PO Box 7429 Pasadena, CA 91109-7429 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$82.34 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.327 Nonpriority creditor's name and mailing address Penske Truck Leasing-Citation PO Box 602577 Chicago, IL 60680-2577 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$1,814.26 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Service Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC Name	
3.328 Nonpriority creditor's name and mailing address Pepe's Towing Services, Inc. 918 S. Boyle Ave. Los Angeles, CA 90023 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> \$375.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.329 Nonpriority creditor's name and mailing address Pepperhill Tire Service PO Box 6067 Ashland, VA 23005 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> \$334.57 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.330 Nonpriority creditor's name and mailing address Perry Clough Petty Cash Custodian Branch #35 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.331 Nonpriority creditor's name and mailing address Pete's Road Service, Inc. 747 W. Rialto Ave. San Bernardino, CA 92410 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> \$884.92 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.332 Nonpriority creditor's name and mailing address Peter Seideman 136 East Main Street East Islip, NY 11730 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> \$588.24 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.333 Nonpriority creditor's name and mailing address PG&E 51 Box 997300 Sacramento, CA 95899-7300 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,129.55 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.334 Nonpriority creditor's name and mailing address PG&E-14 Box 997300 Sacramento, CA 95899-7300 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,657.26 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.335	Nonpriority creditor's name and mailing address Phillip Pettingill 4700 Miners Love Circle Loomis, CA 95650 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> \$257.36 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.336	Nonpriority creditor's name and mailing address Pierce County Auditor Department of Licensing 2401 S. 35th St. Room 200 Tacoma, WA 98409-7482 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> \$451.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.337	Nonpriority creditor's name and mailing address PLS Financial 800 Jorie Blvd Oak Brook, IL 60523 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> \$338.29 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.338	Nonpriority creditor's name and mailing address Premium Fleet Service 9610 Portland Ave E Gualala, CA 95445 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,659.73 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.339	Nonpriority creditor's name and mailing address Pro On-Site Fleet Services 2954 Moss Creek Ct. Stockton, CA 95219 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,572.23 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.340	Nonpriority creditor's name and mailing address Pro Star Towing, Inc. 355 Sango Court Milpitas, CA 95035 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> \$725.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.341	Nonpriority creditor's name and mailing address Progressive Waste Solutions of TX, Inc. Hamilton City Division PO Box 650470 Dallas, TX 75265 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$269.30 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.342	Nonpriority creditor's name and mailing address Puget Sound Energy PO Box 97034 Bellevue, WA 98009-9734 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> \$208.34 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.343	Nonpriority creditor's name and mailing address Questar Gas Company PO Box 45841 Salt Lake City, UT 84139-0001 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$78.88 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.344	Nonpriority creditor's name and mailing address Rackspace Hosting 755 University City Blvd Blacksburg, VA 24060 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,771.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.345	Nonpriority creditor's name and mailing address RC Mobile Truck Repair Serv. 2059 Catalina Ave. Vista, CA 92084 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> \$692.92 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.346	Nonpriority creditor's name and mailing address Receivable Management Services 4836 Brecksville Rd. PO Box 523 Richfield, OH 44286 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,163.12 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.347	Nonpriority creditor's name and mailing address Redburn Tire Company PO Box 14828 Phoenix, AZ 85063 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> \$317.66 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.348	Nonpriority creditor's name and mailing address Reginald Lewis c/o Jennifer Lenze Lenze Kamerrer Moss, PLC 1300 Highland Ave #207 Manhattan Beach, CA 90266 Date(s) debt was incurred __ Last 4 digits of account number <u>5523</u>	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.349	Nonpriority creditor's name and mailing address Republic Moving & Storagee 2311 Boswell Rd. Ste #5 Chula Vista, CA 91914 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> \$2,887.85 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card purchases</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.350	Nonpriority creditor's name and mailing address Republic Service (Allied Waste) #915 PO Box 78829 Phoenix, AZ 85062-5829 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> \$2,254.07 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.351	Nonpriority creditor's name and mailing address Republic Services PO Box 78829 Phoenix, AZ 85062-8829 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,962.81 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.352	Nonpriority creditor's name and mailing address Richard J. Kossler, Attorney 4199 Flat Rock Dr. Suite 125 Riverside, CA 92505 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> \$828.94 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.353	Nonpriority creditor's name and mailing address Richmond Alarm Company 6829-F Atmore Drive Richmond, VA 23225 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> \$254.43 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.354	Nonpriority creditor's name and mailing address Richmond times-Dispatch PO Box 27775 Richmond, VA 23261-7775 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> \$561.34 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.355	Nonpriority creditor's name and mailing address Rick Powell AshJer, LLC. 1850 Sawtelle Blvd. St. 350 Los Angeles, CA 90025 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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC Name <hr/> 3.356 Nonpriority creditor's name and mailing address Road Service, LLC 4545 E. University Rd. Phoenix, AZ 85034 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> \$703.42 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.357 Nonpriority creditor's name and mailing address Robinson Di Lando 800 Wilshire Blvd Suite 750 Los Angeles, CA 90017-2687 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> \$26,560.31 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.358 Nonpriority creditor's name and mailing address Rocky Mountain Power 1033 NE 8th Ave Portland, OR 97256-0001 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,237.39 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.359 Nonpriority creditor's name and mailing address Romulo V Alcantara 12112 28th Ave S Apt R2 Seattle, WA 98168 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,230.13 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.360 Nonpriority creditor's name and mailing address Ron Sawvel and Maria Sawvel 2988 Rochester Circle Corona, CA 92879 Date(s) debt was incurred __ Last 4 digits of account number <u>0009</u>	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.361 Nonpriority creditor's name and mailing address Rosenthal, Morgan and Thomas, Inc. 12747 Olive Boulevard Suite 250 Saint Louis, MO 63141 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,258.29 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.362 Nonpriority creditor's name and mailing address Roxborough, Pomerance, Nye & Adreani 5820 Canoga Ave., Suite 200 San Diego, CA 92138 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> \$2,598.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.363	Nonpriority creditor's name and mailing address S&G Truck Services PO Box 1208 West Sacramento, CA 95605 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,680.62 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.364	Nonpriority creditor's name and mailing address S. Morris Mobile Services, LLC PO Box 588 Alviso, CA 95002 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> \$495.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.365	Nonpriority creditor's name and mailing address San Diego Gas & Electric-03 Po Box 25111 Santa Ana, CA 92799 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> \$131.58 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.366	Nonpriority creditor's name and mailing address San Jose Water Company 110 W. Taylor St. San Jose, CA 95110-2131 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> \$454.68 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.367	Nonpriority creditor's name and mailing address San Pedro Alondra Realty c/o Alden Management Group 150 Paularino Avenue Suite 194 Costa Mesa, CA 92626 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,897.75 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.368	Nonpriority creditor's name and mailing address Sanchez Truck Repair & Towing 20 Wilbur Ave. Yuba City, CA 95991 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> \$750.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.369	Nonpriority creditor's name and mailing address Sandra Kuhn McCormack 330 Once Center Court, Sulle C Bakersfield, CA 93309 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> \$47,855.58 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
3.370	Nonpriority creditor's name and mailing address Sandra Sinclair 850 Belmont Lane Tracy, CA 95377 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> \$177.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.371	Nonpriority creditor's name and mailing address Santa Fe Station PO Box 34526 Las Vegas, NV 89133 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,187.74 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.372	Nonpriority creditor's name and mailing address Sara Wicks-Expense Expense Reimbursement Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,480.84 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.373	Nonpriority creditor's name and mailing address Sawtelle Partners, LLC 1850 Sawtelle Blvd Los Angeles, CA 90025 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Rent</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.374	Nonpriority creditor's name and mailing address Sean Johnson Mileage Reimbursements 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> \$33.55 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.375	Nonpriority creditor's name and mailing address Sean Verrette Mileage Reimbursement 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> \$44.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.376	Nonpriority creditor's name and mailing address Seattle Commerical Tire PO Box 64143 Seattle, WA 98124-5443 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> \$219.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.377 Nonpriority creditor's name and mailing address Secretary of State 202 North Carson St. Carson City, NV 89701-4201 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$20.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.378 Nonpriority creditor's name and mailing address SFMTA PO Box 7718 San Francisco, CA 94120 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> \$110.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.379 Nonpriority creditor's name and mailing address Shannon Katuszonek 272 Kensington Ct. Princeton, WV 24740 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> \$750.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.380 Nonpriority creditor's name and mailing address Sharyn Slavick 8969 E Sun Lakes Blvd N Sun Lakes, AZ 85248 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> \$300.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.381 Nonpriority creditor's name and mailing address Shaun Acosta-Betz Petty Cash Custodian Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$95.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.382 Nonpriority creditor's name and mailing address Shelly Abernathy 620 Santa Monica Blvd #212 Santa Monica, CA 90401 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> \$48.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.383 Nonpriority creditor's name and mailing address Sonitrol PO Box 9189 Fresno, CA 93791-9189 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> \$504.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.384 Nonpriority creditor's name and mailing address South Bay Expressway Customer Service Center 1129 La Media Rd. San Diego, CA 92154 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$42.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.385 Nonpriority creditor's name and mailing address South Bay Wellness Center 1066 Saratoga Ave. Ste 120 San Jose, CA 95129-3432 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> \$400.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.386 Nonpriority creditor's name and mailing address Southcoast Medical Clinic 408 W 8th St. National City, CA 91950 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> \$299.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.387 Nonpriority creditor's name and mailing address Southeastern Truck & Trailer 2201 Commerce Road Richmond, VA 23234 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> \$14,516.30 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.388 Nonpriority creditor's name and mailing address Southern California Edison PO Box 300 Rosemead, CA 91772-0001 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$372.10 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.389 Nonpriority creditor's name and mailing address Southwest Movers Association 700 E. 111th Street Austin, TX 78701 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> \$570.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.390 Nonpriority creditor's name and mailing address Sparks 7321 15th Place SE Lake Stevens, WA 98258 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,448.35 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	Name	Case number (if known)
	Starving Students of Nevada LLC	
3.391	Nonpriority creditor's name and mailing address Speedy Cash PO Box 750408 Wichita, KS 67278 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> \$420.17 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.392	Nonpriority creditor's name and mailing address Sprint-Modem PO Box 219530 Kansas City, MO 64121-9530 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> \$67.23 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.393	Nonpriority creditor's name and mailing address Squire Sanders (US) LLP 555 SOUTH FLOWER STREET 31ST FLOOR Los Angeles, CA 90071 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> \$56,661.80 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.394	Nonpriority creditor's name and mailing address SRP PO Box 2950 Phoenix, AZ 85062-2950 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> \$28.88 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.395	Nonpriority creditor's name and mailing address SRP12 PO Box 80062 Prescott, AZ 86304-8062 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,231.74 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.396	Nonpriority creditor's name and mailing address SSF Scavenger Co. PO Box 348 South San Francisco, CA 94083-0348 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,085.67 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.397	Nonpriority creditor's name and mailing address St. Rent It 2081 First St Ste 200 Simi Valley, CA 93065-2819 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> \$459.40 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.398 Nonpriority creditor's name and mailing address Stan Levy Consulting 245 Sunnyside Ave. Sonoma, CA 95476 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> \$690.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.399 Nonpriority creditor's name and mailing address Stephen McKenzie c/o Jennifer Lenze, Esq. Lenze Kamerrer Moss, PLC 1300 Highland Ave. Suite 207 Manhattan Beach, CA 90266 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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.400 Nonpriority creditor's name and mailing address Stevi Anderson 347 E. Sherman Avenue Vineland, NJ 08360 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> \$70.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.401 Nonpriority creditor's name and mailing address Stubbs Alderton & Markiles, LLP 15260 Ventura Blvd, 20th Floor Sherman Oaks, CA 91403 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,219.65 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.402 Nonpriority creditor's name and mailing address SUPERMEDIA LLC PO BOX 619009 Dallas, TX 75261-8009 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> \$38,957.46 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.403 Nonpriority creditor's name and mailing address Tacoma Commercial Tires 7419 Elk Creek Lane Gig Harbor, WA 98335 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> \$415.20 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.404 Nonpriority creditor's name and mailing address Tamara Sparks 3653 Briar Grove Dallas, TX 75287 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> \$69.57 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.405 Nonpriority creditor's name and mailing address Tanks Mobile Mechanic Service 9575 Balboa St. Ventura, CA 93004 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> \$75.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.406 Nonpriority creditor's name and mailing address Taylor Truck & Trailer, Inc. 4620 Cattleman Ave. North Las Vegas, NV 89031 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> \$177.30 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.407 Nonpriority creditor's name and mailing address TBF Financial c/o Stephanie M. Levy, Esq. Henrichs Law Firm, P.C. 3250 Wilshire Blvd Suite 2000 Los Angeles, CA 90010 Date(s) debt was incurred __ Last 4 digits of account number <u>2177</u>	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: <u>Notice Only</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.408 Nonpriority creditor's name and mailing address TBF Financial 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> \$46,801.08 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.409 Nonpriority creditor's name and mailing address Teletrac, Inc. Dept LA 23726 Pasadena, CA 91185-3728 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,323.74 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.410 Nonpriority creditor's name and mailing address Terry Berkery 5424 Shire Ct. Fair Oaks, CA 95628 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> \$33.74 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.411 Nonpriority creditor's name and mailing address The Hartford PO Box 660916 Dallas, TX 75266 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> \$693.99 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.412 Nonpriority creditor's name and mailing address The New Haven Companies 4601 Solution Center Chicago, IL 60677-4008 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> \$13,868.05 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.413 Nonpriority creditor's name and mailing address Theresa Bowen 1119 W. Monte Vista Ave. Visalia, CA 93277 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> \$206.98 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.414 Nonpriority creditor's name and mailing address Theresa Brumfield 1809 Howe St. Fairfield, CA 94534 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> \$100.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.415 Nonpriority creditor's name and mailing address Tiffany Hill 5010 E. Cheyenne Dr. #2112 Phoenix, AZ 85044 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> \$120.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.416 Nonpriority creditor's name and mailing address Time Warner Cable-04 PO Box 60074 City of Industry, CA 91716 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> \$2,867.74 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.417 Nonpriority creditor's name and mailing address Time Warner Cable-17 PO Box 60074 City of Industry, CA 91716-0074 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> \$2,003.71 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.418 Nonpriority creditor's name and mailing address Tom's Towing 6123 Inez Street #6 Ventura, CA 93003 Date(s) debt was incurred <u>1HTSDAAL3XH678395</u> <u>LIC. 0U03758 CA, YEAR 1999- INTL</u> Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,730.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
<p>3.419 Nonpriority creditor's name and mailing address</p> <p>Tom's Towing 6123 Inez Street #6 Ventura, CA 93003</p> <p>Date(s) debt was incurred <u>IHTMMAL07H382669</u> <u>LIC. 35425L1 CA-YEAR 2007. INTL</u></p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,730.00</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Service</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.420 Nonpriority creditor's name and mailing address</p> <p>Tom's Towing 6123 Inez Street #6 Ventura, CA 93003</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number <u>2001</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,730.00</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Service</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.421 Nonpriority creditor's name and mailing address</p> <p>Transguard Insurance Company of America 215 Shuman Blvd #400 Naperville, IL 60563</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,900.00</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Service</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.422 Nonpriority creditor's name and mailing address</p> <p>Transport Graphics 5655 Van Buren Blvd. Suite D Riverside, CA 92503</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$10.50</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Service</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.423 Nonpriority creditor's name and mailing address</p> <p>Travelers Commercial Insurance Company PO Box 660339 Dallas, TX 75260-5000</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,666.67</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Service</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.424 Nonpriority creditor's name and mailing address</p> <p>Travon M. Mitchell 3001 Sherbourned Rd. Richmond, VA 23237</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$248.24</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Service</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
<p>3.425 Nonpriority creditor's name and mailing address</p> <p>Trayvon Mclemore Petty Cash Custodian</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i> \$301.18</p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Service</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.426 Nonpriority creditor's name and mailing address Tricade 10620 Treena St. Ste. 230 San Diego, CA 92131 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$400.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.427 Nonpriority creditor's name and mailing address Trowe Net, Inc. 3720 Skypark Dr. Torrance, CA 90505 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$2,300.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.428 Nonpriority creditor's name and mailing address TSP Enterprises c/o L.B. Hunt Management Group 176 North 2200 West Suite 200 Salt Lake City, UT 84116 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$889.11 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.429 Nonpriority creditor's name and mailing address Turn Technology Solutions 4534 Leon Street San Diego, CA 92107 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$2,200.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.430 Nonpriority creditor's name and mailing address Tyco Inregrated Security PO Box 371994 Pittsburgh, PA 15250-7994 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$3,151.19 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.431 Nonpriority creditor's name and mailing address Union Tires & Truck Repairs 1623 Miller Ave. Los Angeles, CA 90063 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$640.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.432 Nonpriority creditor's name and mailing address Universal Catering Manufacturing 4310 Frontage Road South Highway 99 Stockton, CA 95215 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: Check all that apply. \$4,800.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.433 Nonpriority creditor's name and mailing address US Healthworks PO Box 50042 Los Angeles, CA 90074 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$5,199.79 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.434 Nonpriority creditor's name and mailing address US Healthworks Medical Group, P.C. PO Box 50042 Los Angeles, CA 90074 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$95.50 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.435 Nonpriority creditor's name and mailing address US National Leasing, LLC 18 Business Park Way Sacramento, CA 95825 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,634.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.436 Nonpriority creditor's name and mailing address Valley Yellowpages DEPT. 33302 P. O. BOX 39000 San Francisco, CA 94139-3302 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> \$66,392.24 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.437 Nonpriority creditor's name and mailing address Van Lingen Towing 20821 Earl St. Torrance, CA 90505 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> \$260.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.438 Nonpriority creditor's name and mailing address VANLINER INSURANCE COMPANY PO Box 956586 Saint Louis, MO 63195-6586 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> \$40,969.06 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.439 Nonpriority creditor's name and mailing address Vision Service Plan PO Box 45210 San Francisco, CA 94145-5210 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> \$309.14 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.440 Nonpriority creditor's name and mailing address Waste Management-51 Stockton Scavengers PO Box 541065 Los Angeles, CA 90054-1065 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> \$660.99 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.441 Nonpriority creditor's name and mailing address Waste Management of Alameda County PO Box 541085 Los Angeles, CA 90054-1065 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> \$830.21 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.442 Nonpriority creditor's name and mailing address Waste Management of Maryland PO Box 13648 Philadelphia, PA 19101-3648 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> \$383.63 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.443 Nonpriority creditor's name and mailing address Waste Management-03 of El Cajon-San Diego PO Box 541065 Los Angeles, CA 90054-1085 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> \$699.62 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.444 Nonpriority creditor's name and mailing address Webimax Attn: Erica 15000 Commerce Parkway, Suite U Mount Laurel, NJ 08054 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$7,404.52 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.445 Nonpriority creditor's name and mailing address West Coast Truck Service 201 West 18th Street National City, CA 91950 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> \$2,625.70 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.446 Nonpriority creditor's name and mailing address Western Trailer Repair 707 South Lucille Street PO Box 80887 Seattle, WA 98198 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> \$128.24 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)
Starving Students of Nevada LLC	
3.447 Nonpriority creditor's name and mailing address Westlux International, Inc. 15555 Valley View Ave. Santa Fe Springs, CA 90670 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> \$644.35 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.448 Nonpriority creditor's name and mailing address William R. Schulte 549 Vista Drive Redwood City, CA 94062 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,500.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.449 Nonpriority creditor's name and mailing address WTA Services Inc. 2102 Carriage Dr SW, Bldg F Olympia, WA 98502 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> \$15,286.81 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.450 Nonpriority creditor's name and mailing address Xerox Corporation PO Box 7405 Pasadena, CA 91105-7405 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,553.49 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.451 Nonpriority creditor's name and mailing address Yellowbrook-Mid Atlantic PO Box 11815 Newark, NJ 07101-8115 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> \$742.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.452 Nonpriority creditor's name and mailing address Yellowpages.com, LLC AT&T Advertising Solutions PO Box 601141 Pasadena, CA 91189-1141 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,967.06 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.453 Nonpriority creditor's name and mailing address Yolanda White 1825 Merlot Ave. Modesto, CA 95351 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> \$242.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Starving Students of Nevada LLC Case number (if known) _____
Name

3.454	Nonpriority creditor's name and mailing address YPM, Inc. Attn: Robert Lendino 18400 Von Karmen Suite 200 Irvine, CA 92612 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,550.60
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3.455	Nonpriority creditor's name and mailing address Zenith Insurance Company 21255 Califa Street Woodland Hills, CA 91367 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,500.00
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3.456	Nonpriority creditor's name and mailing address ZURICH DEDUCTIBLE RECOVERY GROUP PO BOX 8066-11 Hermitage, PA 16148-1066 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$37,064.00
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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	Worker's Compensation Appeals Board 455 Golden Gate Avenue 2nd Floor San Francisco, CA 94102	Line <u>3.19</u> <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. \$ <u>1,201,503.07</u>
5b. Total claims from Part 2	5b. + \$ <u>2,717,133.35</u>
5c. Total of Parts 1 and 2 <small>Lines 5a + 5b = 5c.</small>	5c. \$ <u>3,918,636.42</u>

Fill in this information to identify the case:

Debtor name Starving Students of Nevada LLC

United States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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

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

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

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

2. List all contracts and unexpired leases

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

2.1.	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Lease for premises at 2655 S. Rainbow Blvd., Las Vegas, NV 89146 2/11/2017	B.H. Rainbow Plaza, LLC Attn: Arsalan Gozini P.O. Box 49993 Los Angeles, CA 90049
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Fill in this information to identify the case:

Debtor name Starving Students of Nevada LLC

United States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

Check if this is an amended filing

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

12/15

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

1. Do you have any codebtors?

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

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

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 Ethan Margalith	1850 Sawtelle Blvd Suite 300 Los Angeles, CA 90025	CDS Moving Equipment	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.95</u> <input type="checkbox"/> G _____
2.2 Ethan Margalith	1850 Sawtelle Blvd Suite 300 Los Angeles, CA 90025	Rick Powell	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.355</u> <input type="checkbox"/> G _____

Fill in this information to identify the case:

Debtor name Starving Students of Nevada LLC

United States Bankruptcy Court for the: DISTRICT OF NEVADA

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)

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)

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 of value

Reasons for payment or transfer
Check all that apply

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
Relationship to debtor

Dates

Total amount of value

Reasons for payment or transfer

Debtor **Starving Students of Nevada LLC**

Case number (if known) _____

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Ethan Margalith 1850 Sawtelle Blvd Suite 300 Los Angeles, CA 90025 Insider	8/3/2015 10/8/2015 10/14/2015 11/2/2015 11/2/2015 11/2/2015 11/2/2015 11/2/2015 11/2/2015 11/3/2015 12/2/2015 12/4/2015 12/7/2015 12/7/2015 12/8/2015 12/15/2015 12/15/2015 12/21/2015 12/21/2015 12/21/2015 12/21/2015 12/21/2015 12/21/2015 12/22/2015 12/22/2015 12/22/2015 12/28/2015 12/29/2015 12/30/2015 12/30/2015 1/4/2016 1/4/2016 10/19/2015 10/19/2015 10/19/2015 10/19/2015 10/27/2015 10/29/2015 10/30/2015 11/12/2015 11/12/2015 11/17/2015 11/27/2015 11/27/2015 11/24/2015	\$48,281.87	Reimbursement or payment of expenses of Debtor

Debtor **Starving Students of Nevada LLC**

Case number (if known) _____

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.2. Sawtelle Partners, LLC 1850 Sawtelle Blvd Los Angeles, CA 90025 Insider	12/14/2015,1 1/2/2015,11/2 /2015,11/2/20 15,11/3/2015, 11/3/2015,11/ 3/2015,11/3/2 015,11/3/201 5,11/3/2015 11/3/2015, 12/1/2015, 12/7/2015, 12/8/2015,12/ 9/2015 12/10/2015, 12/11/2015,1 2/14/2015,12/ 15/2015 12/16/2015,1 2/18/2015,12/ 21/2015,12/2 2/2015 12/23/2015, 12/24/2015, 12/28/2015, 12/29/2015 7/1/2015,7/2/ 2015,7/3/201 5,7/7/2015,7/ 8/2015 7/9/2015,7/10 /2015,7/13/20 15,7/14/2015, 7/16/2015 7/20/2015,7/2 2/2015,7/24/2 015,7/27/201 5, 7/28/2015, 11/2/2015 11/2/2015 11/3/2015 11/3/2015 11/4/2015	\$742,637.97	Reimbursement or payment of expenses of Debtor

Debtor **Starving Students of Nevada LLC**

Case number (if known) _____

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.3. Starving Students, Inc. Sole Member and Manager	6/1/2015 6/2/2015 6/3/2015 6/4/2015 6/4/2015 6/5/2015 6/5/2015 6/8/2015 6/8/2015 6/8/2015 6/11/2015 6/11/2015 6/12/2015 6/15/2015 6/16/2015 6/17/2015 6/18/2015 6/18/2015 6/19/2015 6/22/2015 6/23/2015 6/24/2015,6/2 5/2015,6/26/2 015, 6/29/2015 6/30/2015,7/6 /2015,7/6/201 5 7/9/2015,7/10 /2015,7/13/20 15 7/14/2015,7/2 2/2015,8/3/20 15,9/3/2015	\$354,223.76	Reimbursement or payment of expenses of Debtor

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	Describe of the Property	Date	Value of property
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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
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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.

Debtor **Starving Students of Nevada LLC**

Case number (if known) _____

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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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

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
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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>	Dates of loss	Value of property lost
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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? Address	If not money, describe any property transferred	Dates	Total amount or value
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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
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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.

Debtor **Starving Students of Nevada LLC**

Case number (if known) _____

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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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 From-To
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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
---------------------------	---	---

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.

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?

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 or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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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 Address	Description of the contents	Do you still have it?
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Debtor **Starving Students of Nevada LLC**

Case number (if known) _____

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	Do you still have it?
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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

Part 12: Details About Environment 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 Case number	Court or agency name and address	Nature of the case	Status of case
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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
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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
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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

Debtor **Starving Students of Nevada LLC**

Case number (if known) _____

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		Dates business existed

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	Date of service From-To
26a.1. Jean Fria 1850 Sawtelle Blvd., Ste. 300 Los Angeles, CA 90025	2000-2015
26a.2. Caerna Ibatuan 1850 Sawtelle Blvd., Ste. 300 Los Angeles, CA 90025	2008-2016

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	Date of service From-To
26b.1. Holthouse Carlin & Van Tright 11444 W. Olympic Blvd., 11th Floor Los Angeles, CA 90064	

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. Chris Carllson c/o Matthew R. Carlyn, Esq. 3800 Howard Hughes Pkwy., Ste. 500 Las Vegas, NV 89169	
26c.2. Gursey Schneider LLP 1888 Century Park East Los Angeles, CA 90067	
26c.3. Holthouse Carlin & Van Tright 11444 W. Olympic Blvd., 11th Floor Los Angeles, CA 90064	

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

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
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Debtor **Starving Students of Nevada LLC**

Case number (if known) _____

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
Ethan Margalith	2655 Rainbow Blvd., Ste. 110 Las Vegas, NV 89146	Sole member of Starving Students, Inc., Debtor's managing member	100

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.

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
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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
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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 parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

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 June 8, 2016

/s/ Ethan Margalith
Signature of individual signing on behalf of the debtor

Ethan Margalith
Printed name

Position or relationship to debtor Sole member of Starving Students, Inc., Debtor's managing me

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

- No
- Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court
District of Nevada**

In re Starving Students of Nevada LLC

Debtor(s)

Case No.

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

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.....	\$	<u>75,000.00</u>
Prior to the filing of this statement I have received.....	\$	<u>75,000.00</u>
Balance Due.....	\$	<u>0.00</u>

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

Debtor Other (specify): **Mannis Family Trust**

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 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:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

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

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.

June 8, 2016

Date



Mark M. Weisenmiller, Esq. 12128

Signature of Attorney

Garman Turner Gordon LLP

650 White Drive

Suite 100

Las Vegas, NV 89119

725-777-3000 Fax: 725-777-3112

bknotices@gtg.legal

Name of law firm

**United States Bankruptcy Court
District of Nevada**

In re Starving Students of Nevada LLC

Debtor(s)

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
Starving Students, Inc. 2655 Rainbow Blvd., Ste. 710 Las Vegas, NV 89146		100%	Equity

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the **Sole member of Starving Students, Inc., Debtor's managing me** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date June 8, 2016

Signature



Ethan Margalith

*Penalty for making a false statement of concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.*

**United States Bankruptcy Court
District of Nevada**

In re **Starving Students of Nevada LLC**

Debtor(s)

Case No.

Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the Sole member of Starving Students, Inc., Debtor's managing me of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **June 8, 2016**



**Ethan Margalith/Sole member of Starving Students, Inc., Debtor's
managing me
Signer/Title**

Starving Students of Nevada LLC
2655 Rainbow Blvd., Ste. 110
Las Vegas, NV 89146

Mark M. Weisenmiller, Esq.
Garman Turner Gordon LLP
650 White Drive
Suite 100
Las Vegas, NV 89119

1-800-PACK-RAT, LLC
Acct No xxxx2580
c/o Todd A. Brisco, Esq.
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Los Angeles, CA 90021

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29303 Pacific Street
Hayward, CA 94544

Nusbaum-Corwin Trust
4413 Keystone Ave
Culver City, CA 90232

NV Energy
PO Box 30088
Reno, NV 89520

NV Energy-57
PO Box 30086
Reno, NV 89520-3086

Oakland Fire Department
Fire Prevention Bureau
250 Frank H. Ogawa Plaza Suite 3341
Oakland, CA 94612

OC Fleet Service
3731 W Warner Ave
Santa Ana, CA 92704

Occupational Health Centers-AZ
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1818 E. Sky Harbor Cir N #150
Phoenix, AZ 85034-3407

Occupational Health Ctr. of the Southwes
PO Box 9010
Broomfield, CO 80021

Occupational Health Services of SW PA
PO Box 9010
Broomfield, CO 80021

Occupational Healthcenters
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Broomfield, CO 80021-9008

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551 Courier St.
Henderson, NV 89011

On-Site Mobile Truck Repair
5268 Niland Street
Lynwood, CA 90262

Onsite Mechanics

OnTrac
274 Watts Way
South San Francisco, CA 94080

Orange County Urology Assc.
25200 La Paz Rd. Ste. 200
Laguna Hills, CA 92653

Orange Grove Lincoln Group
656 N. Lincoln Ave
Pasadena, CA 91103

Orange Towing, Inc.
832 N. Lemon St.
Orange, CA 92867

Oscar Morales
4447 Posada Dr.
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Carol Stream, IL 60197-5025

PACBN
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Fort Worth, TX 76161-1102

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Salt Lake City, UT 84127-0127

Penske Truck Leasing
PO Box 7429
Pasadena, CA 91109

Penske Truck Leasing Company, LP
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Pasadena, CA 91109-7429

Penske Truck Leasing-Citation
PO Box 602577
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Los Angeles, CA 90023

Pepperhill Tire Service
PO Box 6067
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Perry Clough
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San Bernardino, CA 92410

Peter Seideman
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Oak Brook, IL 60523

Premium Fleet Service
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Pro On-Site Fleet Services
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Pro Star Towing, Inc.
355 Sango Court
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Progressive Waste Solutions of TX, Inc.
Hamilton City Division
PO Box 650470
Dallas, TX 75265

Puget Sound Energy
PO Box 97034
Bellevue, WA 98009-9734

Questar Gas Company
PO Box 45841
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Blacksburg, VA 24060

RC Mobile Truck Repair Serv.
2059 Catalina Ave.
Vista, CA 92084

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PO Box 523
Richfield, OH 44286

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PO Box 14828
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Sean Verrette
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Simi Valley, CA 93065-2819

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City of Industry, CA 91716

Time Warner Cable-17
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Tom's Towing
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Tom's Towing
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Salt Lake City, UT 84116

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Tyco Inregrated Security
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United States Trustee
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Las Vegas, NV 89101

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Los Angeles, CA 90074

US Healthworks Medical Group, P.C.
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8800 Motor Vehicle Division
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VANLINER INSURANCE COMPANY
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Waste Management-51
Stockton Scavengers
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Waste Management of Alameda County
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Los Angeles, CA 90054-1065

Waste Management of Maryland
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Philadelphia, PA 19101-3648

Waste Management-03
of El Cajon-San Diego
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Irvine, CA 92612

Zenith Insurance Company
21255 Califa Street
Woodland Hills, CA 91367

ZURICH DEDUCTIBLE RECOVERY GROUP
PO BOX 8066-11
Hermitage, PA 16148-1066

United States Bankruptcy Court
District of Nevada

In re Starving Students of Nevada LLC

Debtor(s)

Case No.

Chapter 11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Starving Students of Nevada LLC in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

Starving Students, Inc.
2655 Rainbow Blvd., Ste. 710
Las Vegas, NV 89146

None [*Check if applicable*]

June 8, 2016

Date



Mark M. Weisenmiller, Esq. 12128

Signature of Attorney or Litigant

Counsel for **Starving Students of Nevada LLC**

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