

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF NEW YORK

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 LaFlamme's Inc.

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) 30-0126185

4. Debtor's address Principal place of business Mailing address, if different from principal place of business 9140 State Route 22 Granville, NY 12832 Washington 239 Main Street Bennington, VT 05201

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 LaFlamme's Inc.
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 _____	Relationship _____
District _____	When _____ Case number, if known _____

Debtor LaFlamme's Inc.
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

1-49

50-99

100-199

200-999

1,000-5,000

5001-10,000

10,001-25,000

25,001-50,000

50,001-100,000

More than 100,000

15. Estimated Assets

\$0 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$500,000

\$500,001 - \$1 million

\$1,000,001 - \$10 million

\$10,000,001 - \$50 million

\$50,000,001 - \$100 million

\$100,000,001 - \$500 million

\$500,000,001 - \$1 billion

\$1,000,000,001 - \$10 billion

\$10,000,000,001 - \$50 billion

More than \$50 billion

16. Estimated liabilities

\$0 - \$50,000

\$50,001 - \$100,000

\$100,001 - \$500,000

\$500,001 - \$1 million

\$1,000,001 - \$10 million

\$10,000,001 - \$50 million

\$50,000,001 - \$100 million

\$100,000,001 - \$500 million

\$500,000,001 - \$1 billion

\$1,000,000,001 - \$10 billion

\$10,000,000,001 - \$50 billion

More than \$50 billion

Debtor LaFlamme's Inc. Case number (if known) _____
Name

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 September 18, 2017
MM / DD / YYYY

X /s/ Christopher LaFlamme
Signature of authorized representative of debtor

Title _____

Christopher LaFlamme
Printed name

18. Signature of attorney

X /s/ Richard H. Weiskopf, Esq.
Signature of attorney for debtor

Date **September 18, 2017**
MM / DD / YYYY

Richard H. Weiskopf, Esq.
Printed name

The DeLorenzo Law Firm, LLP.
Firm name

670 Franklin St., Suite 100
Schenectady, NY 12305
Number, Street, City, State & ZIP Code

Contact phone (518) 374-8450 Email address Rweiskopf@delolaw.com

102805
Bar number and State

Fill in this information to identify the case:

Debtor name LaFlamme's Inc.

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

Case number (if known) _____

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

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

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

Declaration and signature

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

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

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

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

Executed on September 18, 2017

X /s/ Christopher LaFlamme

Signature of individual signing on behalf of debtor

Christopher LaFlamme

Printed name

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name LaFlamme's Inc.

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

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
Avid Capital Acct.No. XXX-N/A 385 Chestnut Hill Road Cambridge, NY 12816		ucc inventory promissory note		\$250,202.16	\$0.00	\$250,202.16
BAI Rutland LLC Acct.No. T037-XXX c/o Zamias Services PO Box 5540 Johnstown, PA 15904						\$45,317.82
Best Chairs Inc Acct.No. 3434-XXX 1195 Solutions Center Chicago, IL 60677						\$15,514.39
Capital Solutions Wells Fargo Commercial Distribution Fina 5595 Trillium Blvd., 4th Floor Recovery Hoffman Estates, IL 60192		ucc inventory		\$19,563.90	\$0.00	\$19,563.90
Capital Solutions Acct.No. 1958-XXX 500 Momamy Dr St Joseph, MI 49085						\$19,563.90
Chase-New Acct.No. XXX-7890 Cardmember Services PO Box 15153 Wilmington, DE 19886						\$7,480.19

Debtor LaFlamme's Inc.
Name

Case number (if known) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of 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
Christopher LaFlamme Acct.No. XXX-N/A 107 North St Wells, VT 05764						\$11,936.46
DM Reid Acct.No. XXX-N/A 50 Grove St. #227 Salem, MA 01970		ucc inventory	Disputed	\$13,000.00	\$0.00	\$13,000.00
England Furniture Acct.No. XXX-LFVT 1 Lay-Z-Boy Dr Creit 2b Monroe, MI 48162						\$20,744.15
Green Mountain Power Acct.No. XXX-0004 PO Box 1611 Brattleboro, VT 05302						\$21,923.31
Heritage Family Credit Union Acct.No. XXX-N/A 30 Allen Street Rutland, VT 05701		all personalty		\$239,808.05	\$150.00	\$239,658.05
Heritage Home Group, LLC Acct.No. XXX-1031 d/b/a Broyhill PO Box 842386 Boston, MA 02284			Disputed			\$11,476.72
New England Newspaper Acct.No. XXX-N/A 1 Arrow Drive, Suite 6 Woburn, MA 01801						\$7,257.20
NYS Dept of Taxation and Finance Bankruptcy Section PO Box 5300 Albany, NY 12205-0300						\$11,250.00
Schuyler Company Acct.No. XXX-837S 596 New Loudon Rd Latham, NY 12110						\$12,353.34
Serta Simmons Acct.No. XXX-4062 13347 Collections Ctr Chicago, IL 60693						\$147,544.57

Debtor LaFlamme's Inc.
Name

Case number (if known) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of 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
Sunset Trading, div.of SFI Ilc Acct.No. XXX-N/A 701 E. Ind. Pk. Dr. Manchester, NH 03109		ucc floor plan 3 Diamond Run Mall Pl, Rutland, VT 05701		\$30,000.00	\$0.00	\$30,000.00
Sunset Trading, div.of SFI Ilc Acct.No. XXX-N/A 701 E. Ind. Pk. Dr. Manchester, NH 03109		ucc floor plan 239 Main St, Bennington, VT 05201		\$23,000.00	\$0.00	\$23,000.00
Vermont Department of Taxes 133 State Street, 1st Floor Montpelier, VT 05603						\$62,652.00
Washington County 383 Broadway Fort Edward, NY 12828						\$14,000.00

Fill in this information to identify the case:

Debtor name LaFlamme's Inc.

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

Case number (if known) _____

Check if this is an amended filing

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

12/15

Part 1: Summary of Assets

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

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ <u>849,000.00</u>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ <u>473,338.92</u>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ <u>1,322,338.92</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>1,587,745.57</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>87,902.00</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ <u>371,704.39</u>
4. Total liabilities Lines 2 + 3a + 3b	\$ <u>2,047,351.96</u>

Fill in this information to identify the case:

Debtor name LaFlamme's Inc.

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

Case number (if known) _____

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

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

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

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

Part 1: Cash and cash equivalents

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

No. Go to Part 2.

Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor **Current value of debtor's interest**

2. **Cash on hand** **\$150.00**

3. **Checking, savings, money market, or financial brokerage accounts** *(Identify all)*

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	
--	-----------------	---------------------------------	--

3.1. Heritage Family Credit Union Checking \$100.00

3.2. People's United Bank Checking \$185.00

3.3. Berkshire Bank Checking \$10,000.00

3.4. Heritage Family Credit Union Savings \$25.00

4. **Other cash equivalents** *(Identify all)*

5. **Total of Part 1.** **\$10,460.00**

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

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

Debtor LaFlamme's Inc. Case number (If known) _____
 Name

- 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. BAI Rutland LLC \$20,000.00

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

9. **Total of Part 2.**

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

<u>\$20,000.00</u>

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

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

11. **Accounts receivable**

11a. 90 days old or less: 827.00 - 0.00 = \$827.00
 face amount doubtful or uncollectible accounts

11a. 90 days old or less: 987.00 - 0.00 = \$987.00
 face amount doubtful or uncollectible accounts

11a. 90 days old or less: 953.99 - 0.00 = \$953.99
 face amount doubtful or uncollectible accounts

11a. 90 days old or less: 1,907.98 - 0.00 = \$1,907.98
 face amount doubtful or uncollectible accounts

11a. 90 days old or less: 211.99 - 0.00 = \$211.99
 face amount doubtful or uncollectible accounts

11a. 90 days old or less: 205.22 - 0.00 = \$205.22
 face amount doubtful or uncollectible accounts

11a. 90 days old or less: 799.99 - 0.00 = \$799.99
 face amount doubtful or uncollectible accounts

11a. 90 days old or less: 227.89 - 0.00 = \$227.89
 face amount doubtful or uncollectible accounts

Debtor LaFlamme's Inc. Case number (If known) _____
 Name

11a. 90 days old or less:	<u>2,019.26</u>	-	<u>0.00</u>	=	<u>\$2,019.26</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,363.45</u>	-	<u>0.00</u>	=	<u>\$1,363.45</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>4,866.70</u>	-	<u>0.00</u>	=	<u>\$4,866.70</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,067.68</u>	-	<u>0.00</u>	=	<u>\$1,067.68</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,670.83</u>	-	<u>0.00</u>	=	<u>\$1,670.83</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>3,109.50</u>	-	<u>0.00</u>	=	<u>\$3,109.50</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,449.98</u>	-	<u>0.00</u>	=	<u>\$1,449.98</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,789.10</u>	-	<u>0.00</u>	=	<u>\$1,789.10</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>966.66</u>	-	<u>0.00</u>	=	<u>\$966.66</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>157.94</u>	-	<u>0.00</u>	=	<u>\$157.94</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,332.00</u>	-	<u>0.00</u>	=	<u>\$1,332.00</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>550.84</u>	-	<u>0.00</u>	=	<u>\$550.84</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,581.80</u>	-	<u>0.00</u>	=	<u>\$1,581.80</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,289.82</u>	-	<u>0.00</u>	=	<u>\$1,289.82</u>
	face amount		doubtful or uncollectible accounts		

Debtor LaFlamme's Inc. Case number (If known) _____
 Name

11a. 90 days old or less:	<u>3,282.50</u>	-	<u>0.00</u>	=	<u>\$3,282.50</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,031.83</u>	-	<u>0.00</u>	=	<u>\$1,031.83</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>528.94</u>	-	<u>0.00</u>	=	<u>\$528.94</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,131.00</u>	-	<u>0.00</u>	=	<u>\$1,131.00</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>211.98</u>	-	<u>0.00</u>	=	<u>\$211.98</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>860.00</u>	-	<u>0.00</u>	=	<u>\$860.00</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>582.99</u>	-	<u>0.00</u>	=	<u>\$582.99</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>216.94</u>	-	<u>0.00</u>	=	<u>\$216.94</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>636.00</u>	-	<u>0.00</u>	=	<u>\$636.00</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>803.80</u>	-	<u>0.00</u>	=	<u>\$803.80</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>100.00</u>	-	<u>0.00</u>	=	<u>\$100.00</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>537.85</u>	-	<u>0.00</u>	=	<u>\$537.85</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>85.60</u>	-	<u>0.00</u>	=	<u>\$85.60</u>
	face amount		doubtful or uncollectible accounts		

Debtor LaFlamme's Inc. Case number (If known) _____
 Name

11a. 90 days old or less:	<u>0.01</u>	-	<u>0.00</u>	=	<u>\$0.01</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>288.88</u>	-	<u>0.00</u>	=	<u>\$288.88</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>80.25</u>	-	<u>0.00</u>	=	<u>\$80.25</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>427.99</u>	-	<u>0.00</u>	=	<u>\$427.99</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>130.00</u>	-	<u>0.00</u>	=	<u>\$130.00</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>0.01</u>	-	<u>0.00</u>	=	<u>\$0.01</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>2,973.04</u>	-	<u>0.00</u>	=	<u>\$2,973.04</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>1,778.00</u>	-	<u>0.00</u>	=	<u>\$1,778.00</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>588.49</u>	-	<u>0.00</u>	=	<u>\$588.49</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>261.74</u>	-	<u>0.00</u>	=	<u>\$261.74</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>34.53</u>	-	<u>0.00</u>	=	<u>\$34.53</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>716.50</u>	-	<u>0.00</u>	=	<u>\$716.50</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>732.78</u>	-	<u>0.00</u>	=	<u>\$732.78</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>62.94</u>	-	<u>0.00</u>	=	<u>\$62.94</u>
	face amount		doubtful or uncollectible accounts		

Debtor LaFlamme's Inc. Case number (If known) _____
 Name

11a. 90 days old or less:	<u>117.97</u>	-	<u>0.00</u>	=	<u>\$117.97</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>513.99</u>	-	<u>0.00</u>	=	<u>\$513.99</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>929.87</u>	-	<u>0.00</u>	=	<u>\$929.87</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>213.99</u>	-	<u>0.00</u>	=	<u>\$213.99</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>606.38</u>	-	<u>0.00</u>	=	<u>\$606.38</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>658.74</u>	-	<u>0.00</u>	=	<u>\$658.74</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>219.31</u>	-	<u>0.00</u>	=	<u>\$219.31</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>832.14</u>	-	<u>0.00</u>	=	<u>\$832.14</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>70.50</u>	-	<u>0.00</u>	=	<u>\$70.50</u>
	face amount		doubtful or uncollectible accounts		
11a. 90 days old or less:	<u>778.15</u>	-	<u>0.00</u>	=	<u>\$778.15</u>
	face amount		doubtful or uncollectible accounts		
11b. Over 90 days old:	<u>60.00</u>	-	<u>0.00</u>	=	<u>\$60.00</u>
	face amount		doubtful or uncollectible accounts		
11b. Over 90 days old:	<u>863.67</u>	-	<u>0.00</u>	=	<u>\$863.67</u>
	face amount		doubtful or uncollectible accounts		
11b. Over 90 days old:	<u>248.49</u>	-	<u>0.00</u>	=	<u>\$248.49</u>
	face amount		doubtful or uncollectible accounts		

Debtor LaFlamme's Inc. Case number (If known) _____
 Name

11b. Over 90 days old:	<u>300.99</u>	-	<u>0.00</u> =....	<u>\$300.99</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>37.00</u>	-	<u>0.00</u> =....	<u>\$37.00</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>1,324.93</u>	-	<u>0.00</u> =....	<u>\$1,324.93</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>1.06</u>	-	<u>0.00</u> =....	<u>\$1.06</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>168.98</u>	-	<u>0.00</u> =....	<u>\$168.98</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>256.99</u>	-	<u>0.00</u> =....	<u>\$256.99</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>255.94</u>	-	<u>0.00</u> =....	<u>\$255.94</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>1,217.66</u>	-	<u>0.00</u> =....	<u>\$1,217.66</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>348.97</u>	-	<u>0.00</u> =....	<u>\$348.97</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>296.39</u>	-	<u>0.00</u> =....	<u>\$296.39</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>71.86</u>	-	<u>0.00</u> =....	<u>\$71.86</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>812.78</u>	-	<u>0.00</u> =....	<u>\$812.78</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>324.50</u>	-	<u>0.00</u> =....	<u>\$324.50</u>
	face amount		doubtful or uncollectible accounts	
11b. Over 90 days old:	<u>4,819.24</u>	-	<u>0.00</u> =....	<u>\$4,819.24</u>
	face amount		doubtful or uncollectible accounts	

Debtor LaFlamme's Inc. Case number (If known) _____
 Name

11b. Over 90 days old: 11.30 - 0.00 =.... \$11.30
 face amount doubtful or uncollectible accounts

11b. Over 90 days old: 846.73 - 0.00 =.... \$846.73
 face amount doubtful or uncollectible accounts

12. **Total of Part 3.** \$64,629.73
 Current value on lines 11a + 11b = line 12. Copy the total to line 82.

Part 4: Investments

13. Does the debtor own any investments?

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

Part 5: Inventory, excluding agriculture assets

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

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

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				
21. Finished goods, including goods held for resale finished goods		\$0.00		\$340,750.60

22. Other inventory or supplies

23. **Total of Part 5.** \$340,750.60
 Add lines 19 through 22. Copy the total to line 84.

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

- No
- Yes

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

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

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

- No
- Yes

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

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

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

Debtor LaFlamme's Inc. Case number (If known) _____
 Name

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 store fixtures	\$0.00		\$30,998.59

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

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

43. Total of Part 7.

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

\$30,998.59

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

- No
 Yes

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

- No
 Yes

Part 8: Machinery, equipment, and vehicles

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

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

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. 2010 GMC Sienna 14' Box Van	\$0.00		\$6,500.00

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

49. Aircraft and accessories

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

51. Total of Part 8.

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

\$6,500.00

Debtor LaFlamme's Inc. Case number (If known) _____
 Name

52. Is a depreciation schedule available for any of the property listed in Part 8?
 No
 Yes
53. Has any of the property listed in Part 8 been appraised by a professional within the last year?
 No
 Yes

Part 9: Real property

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

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

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

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. 239 West Main Street Bennington, VT	Fee simple	\$0.00	N/A	\$600,000.00
55.2. 9140 State Route 22 Granville, NY 12832	Fee simple	\$0.00		\$249,000.00

56. Total of Part 9. **\$849,000.00**
 Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

57. Is a depreciation schedule available for any of the property listed in Part 9?
 No
 Yes
58. Has any of the property listed in Part 9 been appraised by a professional within the last year?
 No
 Yes

Part 10: Intangibles and intellectual property

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

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

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties			

Debtor LaFlamme's Inc. Case number (if known) _____
Name

63. **Customer lists, mailing lists, or other compilations**
customer and mailing lists Unknown \$0.00

64. **Other intangibles, or intellectual property**

65. **Goodwill**

66. **Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

<u>\$0.00</u>

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

- No
- Yes

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

- No
- Yes

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

- No
- Yes

Part 11: All other assets

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

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

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

Debtor LaFlamme's Inc. Case number (if known) _____
 Name

Part 12: Summary

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

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$10,460.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$20,000.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$64,629.73</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$340,750.60</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>\$30,998.59</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$6,500.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$849,000.00</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>\$473,338.92</u>	+ 91b. <u>\$849,000.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$1,322,338.92</u>

Fill in this information to identify the case:

Debtor name LaFlamme's Inc.

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

Case number (if known) _____

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

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

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

Part 1: List Creditors Who Have Secured Claims

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

		Column A	Column B
		Amount of claim	Value of collateral that supports this claim
		Do not deduct the value of collateral.	
<p>2.1</p> <p>Avid Capital</p> <p>Creditor's Name Acct.No. XXX-N/A 385 Chestnut Hill Road Cambridge, NY 12816</p> <p>Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien ucc inventory promissory note</p> <p>Describe the lien</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p>\$250,202.16</p>	<p>\$0.00</p>

<p>2.2</p> <p>Capital Solutions</p> <p>Creditor's Name Wells Fargo Commercial Distribution Fina 5595 Trillium Blvd., 4th Floor Recovery Hoffman Estates, IL 60192</p> <p>Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien ucc inventory</p> <p>Describe the lien</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply</p>	<p>\$19,563.90</p>	<p>\$0.00</p>
--	---	---------------------------	----------------------

Debtor LaFlamme's Inc. Case number (if know) _____
Name

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

2.3	DM Reid	Describe debtor's property that is subject to a lien	\$13,000.00	\$0.00
	<small>Creditor's Name</small>	ucc inventory		
	Acct.No. XXX-N/A			
	50 Grove St. #227	Describe the lien		
	<small>Creditor's mailing address</small>			
	 <small>Creditor's email address, if known</small>	Is the creditor an insider or related party?		
	Date debt was incurred	<input checked="" type="checkbox"/> No		
	Last 4 digits of account number	<input type="checkbox"/> Yes		
	Do multiple creditors have an interest in the same property?	Is anyone else liable on this claim?		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	<input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
		As of the petition filing date, the claim is:		
		<small>Check all that apply</small>		
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input checked="" type="checkbox"/> Disputed		

2.4	Heritage Family Credit Union	Describe debtor's property that is subject to a lien	\$1,794.00	\$6,500.00
	<small>Creditor's Name</small>	2010 GMC Sienna 14' Box Van		
	Acct.No. XXX-N/A			
	30 Allen Street	Describe the lien		
	<small>Creditor's mailing address</small>			
	 <small>Creditor's email address, if known</small>	Is the creditor an insider or related party?		
	Date debt was incurred	<input checked="" type="checkbox"/> No		
	Last 4 digits of account number	<input type="checkbox"/> Yes		
	Do multiple creditors have an interest in the same property?	Is anyone else liable on this claim?		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	<input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
		As of the petition filing date, the claim is:		
		<small>Check all that apply</small>		
		<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		

2.5	Heritage Family Credit Union	Describe debtor's property that is subject to a lien	\$0.00	\$100.00
	<small>Creditor's Name</small>	Heritage Family Credit Union - Checking		
	30 Allen Street			
	<small>Creditor's mailing address</small>	Describe the lien		

Debtor LaFlamme's Inc. Case number (if know) _____
Name

Creditor's email address, if known _____

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No
 Yes. Specify each creditor, including this creditor and its relative priority.

Is the creditor an insider or related party?
 No
 Yes

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

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

2.6	Heritage Family Credit Union	Describe debtor's property that is subject to a lien	\$0.00	\$10,000.00
	<small>Creditor's Name</small>	Berkshire Bank - Checking		

**30 Allen Street
Rutland, VT 05701**

Creditor's mailing address

Creditor's email address, if known _____

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien

Is the creditor an insider or related party?
 No
 Yes

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

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

2.7	Heritage Family Credit Union	Describe debtor's property that is subject to a lien	\$239,808.05	\$150.00
	<small>Creditor's Name</small>	all personalty		

**Acct.No. XXX-N/A
30 Allen Street
Rutland, VT 05701**

Creditor's mailing address

Creditor's email address, if known _____

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No
 Yes. Specify each creditor, including this creditor and its relative priority.

Describe the lien
line of credit

Is the creditor an insider or related party?
 No
 Yes

Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

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

Debtor LaFlamme's Inc. Case number (if know) _____
 Name

2.8	People's United Bank	Describe debtor's property that is subject to a lien	\$212,421.39	\$249,000.00
	Creditor's Name Acct.No. XXX-N/A 87 West Street Rutland, VT 05701	9140 State Route 22, Granville NY 12832 - 6-unit building		
	Creditor's mailing address	Describe the lien		
	Creditor's email address, if known	Is the creditor an insider or related party?		
	Date debt was incurred	<input checked="" type="checkbox"/> No		
	Last 4 digits of account number	<input type="checkbox"/> Yes		
	Do multiple creditors have an interest in the same property?	Is anyone else liable on this claim?		
	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	<input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
		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		

2.9	People's United Bank, N.A.	Describe debtor's property that is subject to a lien	\$274,956.07	\$0.00
	Creditor's Name Acct.No. XXX-N/A 87 West Street Rutland, VT 05701	all personalty		
	Creditor's mailing address	Describe the lien		
	Creditor's email address, if known	line of credit		
	Date debt was incurred	Is the creditor an insider or related party?		
	Last 4 digits of account number	<input checked="" type="checkbox"/> No		
	Do multiple creditors have an interest in the same property?	<input type="checkbox"/> Yes		
	<input checked="" type="checkbox"/> No	Is anyone else liable on this claim?		
	<input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
		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		

2.1 0	People's United Bank, N.A.	Describe debtor's property that is subject to a lien	\$523,000.00	\$600,000.00
	Creditor's Name Acct.No. XXX-N/A 87 West Street Rutland, VT 05701	239 West Main Street Bennington, VT		
	Creditor's mailing address	Describe the lien		
	Creditor's email address, if known	Mortgage		
	Date debt was incurred	Is the creditor an insider or related party?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes		
		Is anyone else liable on this claim?		
		<input checked="" type="checkbox"/> No		
		<input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		

Debtor LaFlamme's Inc. Case number (if know) _____
Name

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No

Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

2.1 **Sunset Trading, div.of SFI**
 1 **Ilc**

Creditor's Name
Acct.No. XXX-N/A
701 E. Ind. Pk. Dr.
Manchester, NH 03109
Creditor's mailing address

Creditor's email address, if known

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien
ucc floor plan 239 Main St, Bennington, VT 05201

\$23,000.00

\$0.00

Describe the lien _____

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

2.1 **Sunset Trading, div.of SFI**
 2 **Ilc**

Creditor's Name
Acct.No. XXX-N/A
701 E. Ind. Pk. Dr.
Manchester, NH 03109
Creditor's mailing address

Creditor's email address, if known

Date debt was incurred _____

Last 4 digits of account number _____

Do multiple creditors have an interest in the same property?
 No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien
ucc floor plan 3 Diamond Run Mall Pl, Rutland, VT 05701

\$30,000.00

\$0.00

Describe the lien _____

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

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

\$1,587,745.57

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

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies,

Debtor LaFlamme's Inc. Case number (if know) _____
Name

assignees of claims listed above, and attorneys for secured creditors.

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

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

Fill in this information to identify the case:

Debtor name LaFlamme's Inc.

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

Case number (if known) _____

Check if this is an amended filing

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

12/15

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

Part 1: List All Creditors with PRIORITY Unsecured Claims

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

No. Go to Part 2.

Yes. Go to line 2.

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

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address NYS Dept of Taxation and Finance Bankruptcy Section PO Box 5300 Albany, NY 12205-0300	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	\$11,250.00	\$11,250.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address Vermont Department of Taxes 133 State Street, 1st Floor Montpelier, VT 05603	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	\$62,652.00	\$62,652.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor LaFlamme's Inc. Case number (if known) _____
Name

2.3	Priority creditor's name and mailing address Washington County 383 Broadway Fort Edward, NY 12828	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	\$14,000.00 \$14,000.00
Date or dates debt was incurred _____		Basis for the claim: _____	
Last 4 digits of account number _____		Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

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

			Amount of claim
3.1	Nonpriority creditor's name and mailing address BAI Rutland LLC Acct.No. T037-XXX c/o Zamias Services PO Box 5540 Johnstown, PA 15904 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,317.82
3.2	Nonpriority creditor's name and mailing address BB&T Acct.No. 5030-XXX 3379 Peachtree Road Atlanta, GA 30326 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,040.57
3.3	Nonpriority creditor's name and mailing address Best Chairs Inc Acct.No. 3434-XXX 1195 Solutions Center Chicago, IL 60677 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,514.39
3.4	Nonpriority creditor's name and mailing address Capital Solutions Acct.No. 1958-XXX 500 Momamy Dr St Joseph, MI 49085 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,563.90
3.5	Nonpriority creditor's name and mailing address Carolina Logistics Acct.No. 4000-XXX c/o Worthington L 3155 Seneca St West Seneca, NY 14244 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$260.00

Debtor LaFlamme's Inc. Case number (if known) _____
Name

3.6	Nonpriority creditor's name and mailing address Chase-New Acct.No. XXX-7890 Cardmember Services PO Box 15153 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> <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	\$7,480.19
3.7	Nonpriority creditor's name and mailing address Christopher LaFlamme Acct.No. XXX-N/A 107 North St Wells, VT 05764 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,936.46
3.8	Nonpriority creditor's name and mailing address Culligan-Troy Acct.No. XXX-5537 6 Spring Ave Troy, NY 12180 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5.35
3.9	Nonpriority creditor's name and mailing address England Furniture Acct.No. XXX-LFVT 1 Lay-Z-Boy Dr Creit 2b Monroe, MI 48162 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,744.15
3.10	Nonpriority creditor's name and mailing address Franklin Corp Acct.No. XXX-50-31 PO Box Drawer 569 Housgton, MS 38851 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50.80
3.11	Nonpriority creditor's name and mailing address GA Bove Fuels Acct.No. XXX-N/A 40 Derby St Hudson Falls, NY 12839 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,406.84
3.12	Nonpriority creditor's name and mailing address General Security Acct.No. XXX-N/A PO Box 329 Plainview, NY 11803 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$619.84

Debtor LaFlamme's Inc. Case number (if known) _____
Name

3.13	Nonpriority creditor's name and mailing address Granville Central School Acct.No. XXX-2079 ATTN Tax Collector PO Box 120 Granville, NY 12832 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,556.50
3.14	Nonpriority creditor's name and mailing address Green Mountain Power Acct.No. XXX-0004 PO Box 1611 Brattleboro, VT 05302 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$21,923.31
3.15	Nonpriority creditor's name and mailing address Heritage Home Group, LLC Acct.No. XXX-1031 d/b/a Broyhill PO Box 842386 Boston, MA 02284 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,476.72
3.16	Nonpriority creditor's name and mailing address Home Depot Acct.No. XXX-3001 Dept #32-2184113110 Po Box 18317 Columbus, OH 43218 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,942.23
3.17	Nonpriority creditor's name and mailing address Lancer Inc Acct.No. XXX-N/A PO Box 848 Star, NC 27356 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,400.00
3.18	Nonpriority creditor's name and mailing address Lane Furniture Acct.No. XXX-1031 d/b/a Broyhill PO Box 842386 Boston, MA 02284 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,277.09
3.19	Nonpriority creditor's name and mailing address Micro D Acct.No. XXX-N/A 1985 Tate Blvd Ste 301 Hickory, NC 28602 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$750.00

Debtor LaFlamme's Inc. Case number (if known) _____
Name

3.20	Nonpriority creditor's name and mailing address Milberg Factors Acct.No. XXX-1221 99 Park Ave New York, NY 10016 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,325.42
3.21	Nonpriority creditor's name and mailing address MVP Healthcare Acct.No. XXX-5560 PO Box 26864 New York, NY 10087 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,289.32
3.22	Nonpriority creditor's name and mailing address Nationwide Recovery Systems Acct.No. XXX-N/A 501 Shelley Drive, Suite 300 Tyler, TX 75701 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,890.68
3.23	Nonpriority creditor's name and mailing address New England Newspaper Acct.No. XXX-N/A 1 Arrow Drive, Suite 6 Woburn, MA 01801 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,257.20
3.24	Nonpriority creditor's name and mailing address NYSEG Acct No. XXX-4890 /-7181 PO Box 847812 Boston, MA 02284 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$401.76
3.25	Nonpriority creditor's name and mailing address Progressive Furniture Acct.No. XXX-N/A PO Box 633833 Cincinnati, OH 45263 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,197.83
3.26	Nonpriority creditor's name and mailing address Ricoh, USA Acct.No. XXX-58808 PO Box 827577 Philadelphia, PA 19182 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$156.76

Debtor LaFlamme's Inc. Case number (if known) _____
Name

3.27 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$280.65
RTS Financial Service
Acct.No. XXX-6315
PO Box 840267 Dallas
Dallas, TX 75284-0267
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Is the claim subject to offset? No Yes

3.28 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$1,392.12
Rugs America Corp
Acct.No. XXX-N/A
10 Daniel St
Farmingdale, NY 11735
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Is the claim subject to offset? No Yes

3.29 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$12,353.34
Schuyler Company
Acct.No. XXX-837S
596 New Loudon Rd
Latham, NY 12110
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Is the claim subject to offset? No Yes

3.30 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$147,544.57
Serta Simmons
Acct.No. XXX-4062
13347 Collections Ctr
Chicago, IL 60693
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Is the claim subject to offset? No Yes

3.31 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$1,106.70
Spectrum Business
Acct.No. XXX-E+11
PO Box 77169
Charlotte, NC 28271
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Is the claim subject to offset? No Yes

3.32 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$450.00
UL LLC
Acct.No. XXX-3951
75 Remittance Dr Ste 1524
Chicago, IL 60675
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Is the claim subject to offset? No Yes

3.33 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** *Check all that apply.* \$451.87
USLI
Acct.No. XXX-3085
PO Box 62778
Baltimore, MD 21264
 Contingent
 Unliquidated
 Disputed
Basis for the claim: _____
 Date(s) debt was incurred _____
 Last 4 digits of account number _____
 Is the claim subject to offset? No Yes

Debtor LaFlamme's Inc. Case number (if known) _____
Name

3.34	Nonpriority creditor's name and mailing address WB Mason Acct.No. XXX-6888 59 Centre St Brockton, MA 02301 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$466.52 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.35	Nonpriority creditor's name and mailing address WCAX Acct.No. XXX-N/A PO Box 4508 Burlington, VT 05406 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,215.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.36	Nonpriority creditor's name and mailing address WCWN c/o WPGH Acct.No. XXX-N/A 750 Ivory Ave Pittsburgh, PA 15214 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$580.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.37	Nonpriority creditor's name and mailing address WRGB c/o WPGH Acct.No. XXX-N/A 750 Ivory Ave Pittsburgh, PA 15214 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,070.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	--	---

3.38	Nonpriority creditor's name and mailing address WVNY ABC Local 22 Acct.No. XXX-9173 201 Humboldt St Rochester, NY 14610-1041 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,400.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
------	---	---

3.39	Nonpriority creditor's name and mailing address Zenith Trucking Acct.No. XXX-N/A PO Box 969 Conover, NC 28613 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$608.49 <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
------	--	---

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 Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any

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

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

Debtor LaFlamme's Inc.
Name

Case number (if known) _____

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

		Total of claim amounts	
5a.	\$		87,902.00
5b.	+	\$	371,704.39
5c.	\$		459,606.39

Fill in this information to identify the case:

Debtor name LaFlamme's Inc.

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

Case number (if known) _____

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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

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

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

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

2. List all contracts and unexpired leases

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

2.1. State what the contract or lease is for and the nature of the debtor's interest **License agreement for Diamond Run Mall Store on Route 7 in Rutland VT**

State the term remaining **11 months**

List the contract number of any government contract _____

**BAI Rutland LLC
Acct.No. T037-XXX
c/o Zamias Services PO Box 5540
Johnstown, PA 15904**

2.2. State what the contract or lease is for and the nature of the debtor's interest **3 copiers**

State the term remaining _____

List the contract number of any government contract _____

**Ricoh USA
Acct.No. XXX-N/A
1174 Troy Schenectady Rd
Latham, NY 12110**

2.3. State what the contract or lease is for and the nature of the debtor's interest **rental agreement for 239 West Main Street, Bennington VT 05201**

State the term remaining **5 years 1 month**

List the contract number of any government contract _____

**West Shore Management
15 Spellman Terrae
Rutland, VT 05701**

Fill in this information to identify the case:

Debtor name LaFlamme's Inc.

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

Case number (if known) _____

Check if this is an amended filing

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

12/15

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

1. Do you have any codebtors?

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

Yes

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

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Banner Marketing**

**16201 E Indiana Ave Ste 3240
Spokane, WA 99216**

Nationwide Recovery Systems

D _____
 E/F 3.22
 G _____

2.2 **West Shore Management**

**15 Spellman Terrace
Rutland, VT 05701
239 West Main St., Bennington VT
(People's Bank)**

People's United Bank, N.A.

D _____
 E/F _____
 G _____

Fill in this information to identify the case:

Debtor name LaFlamme's Inc.
 United States Bankruptcy Court for the: NORTHERN DISTRICT OF NEW YORK
 Case number (if known) _____

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

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

Part 1: Income

1. Gross revenue from business

None.

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

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From 1/01/2017 to **Filing Date**

Operating a business
 Other _____

\$1,102,363.07

For prior year:
From 1/01/2016 to 12/31/2016

Operating a business
 Other _____

\$2,447,434.65

For year before that:
From 1/01/2015 to 12/31/2015

Operating a business
 Other _____

\$2,503,464.45

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

Debtor **LaFlamme's Inc.**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. ALMO 2709 Commerce Way Philadelphia, PA 19154		\$13,145.72	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ___
3.2. Bare Bones 10 Sagamore Street Glens Falls, NY 12801-3154		\$23,065.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ___
3.3. Abrams & Quirion Team LLC 10 Sagamore Street Glens Falls, NY 12801		\$9,570.09	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ___
3.4. Best Chairs 1195 Solutions Center Chicago, IL 60677		\$6,500.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ___
3.5. Green Mountain Power PO Box 161 Brattleboro, VT 05302		\$17,123.88	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ___
3.6. Vermont Department of Taxes 133 State Street, 1st Floor Montpelier, VT 05603		\$7,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>back taxes</u>
3.7. Vermont Department of Taxes 133 State Street, 1st Floor Montpelier, VT 05603		\$23,510.63	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>current taxes</u>
3.8. Sunset Trading div.of SFI llc 701 E. Ind. Pk. Dr. Manchester, NH 03109		\$34,649.80	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other ___

Debtor **LaFlamme's Inc.**

Case number (if known) _____

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.9. Tip Tops Furniture 9477 NY-32 Freehold, NY 12431		\$17,714.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.10 England 1 Lay-Z-Boy Dr Creit 2b Monroe, MI 48162		\$7,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.11 Solstice Sleep Products 2652 Fisher Rd Unit A Columbus, OH 43204		\$37,493.16	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __
3.12 Travelers PO BOX 660317 Dallas, TX 75266-0317		\$6,858.75	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input checked="" type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other __

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

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

None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. West Shore Management	monthly	\$7,500.00	triple net lease obligations

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
-----------------------------	--------------------------	------	-------------------

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
-----------------------------	---	-----------------------	--------

Debtor **LaFlamme's Inc.**

Case number (if known)

Part 3: Legal Actions or Assignments

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

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

None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. 87 Quaker, L.P. v. LaFlammes Inc., and Christopher LaFlamme, Jr. Index No. 2017-27195	breach of lease	NY State Supreme Court Washington County 383 Broadway Fort Edward, NY 12828	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

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
9.1. Charitable Contribution	Charitable Contribution		\$1,267.24
Recipients relationship to debtor			
9.2. Charitable Contribution	Charitable Contribution		\$1,461.76
Recipients relationship to debtor			

Part 5: Certain Losses

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

None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	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).		

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.

Debtor **LaFlamme's Inc.**

Case number (if known)

None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Richard H Weiskopf 670 Franklin Street Suite 100 Schenectady, NY 12305		August 2017	\$14,000.00
	Email or website address			
	Who made the payment, if not debtor?			
11.2.	Richard H Weiskopf 670 Franklin Street Suite 100 Schenectady, NY 12305		September 2017	\$1,000.00
	Email or website address			
	Who made the payment, if not debtor?			
11.3.	Richard J Miller & Associates Acct.No.XXX-CM41 14 Corporate Woods Blvd Albany, NY 12211		February 2017	\$1,750.00
	Email or website address			
	Who made the payment, if not debtor?			

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
-------------------------	-----------------------------------	---------------------------	-----------------------

13. Transfers not already listed on this statement

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

None.

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

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.

Debtor **LaFlamme's Inc.**

Case number (if known) _____

Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

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
18.1.	Glens Falls National 250 Glen St Glens Falls, NY 12801	XXXX-	<input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other__	March 2017	\$200.00

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?
---	--	-----------------------------	-----------------------

Debtor **LaFlamme's Inc.**

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?
---------------------------	-----------------------------------	-----------------------------	-----------------------

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
---------------------------	----------------------------------	--------------------	----------------

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
-----------------------	------------------------------------	-----------------------------	----------------

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
-----------------------	------------------------------------	-----------------------------	----------------

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 **LaFlamme's Inc.**

Case number (if known)

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

25.1. **Furniture Store
9140 State Route 22
Granville, NY 12832**

retail sale of furniture

Dates business existed

EIN: 30-0136185

From-To 2002 to present

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. **Joseph Nacca, CPA
2430 Ridgeway Ave
Rochester, NY 14626**

2002 to present

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

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. **Debtor**

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

None

Name and address

26d.1. **People's United Bank, N.A.
Acct.No. XXX-N/A
87 West Street
Rutland, VT 05701**

26d.2. **Heritage Family Credit Union
30 Allen Street
Rutland, VT 05701**

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.

Debtor **LaFlamme's Inc.**

Case number (if known) _____

	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
27.1	Chirstopher La Flamme	12/2016; 12/2015	

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

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
Christopher LaFlamme	9140 State Route 22 Granville, NY 12832		

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
-------------------------------	--	-------	--------------------------------

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
--------------------------------	--

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
--------------------------------	--

Debtor LaFlamme's Inc.

Case number (if known) _____

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 September 18, 2017

/s/ Christopher LaFlamme
Signature of individual signing on behalf of the debtor

Christopher LaFlamme
Printed name

Position or relationship to debtor _____

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

- No
- Yes

United States Bankruptcy Court Northern District of New York

In re LaFlamme's Inc.

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:

Table with 2 columns: Description of compensation and Amount. Rows include: For legal services, I have agreed to accept (\$ 12,480.00); Prior to the filing of this statement I have received (\$ 12,480.00); Balance Due (\$ 0.00).

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

Debtor (checked) Other (specify):

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

Debtor (checked) 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]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

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

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

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.

September 18, 2017

Date

/s/ Richard H. Weiskopf, Esq.

Richard H. Weiskopf, Esq. 102805

Signature of Attorney

The DeLorenzo Law Firm, LLP.

670 Franklin St., Suite 100

Schenectady, NY 12305

(518) 374-8450 Fax: (518) 374-5906

Rweiskopf@delolaw.com

Name of law firm

**United States Bankruptcy Court
Northern District of New York**

In re **LaFlamme's Inc.**

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
--	----------------	----------------------	------------------

**Amanda Carter
PO Box 1031
Middletown Springs, VT 05757**

**Anthony Pascazio
255 Shady Oak Circle
Lake Mary, FL 32746**

**Bethany Bosch
98 Meacham St
Wallingford, VT 05773**

**Carol Brownell
91 Nesbitt Rd
Cambridge, NY 12816**

**Christopher LaFlamme Jr
107 North St
Wells, VT 05774**

**Dennis Albright
2405 Bonnie Brae Rd
Cumming, GA 30041**

**Ellen Coyne
288 Bentley Ave, Apt 4
Poultney, VT 05764**

**James Schneider
5641 Upper Cold River Rd
Cuttingsville, VT 05738**

**Mark Mackintosh
742 Lincoln Hill Rd
Cuttingsville, VT 05738**

**Preston Coyne
288 Bentley Ave., Apt 5
Poultney, VT 05764**

**Stephanie Mayer
62 Elm St., Apt 313
Epping, NH 03042**

**Virginai Bishop
15261 Meadow Circle
Fort Myers, FL 33908**

In re: LaFlamme's Inc. Case No. _____
Debtor(s)

LIST OF EQUITY SECURITY HOLDERS
(Continuation Sheet)

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

William Brownell
PO Box 2
Cambridge, NY 12816

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the 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 September 18, 2017 Signature /s/ Christopher LaFlamme
Christopher LaFlamme

*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
NORTHERN DISTRICT OF NEW YORK**

In re LaFlamme's Inc. ,

Debtor

Case No.

Chapter 11

Social Security No(s). and all Employer's Tax Identification No(s). *[if any]*
30-0126185

CERTIFICATION OF MAILING MATRIX

I,(we), Richard H. Weiskopf, Esq. 102805 , the attorney for the debtor/petitioner (or, if appropriate, the debtor(s) or petitioner(s)) hereby certify under the penalties of perjury that the above/attached mailing matrix has been compared to and contains the names, addresses and zip codes of all persons and entities, as they appear on the schedules of liabilities/list of creditors/list of equity security holders, or any amendment thereto filed herewith.

Dated: September 18, 2017

/s/ Richard H. Weiskopf, Esq.

Richard H. Weiskopf, Esq. 102805

Attorney for Debtor/Petitioner
(Debtor(s)/Petitioner(s))

Avid Capital
Acct.No. XXX-N/A
385 Chestnut Hill Road
Cambridge, NY 12816

BAI Rutland LLC
Acct.No. T037-XXX
c/o Zamias Services PO Box 5540
Johnstown, PA 15904

Banner Marketing
16201 E Indiana Ave Ste 3240
Spokane, WA 99216

BB&T
Acct.No. 5030-XXX
3379 Peachtree Road
Atlanta, GA 30326

Best Chairs Inc
Acct.No. 3434-XXX
1195 Solutions Center
Chicago, IL 60677

Capital Solutions
Wells Fargo Commercial Distribution Fina
5595 Trillium Blvd., 4th Floor Recovery
Hoffman Estates, IL 60192

Capital Solutions
Acct.No. 1958-XXX
500 Momamy Dr
St Joseph, MI 49085

Carolina Logistics
Acct.No. 4000-XXX
c/o Worthington L 3155 Seneca St
West Seneca, NY 14244

Chase-New
Acct.No. XXX-7890
Cardmember Services PO Box 15153
Wilmington, DE 19886

Christopher LaFlamme
Acct.No. XXX-N/A
107 North St
Wells, VT 05764

Culligan-Troy
Acct.No. XXX-5537
6 Spring Ave
Troy, NY 12180

DM Reid
Acct.No. XXX-N/A
50 Grove St. #227
Salem, MA 01970

England Furniture
Acct.No. XXX-LFVT
1 Lay-Z-Boy Dr Creit 2b
Monroe, MI 48162

Franklin Corp
Acct.No. XXX-50-31
PO Box Drawer 569
Housgton, MS 38851

GA Bove Fuels
Acct.No. XXX-N/A
40 Derby St
Hudson Falls, NY 12839

General Security
Acct.No. XXX-N/A
PO Box 329
Plainview, NY 11803

Granville Central School
Acct.No. XXX-2079
ATTN Tax Collector PO Box 120
Granville, NY 12832

Green Mountain Power
Acct.No. XXX-0004
PO Box 1611
Brattleboro, VT 05302

Heritage Family Credit Union
Acct.No. XXX-N/A
30 Allen Street
Rutland, VT 05701

Heritage Famliy Credit Union
Acct.No. XXX-N/A
30 Allen Street
Rutland, VT 05701

Heritage Home Group, LLC
Acct.No. XXX-1031
d/b/a Broyhill PO Box 842386
Boston, MA 02284

Home Depot
Acct.No. XXX-3001
Dept #32-2184113110 Po Box 18317
Columbus, OH 43218

Lancer Inc
Acct.No. XXX-N/A
PO Box 848
Star, NC 27356

Lane Furniture
Acct.No. XXX-1031
d/b/a Broyhill PO Box 842386
Boston, MA 02284

Micro D
Acct.No. XXX-N/A
1985 Tate Blvd Ste 301
Hickory, NC 28602

Milberg Factors
Acct.No. XXX-1221
99 Park Ave
New York, NY 10016

MVP Heathcare
Acct.No. XXX-5560
PO Box 26864
New York, NY 10087

Nationwide Recovery Systems
Acct.No. XXX-N/A
501 Shelley Drive, Suite 300
Tyler, TX 75701

New England Newspaper
Acct.No. XXX-N/A
1 Arrow Drive, Suite 6
Woburn, MA 01801

NYS Dept of Taxation and Finance
Bankruptcy Section
PO Box 5300
Albany, NY 12205-0300

NYSEG
Acct No. XXX-4890 /-7181
PO Box 847812
Boston, MA 02284

People's United Bank
Acct.No. XXX-N/A
87 West Street
Rutland, VT 05701

People's United Bank, N.A.
Acct.No. XXX-N/A
87 West Street
Rutland, VT 05701

Progressive Furniture
Acct.No. XXX-N/A
PO Box 633833
Cincinnati, OH 45263

Ricoh USA
Acct.No. XXX-N/A
1174 Troy Schenectady Rd
Latham, NY 12110

Ricoh, USA
Acct.No. XXX-58808
PO Box 827577
Philadelphia, PA 19182

RTS Financial Service
Acct.No. XXX-6315
PO Box 840267 Dallas
Dallas, TX 75284-0267

Rugs America Corp
Acct.No. XXX-N/A
10 Daniel St
Farmingdale, NY 11735

Schuyler Company
Acct.No. XXX-837S
596 New Loudon Rd
Latham, NY 12110

Serta Simmons
Acct.No. XXX-4062
13347 Collections Ctr
Chicago, IL 60693

Spectrum Business
Acct.No. XXX-E+11
PO Box 77169
Charlotte, NC 28271

Sunset Trading, div.of SFI llc
Acct.No. XXX-N/A
701 E. Ind. Pk. Dr.
Manchester, NH 03109

UL LLC
Acct.No. XXX-3951
75 Remittance Dr Ste 1524
Chicago, IL 60675

USLI
Acct.No. XXX-3085
PO Box 62778
Baltimore, MD 21264

Vermont Department of Taxes
133 State Street, 1st Floor
Montpelier, VT 05603

Washington County
383 Broadway
Fort Edward, NY 12828

WB Mason
Acct.No. XXX-6888
59 Centre St
Brockton, MA 02301

WCAX
Acct.No. XXX-N/A
PO Box 4508
Burlington, VT 05406

WCWN c/o WPGH
Acct.No. XXX-N/A
750 Ivory Ave
Pittsburgh, PA 15214

West Shore Management
15 Spellman Terrace
Rutland, VT 05701

WRGB c/o WPGH
Acct.No. XXX-N/A
750 Ivory Ave
Pittsburgh, PA 15214

WVNY ABC Local 22
Acct.No. XXX-9173
201 Humboldt St
Rochester, NY 14610-1041

Zenith Trucking
Acct.No. XXX-N/A
PO Box 969
Conover, NC 28613

**United States Bankruptcy Court
Northern District of New York**

In re LaFlamme's Inc.

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 LaFlamme's Inc. 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:

None [*Check if applicable*]

September 18, 2017

Date

/s/ Richard H. Weiskopf, Esq.

Richard H. Weiskopf, Esq. 102805

Signature of Attorney or Litigant
Counsel for LaFlamme's Inc.

The DeLorenzo Law Firm, LLP.

670 Franklin St., Suite 100

Schenectady, NY 12305

(518) 374-8450 Fax:(518) 374-5906

Rweiskopf@delolaw.com