

Fill in this information to identify your case:

United States Bankruptcy Court for the:

MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) Chapter 7

☐ Check if this an amended filingOfficial Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

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

1. Debtor's name Sittin Easy, 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)** 56-2115322

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

284 Eagle Springs Rd.
Eagle Springs, NC 27242

Number, Street, City, State & ZIP Code

P.O. Box, Number, Street, City, State & ZIP Code

Moore
County

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

Number, Street, City, State & ZIP Code

- 5. Debtor's website (URL)** www.sittineasy.com

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

Debtor Sittin Easy, 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>.

3068**8. Under which chapter of the Bankruptcy Code is the debtor filing?****Check one:**

- ☒ Chapter 7
- ☐ Chapter 9
- ☐ Chapter 11. **Check all that apply:**

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any 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 Sittin Easy, 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 Sittin Easy, 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 February 1, 2024
 MM / DD / YYYY

X /s/ Walter Harper
 Signature of authorized representative of debtor

Walter Harper
 Printed name

Title President

18. Signature of attorney

X /s/ Stephanie L. Osborne
 Signature of attorney for debtor

Date February 1, 2024
 MM / DD / YYYY

Stephanie L. Osborne 29374
 Printed name

Northern Blue LLP
 Firm name

1414 Raleigh Rd
Ste 435
Chapel Hill, NC 27517-8834
 Number, Street, City, State & ZIP Code

Contact phone (919) 968-4441 Email address slo@nbfirm.com

29374 NC
 Bar number and State

Fill in this information to identify the case:Debtor name Sittin Easy, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

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 February 1, 2024**X** /s/ Walter Harper

Signature of individual signing on behalf of debtor

Walter Harper

Printed name

President

Position or relationship to debtor

Fill in this information to identify the case:Debtor name Sittin Easy, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ 0.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ 213,627.00**1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ 213,627.00**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ 74,856.28**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ 289,320.82**3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ 284,488.28**4. Total liabilities**
Lines 2 + 3a + 3b\$ 648,665.38

Fill in this information to identify the case:Debtor name Sittin Easy, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

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

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

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

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

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

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 Lumber		\$0.00		\$150.00

Debtor Sittin Easy, Inc. Case number (If known) _____

Name

20. **Work in progress**
 Unfinished furniture _____ \$0.00 _____ \$9,710.00

21. **Finished goods, including goods held for resale**
 Completed furniture-
 showroom models,
 samples and items used
 at sales booth and remote
 sales events _____ \$0.00 _____ \$14,450.00

22. **Other inventory or supplies**
 Miscellaneous supplies,
 including shipping
 materials, glue, staples,
 nails, etc. _____ \$0.00 _____ \$7,917.00

23. **Total of Part 5.** \$32,227.00
 Add lines 19 through 22. Copy the total to line 84.

24. **Is any of the property listed in Part 5 perishable?**
☒ No
☐ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**
☒ No
☐ Yes. Book value _____ Valuation method _____ Current Value _____

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**
☒ No
☐ Yes

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

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

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

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

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
41. Office equipment, including all computer equipment and communication systems equipment and software Laptops, old printers and CB radio station	\$0.00		\$500.00

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

Debtor Sittin Easy, Inc.
Name

Case number (If known) _____

43. **Total of Part 7.**

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

\$500.0044. **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 vehicles46. **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. 1987 Ford Van Co-owned by Debtor and Walter Harper Not running	\$0.00		\$500.00
47.2. 1998 Ford Explorer Eddie Bauer Edition	\$0.00		\$2,400.00
47.3. 2007 Ford Pleasureway RV Title held by third-parties but vehicle purchased and paid for by debtor	\$0.00		\$45,000.00
47.4. 1984 Enclosed 5x10 trailer Co-owned with Walter Harper	\$0.00		\$500.00
47.5. 2011 Covered Wagon Enclosed 6x12 trailer- Titled in third-party name	\$0.00		\$2,000.00
47.6. 2022 ATC 6X12 enclosed trailer Titled to third-party, purchased and paid for by Debtor	\$0.00		\$4,500.00
47.7. 2016 Coleman RV-Trailer Titled in third-party, purchased and paid for by Debtor	\$0.00		\$5,000.00
47.8. 2006 Ford Van Titled to third parties, but purchased and paid for by Debtor	\$0.00		\$5,000.00
47.9. 1996 Dodge Coach House	\$0.00		\$7,500.00

Debtor	<u>Sittin Easy, Inc.</u>		Case number (If known)	<u></u>
	Name			
48.	Watercraft, trailers, motors, and related accessories <i>Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels</i>			
49.	Aircraft and accessories			
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
	<u>2 Senco nail guns</u>	<u>\$0.00</u>	<u></u>	<u>\$300.00</u>
	<u>1 Hitachi nail gun</u>	<u>\$0.00</u>	<u></u>	<u>\$100.00</u>
	<u>1 Hitachi Box Stapler</u>	<u>\$0.00</u>	<u></u>	<u>\$50.00</u>
	<u>2 drills- 1 rechargeable, 1 corded</u>	<u>\$0.00</u>	<u></u>	<u>\$200.00</u>
	<u>Portable Heaters</u>	<u>\$0.00</u>	<u></u>	<u>\$200.00</u>
	<u>6 fans</u>	<u>\$0.00</u>	<u></u>	<u>\$200.00</u>
	<u>Baxter Whitney planer with sharpening attachment</u>	<u>\$0.00</u>	<u></u>	<u>\$5,000.00</u>
	<u>Hyster propane forklift</u>	<u>\$0.00</u>	<u></u>	<u>\$12,000.00</u>
	<u>Rockwell table saw</u>	<u>\$0.00</u>	<u></u>	<u>\$750.00</u>
	<u>Lincoln arc welder</u>	<u>\$0.00</u>	<u></u>	<u>\$250.00</u>
	<u>Baker A model band resaw, feed and return conveyors</u>	<u>\$0.00</u>	<u></u>	<u>\$9,000.00</u>
	<u>Bell 36 in bandsaw</u>	<u>\$0.00</u>	<u></u>	<u>\$800.00</u>
	<u>Crescent 20 in bandsaw</u>	<u>\$0.00</u>	<u></u>	<u>\$400.00</u>
	<u>Weining Profimat Moulder</u>	<u>\$0.00</u>	<u></u>	<u>\$18,000.00</u>
	<u>Weinig Roundamat Profile knife grinder</u>	<u>\$0.00</u>	<u></u>	<u>\$8,000.00</u>
	<u>Balistrini tenoner</u>	<u>\$0.00</u>	<u></u>	<u>\$10,000.00</u>
	<u>Lancaster Clamps Clamp carrier</u>	<u>\$0.00</u>	<u></u>	<u>\$4,000.00</u>
	<u>CR Onsrud Double Table Mastercam</u>	<u>\$0.00</u>	<u></u>	<u>\$15,000.00</u>

Debtor	<u>Sittin Easy, Inc.</u>	Case number (If known)	<u></u>
	Name		
	<u>CR Onsrud Inverted Router</u>	<u>\$0.00</u>	<u>\$3,500.00</u>
	<u>Quincy QSVB 25 Industrial Vacuum</u>	<u>\$0.00</u>	<u>\$6,000.00</u>
	<u>2 Dewalt cutoff saws</u>	<u>\$0.00</u>	<u>\$700.00</u>
	<u>Jet mod swing drill press</u>	<u>\$0.00</u>	<u>\$200.00</u>
	<u>Porter Cable drill press</u>	<u>\$0.00</u>	<u>\$200.00</u>
	<u>Crouch sander</u>	<u>\$0.00</u>	<u>\$1,000.00</u>
	<u>Crouch pump sander</u>	<u>\$0.00</u>	<u>\$500.00</u>
	<u>Trion air dust filter- ceiling mounted</u>	<u>\$0.00</u>	<u>\$500.00</u>
	<u>HyproTherm wood fired outdoor furnace</u>	<u>\$0.00</u>	<u>\$7,500.00</u>
	<u>48 inch 50 HP exhaust fan</u>	<u>\$0.00</u>	<u>\$3,000.00</u>
	<u>Dewalt air compressor</u>	<u>\$0.00</u>	<u>\$350.00</u>
	<u>2 Kobalt air compressors</u>	<u>\$0.00</u>	<u>\$200.00</u>
	<u>Craftsman air compressor</u>	<u>\$0.00</u>	<u>\$100.00</u>
	<u>Misc. small tools, portable heaters, drills, and fans</u>	<u>\$0.00</u>	<u>\$500.00</u>

51. **Total of Part 8.**

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

\$180,900.0052. **Is a depreciation schedule available for any of the property listed in Part 8?**☒ No☐ Yes53. **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.**Part 10: Intangibles and intellectual property**59. **Does the debtor have any interests in intangibles or intellectual property?**☒ No. Go to Part 11.

Debtor Sittin Easy, Inc.
Name

Case number (If known) _____

☐ Yes Fill in the information below.

Part 11: **All other assets**

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

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

☒ No. Go to Part 12.

☐ Yes Fill in the information below.

Debtor Sittin Easy, Inc.
Name

Case number (If known) _____

Part 12: Summary

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

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$32,227.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$500.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$180,900.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+</u> <u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$213,627.00</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$213,627.00</u>

Fill in this information to identify the case:

Debtor name Sittin Easy, Inc.

United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

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

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

Part 1: List Creditors Who Have Secured Claims

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

		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
2.1	Internal Revenue Service Creditor's Name Attn: Centralized Insolvency PO Box 7346 Philadelphia, PA 19101 Creditor's mailing address Creditor's email address, if known Date debt was incurred 10/22/2020 Last 4 digits of account number Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. 1. Internal Revenue Service	Describe debtor's property that is subject to a lien Describe the lien Federal Tax Lien 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) 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	\$64,846.28	\$213,627.00

2.2	Internal Revenue Service Creditor's Name Attn: Centralized Insolvency	Describe debtor's property that is subject to a lien Lumber; Unfinished furniture ; Completed	\$10,010.00	\$213,627.00
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Debtor Sittin Easy, Inc.
Name

Case number (if known)

PO Box 7346
Philadelphia, PA 19101

furniture- showroom models, samples and items used at sales booth and remote sales events; Miscellaneous supplies, including shipping materials, glue, staples, nails, etc. ; Laptops, old printers and CB radio station; 1987 Ford Van Co-owned by Debtor and Walter HarperNot running; 1998 Ford Explorer Eddie Bauer Edition; 2007 Ford Pleasureway RVTitle held by third-parties but vehicle purchased and paid for by debtor; 1984 Enclosed 5x10 trailerCo-owned with Walter Harper; 2011 Covered Wagon Enclosed 6x12 trailer-Titled in third-party name ; 2022 ATC 6X12 enclosed trailerTitled to third-party, purchased and paid for by Debtor; 2016 Coleman RV-TrailerTitled in third-party, purchased and paid for by Debtor ; 2006 Ford Van Titled to third parties, but purchased and paid for by Debtor; 1996 Dodge Coach House; 2 Senco nail guns ; 1 Hitachi nail gun ; 1 Hitachi Box Stapler ; 2 drills- 1 rechargeable, 1 corded ; Portable Heaters; 6 fans ; Baxter Whitney planer with sharpening attachment ; Hyster propane forklift; Rockwell table saw; Lincoln arc welder; Baker A model band resaw, feed and return conveyors; Bell 36 in bandsaw; Cresent 20 in bandsaw; Weining Profimat Moulder; Weinig Roundamat Profile knife grinder; Balistrini tenoner; Lancaster Clamps Clamp carrier; CR Onsrud Double Table Mastercam ; CR Onsrud Inverted Router; Quincy QSVB 25 Industrial Vacuum; 2 Dewalt cutoff saws ; Jet mod swing drill press; Porter Cable drill press; Crouch sander; Crouch pump sander; Trion air dust filter- ceiling mounted ; HyproTherm wood fired outdoor furnace; 48 inch 50 HP exhaust fan ; Dewalt air compressor; 2 Kobalt air compressors; Craftsman air compressor; Misc. small tools, portable heaters, drills, and fans

Creditor's mailing address

Describe the lien**Federal Tax Lien**

Creditor's email address, if known

Is the creditor an insider or related party?☒ No☐ Yes**Is anyone else liable on this claim?**☒ No☐ Yes. Fill out *Schedule H: Creditors* (Official Form 206H)**Date debt was incurred**
12/2/2020**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.

Specified on line 2.1

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

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

\$74,856.28

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

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

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

Debtor	<u>Sittin Easy, Inc.</u>	Case number (if known)	<u></u>
	<small>Name</small>		
Name and address		On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
<div></div>			

Fill in this information to identify the case:

Debtor name Sittin Easy, Inc.

United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

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 Adam Temple 629 Kappock St., Apt. 7B Bronx, NY 10463 Date or dates debt was incurred 9/10/2023 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	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: Undelivered Customer Order Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,857.00	\$1,857.00
2.2	Priority creditor's name and mailing address Alex Anderson 5417 Hwy 73 Jackson Springs, NC 27281 Date or dates debt was incurred 11/2023 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Unpaid Wages (Gross) Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,824.00	\$1,824.00
2.3	Priority creditor's name and mailing address Alexa Curtis 14479 Lava Dome Way Nevada City, CA 95959 Date or dates debt was incurred 10/13/2023 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	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: Undelivered Customer Order Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$847.00	\$847.00

Debtor	Sittin Easy, Inc. Name		Case number (if known)	
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2.4	Priority creditor's name and mailing address Alissa Emmel 404 Greer Ave. Silver Spring, MD 20901	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	\$678.00	\$678.00
Date or dates debt was incurred 11/18/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address Amy Yarcich 3504 E. Broad St. Richmond, VA 23223	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,990.00	\$1,990.00
Date or dates debt was incurred 9/30/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address Andrew Fein 508 20 1/2 St. Virginia Beach, VA 23451	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,090.00	\$1,090.00
Date or dates debt was incurred 10/22/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.7	Priority creditor's name and mailing address Angelo Martinez 2628 Daniel Boone Ln. Hope Mills, NC 28348	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,010.00	\$2,010.00
Date or dates debt was incurred 11/2023		Basis for the claim: Unpaid Wages (Gross)		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address Anna Goodwin 1923 Sierra Cir. South Largo, FL 33770	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	\$878.00	\$878.00
Date or dates debt was incurred 11/4/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.9	Priority creditor's name and mailing address Anne Hearth 3 Creekmore Cove Newport News, VA 23603	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,031.00	\$1,031.00	
	Date or dates debt was incurred 10/7/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.10	Priority creditor's name and mailing address Annette Lynch 65 Highlands Cr. Steamboat Springs, CO 80487	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,055.00	\$2,055.00	
	Date or dates debt was incurred 8/13/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.11	Priority creditor's name and mailing address Arline Maisel 7405 Kessel St. Forest Hills, NY 11375	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	\$3,480.00	\$3,350.00	
	Date or dates debt was incurred 9/8/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.12	Priority creditor's name and mailing address Arnold Hurvitz 48 Winding Brook Rd. New Rochelle, NY 10804	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,395.00	\$2,395.00	
	Date or dates debt was incurred 10/1/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.13	Priority creditor's name and mailing address Arthur Morfin 175 Rummage Packhouse Rd. Ellerbe, NC 28338	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	\$6,600.00	\$6,600.00	
	Date or dates debt was incurred 11/2023	Basis for the claim: Unpaid Wages (Gross)			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.14	Priority creditor's name and mailing address Audrey Dannenberg 103 Minor Rd. Charlottesville, VA 22903	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,550.00	\$1,550.00
	Date or dates debt was incurred 10/8/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.15	Priority creditor's name and mailing address Ayman Farag 731 Johnson Ter. Staten Island, NY 10309	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$549.00	\$549.00
	Date or dates debt was incurred 9/11/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.16	Priority creditor's name and mailing address Becky Kenton 2431 230th St. De Witt, IA 52742	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		\$741.00	\$741.00
	Date or dates debt was incurred 8/19/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.17	Priority creditor's name and mailing address Bobby Weikle 5900 Weston Ln. Crozet, VA 22932	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,715.00	\$1,715.00
	Date or dates debt was incurred 10/7/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.18	Priority creditor's name and mailing address Bonita Sohn 1515 Mustang Run Unit #3 Steamboat Springs, CO 80487	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,082.00	\$1,082.00
	Date or dates debt was incurred 8/13/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.19	Priority creditor's name and mailing address Brandon Belew 1261 Ortman Rd. Afton, VA 22920	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,700.00	\$2,700.00
	Date or dates debt was incurred 10/8/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.20	Priority creditor's name and mailing address Bryson Rogers 2817 Woodside Ave. Winter Park, FL 32789	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,627.00	\$1,627.00
	Date or dates debt was incurred 11/11/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.21	Priority creditor's name and mailing address Calisita C. Morfin 175 Rummage Packhouse Rd. Ellerbe, NC 28338	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		\$4,950.00	\$4,950.00
	Date or dates debt was incurred 2023	Basis for the claim: Unpaid Wages (Gross)			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.22	Priority creditor's name and mailing address Carolyn Grant 16214 Koester St. Houston, TX 77040	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,049.00	\$2,049.00
	Date or dates debt was incurred 8/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.23	Priority creditor's name and mailing address Catherine Vogelsong 910 18th St. S.W. Largo, FL 33770	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		\$720.00	\$720.00
	Date or dates debt was incurred 11/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.24	Priority creditor's name and mailing address Cathy Cox 185 Rock Garden Ter. N.W. Tucker, GA 30084	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,069.00	\$1,069.00
	Date or dates debt was incurred 9/16/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.25	Priority creditor's name and mailing address Cheryl Trossbach 16264 Pine Tree Ln. Ridge, MD 20680	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		\$999.00	\$999.00
	Date or dates debt was incurred 9/22/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.26	Priority creditor's name and mailing address Chris Ruhm 3638 Twin Creeks Rd. Charlottesville, VA 22901	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		\$684.00	\$684.00
	Date or dates debt was incurred 10/7/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.27	Priority creditor's name and mailing address Christina Rasmussen 11 South Run Cold Spring Harbor, NY 11724	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,492.00	\$1,492.00
	Date or dates debt was incurred 9/3/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.28	Priority creditor's name and mailing address Christine D'Angela 1910 Coles Rd. Clearwater, FL 33755	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		\$454.00	\$454.00
	Date or dates debt was incurred 11/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.29	Priority creditor's name and mailing address Cindy Conner 2527 Anaconda Trail Winter Park, FL 32789	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,052.00	\$2,052.00	
	Date or dates debt was incurred 11/12/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.30	Priority creditor's name and mailing address Cindy Ruckpaul 33 Blue Bird Ln. Hico, WV 25854	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,675.00	\$1,675.00	
	Date or dates debt was incurred 10/29/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.31	Priority creditor's name and mailing address Claude Chirignan 135 Autumn Dr. Hauppauge, NY 11788	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,124.00	\$1,124.00	
	Date or dates debt was incurred 9/3/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.32	Priority creditor's name and mailing address Colorado Dept. of Revenue Attn: Sales Tax PO Box 17087 Denver, CO 80217	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown	
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.33	Priority creditor's name and mailing address Connecticut Dept. of Revenue Attn: Sales & Use Tax 450 Columbus Blvd. Hartford, CT 06103	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	\$0.00	
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.34	Priority creditor's name and mailing address Cosgrove Gilbert PO Box 211 West End, NC 27376	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,204.00	\$2,204.00
	Date or dates debt was incurred 11/2023	Basis for the claim: Unpaid Wages (Gross)			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.35	Priority creditor's name and mailing address Craig Desnoyer 17111 Littleleaf Ct. Chesterfield, MO 63005	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		\$50.00	\$50.00
	Date or dates debt was incurred 12/11/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.36	Priority creditor's name and mailing address Dan Greenberger 41-23 204th St. Bayside, NY 11361	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		\$599.00	\$599.00
	Date or dates debt was incurred 11/4/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.37	Priority creditor's name and mailing address Dan Hershberger 1217 Aruthur St. Davis, CA 95616	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		\$790.00	\$790.00
	Date or dates debt was incurred 7/19/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.38	Priority creditor's name and mailing address Daniel Hermann 15557 W. Camnio Real Way Surprise, AZ 85374	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,104.00	\$1,104.00
	Date or dates debt was incurred 8/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.39	Priority creditor's name and mailing address David Jakubowski 32 Covell Rd. Pomfret Center, CT 06259	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		\$761.00	\$761.00
	Date or dates debt was incurred 10/1/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.40	Priority creditor's name and mailing address David V. McAlhany 106 Carr Ct. West End, NC 27376	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,223.00	\$2,223.00
	Date or dates debt was incurred 11/2023	Basis for the claim: Unpaid Wages (Gross)			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.41	Priority creditor's name and mailing address David Wennergren 410 24 1/2 St. Virginia Beach, VA 23451	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,512.00	\$1,512.00
	Date or dates debt was incurred 10/21/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.42	Priority creditor's name and mailing address Dean Stone 4306 210th St. Clinton, IA 52732	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,080.00	\$1,080.00
	Date or dates debt was incurred 8/19/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.43	Priority creditor's name and mailing address Deborah Baker 235-A E. Church St. Frederick, MD 21701	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,506.00	\$1,506.00
	Date or dates debt was incurred 6/11/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)	
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2.44	Priority creditor's name and mailing address Denis & Cathy Keeran 1235 N. Lake Sybelia Dr. Maitland, FL 32751	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,052.00	\$2,052.00
	Date or dates debt was incurred 11/12/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.45	Priority creditor's name and mailing address Denita Todd 503 S. Mayo St. Crystal Beach, FL 34681	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	\$688.00	\$688.00
	Date or dates debt was incurred 11/5/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.46	Priority creditor's name and mailing address Dennis Mohr 4225 Meyers Rd. Triangle, VA 22172	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,693.00	\$1,693.00
	Date or dates debt was incurred 10/20/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.47	Priority creditor's name and mailing address Diana Crisler 1863 Sharondale Dr. Clearwater, FL 33755	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,672.00	\$1,672.00
	Date or dates debt was incurred 11/4/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.48	Priority creditor's name and mailing address Donna Reynolds 28 Sylvan Ct. Harpers Ferry, WV 25425	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	\$799.00	\$799.00
	Date or dates debt was incurred 9/22/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name	Case number (if known)	
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2.49	Priority creditor's name and mailing address Doug Ruby 7534 Camden Harbour Dr. Bradenton, FL 34212	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	\$793.00	\$793.00
	Date or dates debt was incurred 12/3/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.50	Priority creditor's name and mailing address Ed Simon 1432 Barnsdale St. Pittsburgh, PA 15217	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,080.00	\$1,080.00
	Date or dates debt was incurred 8/26/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.51	Priority creditor's name and mailing address Elise Simonsen 8734 Scott St. Springfield, VA 22153	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,043.00	\$2,043.00
	Date or dates debt was incurred 9/30/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.52	Priority creditor's name and mailing address Elissa Spagnolo 4511 South Ocean Blvd., Apt. 906 Boca Raton, FL 33487	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,075.00	\$2,075.00
	Date or dates debt was incurred 9/2/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.53	Priority creditor's name and mailing address Ellen Depew 649 Depot Mills Dr. Gerrardstown, WV 25420	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	\$949.00	\$949.00
	Date or dates debt was incurred 9/29/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.54	Priority creditor's name and mailing address Emily Shearon 6207 Manoa St. Oakland, CA 94618	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,190.00	\$1,190.00
	Date or dates debt was incurred 8/12/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.55	Priority creditor's name and mailing address Emma Barcoe 19 Forkland Ln. Dobbs Ferry, NY 10522	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		\$669.00	\$669.00
	Date or dates debt was incurred 9/10/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.56	Priority creditor's name and mailing address Employment Security Commission PO Box 25903 Raleigh, NC 27611	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		\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.57	Priority creditor's name and mailing address Endy Gutierrez PO Box 922 Candor, NC 27229	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,318.00	\$2,318.00
	Date or dates debt was incurred 11/2023	Basis for the claim: Unpaid Wages (Gross)			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.58	Priority creditor's name and mailing address Eric McCaskill 220 Patten Rd. West End, NC 27376	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,995.00	\$1,995.00
	Date or dates debt was incurred 11/2023	Basis for the claim: Unpaid Wages (Gross)			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)	
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2.59	Priority creditor's name and mailing address Erin Davis 152 Westbrooke Ln. Coraopolis, PA 15108	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	\$762.00	\$762.00
	Date or dates debt was incurred 8/27/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.60	Priority creditor's name and mailing address Erin Nelson 7314 Silver Fern Blvd. Sarasota, FL 34241	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,218.00	\$1,218.00
	Date or dates debt was incurred 11/19/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.61	Priority creditor's name and mailing address Florida Dept. of Revenue Attn: Sales Tax PO Box 6668 Tallahassee, FL 32314	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.62	Priority creditor's name and mailing address Francis Spencer 37 Crawford Rd. Norristown, PA 19403	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	\$3,564.00	\$3,350.00
	Date or dates debt was incurred 8/26/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.63	Priority creditor's name and mailing address Gabor Kiss 21 Edge Hill Ave. Morristown, NJ 07960	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,029.00	\$1,029.00
	Date or dates debt was incurred 12/2/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.64	Priority creditor's name and mailing address Gary Schwartz 2752 Arlington Ave. Bronx, NY 10463	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$499.00	\$499.00
	Date or dates debt was incurred 10/1/2023	Basis for the claim: Trade debt			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.65	Priority creditor's name and mailing address Gayle Kislow 2260 Howes St. Merrick, NY 11566	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,539.00	\$2,539.00
	Date or dates debt was incurred 9/2/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.66	Priority creditor's name and mailing address Gayle Sweda 15621 Trinity Fall Way Bradenton, FL 34212	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,090.00	\$1,090.00
	Date or dates debt was incurred 12/2/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.67	Priority creditor's name and mailing address Georgia Dept. of Revenue Attn: Sales Tax 1800 Century Blvd., N.E. Atlanta, GA 30345	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.68	Priority creditor's name and mailing address Internal Revenue Service Attn: Centralized Insolvency PO Box 7346 Philadelphia, PA 19101	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$11,871.33	\$11,871.33
	Date or dates debt was incurred 2023	Basis for the claim: Payroll Taxes			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor <u>Sittin Easy, Inc.</u> Name		Case number (if known)	
2.69	Priority creditor's name and mailing address Iowa Dept. of Revenue Attn: Sales Tax PO Box 10412 Des Moines, IA 50306	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown Unknown
	Date or dates debt was incurred 	Basis for the claim: For Notice Purposes Only	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.70	Priority creditor's name and mailing address Issac Wentz 4801 Mt. Air Farm Crozet, VA 22932	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,575.00 \$1,575.00
	Date or dates debt was incurred 10/8/2023	Basis for the claim: Undelivered Customer Order	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.71	Priority creditor's name and mailing address Jackie Meyer 5981 Rain Dance Trail Littleton, CO 80125	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	\$728.00 \$728.00
	Date or dates debt was incurred 8/5/2023	Basis for the claim: Undelivered Customer Order	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.72	Priority creditor's name and mailing address James Pico 6053 S. Eagle St. Aurora, CO 80016	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,537.00 \$1,537.00
	Date or dates debt was incurred 8/5/2023	Basis for the claim: Undelivered Customer Order	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
2.73	Priority creditor's name and mailing address Jane Frankel 1820 Rittenhouse Sq., Apt. 301 Philadelphia, PA 19103	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	\$826.00 \$826.00
	Date or dates debt was incurred 10/13/2023	Basis for the claim: Undelivered Customer Order	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.74	Priority creditor's name and mailing address Janet Helms 64 Brookmead Rd. Wayne, PA 19087	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		\$578.00	\$578.00
	Date or dates debt was incurred 8/21/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.75	Priority creditor's name and mailing address Jean Cross 8723 Triple Crown Dr. Longmont, CO 80504	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		\$499.00	\$499.00
	Date or dates debt was incurred 9/1/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.76	Priority creditor's name and mailing address Jeanne Brasseur 912 Rocky Branch Rd. Baker, WV 26801	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,588.00	\$1,588.00
	Date or dates debt was incurred 9/30/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.77	Priority creditor's name and mailing address Jeanne Myers 216 Sheffield Rd. Cherry Hill, NJ 08034	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		\$399.00	\$399.00
	Date or dates debt was incurred 10/13/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<hr/>					
2.78	Priority creditor's name and mailing address Jeff Soirefman 43 Birch Brook Rd. Cortlandt Manor, NY 10567	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,752.00	\$1,752.00
	Date or dates debt was incurred 9/10/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.79	Priority creditor's name and mailing address Jeffrey Levine 450 Christian Herald Valley Cottage, NY 10989	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,535.00	\$1,535.00	
	Date or dates debt was incurred 9/8/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.80	Priority creditor's name and mailing address Jennifer Jackson 25 Ferry Lane East Westport, CT 06880	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	\$999.00	\$999.00	
	Date or dates debt was incurred 11/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.81	Priority creditor's name and mailing address Jennifer Reid 5826 Holden St. Pittsburgh, PA 15232	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,715.00	\$1,715.00	
	Date or dates debt was incurred 8/26/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.82	Priority creditor's name and mailing address Jesus Rodriguez-Garcia 1260 Gurney W Rd. Eagle Springs, NC 27242	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,565.00	\$2,565.00	
	Date or dates debt was incurred 11/2023	Basis for the claim: Unpaid Wages (Gross)			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.83	Priority creditor's name and mailing address Jillian Smith 4 Heartwood Dr., S.W. Cartersville, GA 30120	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	\$818.00	\$818.00	
	Date or dates debt was incurred 9/16/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)	
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2.84	Priority creditor's name and mailing address Jim & Melissa Russell 9307 Mt. Vernon Cr. Alexandria, VA 22309	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	\$3,350.00	\$3,350.00
	Date or dates debt was incurred 10/1/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.85	Priority creditor's name and mailing address Jim Mahoney 2887 Pine Hollow Dr. Tionesta, PA 16353	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	\$847.00	\$847.00
	Date or dates debt was incurred 8/27/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.86	Priority creditor's name and mailing address Joe Harker 680 Retreat Pl. Steamboat Springs, CO 80487	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	\$757.00	\$757.00
	Date or dates debt was incurred 8/13/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.87	Priority creditor's name and mailing address Joe Moy 2532 Stoneview Rd. Orlando, FL 32806	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,700.00	\$2,700.00
	Date or dates debt was incurred 11/12/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.88	Priority creditor's name and mailing address John Henderson 5389 Best Rd. Larkspur, CO 80118	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,624.00	\$1,624.00
	Date or dates debt was incurred 8/5/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.89	Priority creditor's name and mailing address Jordan Shane 63 Elk Track Ct. Aguilar, CO 81020	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		\$3,500.00	\$3,350.00
	Date or dates debt was incurred 8/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.90	Priority creditor's name and mailing address Joy Steinfeld 38 Barstow Rd., Apt. 2a Great Neck, NY 11021	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		\$949.00	\$949.00
	Date or dates debt was incurred 9/10/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.91	Priority creditor's name and mailing address Joyce Collins 25 West 132nd #17 N New York, NY 10037	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		\$749.00	\$749.00
	Date or dates debt was incurred 10/21/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.92	Priority creditor's name and mailing address Karen Grant 5050 Sailwind Cr. Orlando, FL 32801	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		\$449.00	\$449.00
	Date or dates debt was incurred 11/12/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.93	Priority creditor's name and mailing address Karen Larsen 1821 N. Highland Ave. Tarpon Springs, FL 34688	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,090.00	\$1,090.00
	Date or dates debt was incurred 11/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.94	Priority creditor's name and mailing address Karin Marcus 2460 Hy-Crest Dr. Westminster, MD 21158	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		\$628.00	\$628.00
	Date or dates debt was incurred 9/10/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.95	Priority creditor's name and mailing address Kate Mertes 118 N. West St. Alexandria, VA 22314	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,091.00	\$1,091.00
	Date or dates debt was incurred 10/1/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.96	Priority creditor's name and mailing address Kathryn Belcher 1002 Mercer Pl. Frederick, MD 21701	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		\$199.00	\$199.00
	Date or dates debt was incurred 12/11/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.97	Priority creditor's name and mailing address Kathryn Buscaglia 2181 Jamieson Ave., Unit 407 Alexandria, VA 22314	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,968.00	\$2,968.00
	Date or dates debt was incurred 10/1/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.98	Priority creditor's name and mailing address Kathryn Cyr 998 San Pedro Dr. Dunedin, FL 34698	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,090.00	\$1,090.00
	Date or dates debt was incurred 11/4/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)	
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2.99	Priority creditor's name and mailing address Kathryn Pinner 4501 Yarmouth Ct. Virginia Beach, VA 23455	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,538.00	\$2,538.00
Date or dates debt was incurred 10/22/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.100	Priority creditor's name and mailing address Kathy Merriman 1707 St. James Pl. Wexford, PA 15090	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$2,326.00	\$2,326.00
Date or dates debt was incurred 8/27/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.101	Priority creditor's name and mailing address Katie Johnson 460 Forest Trail Edwards, CO 81632	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	\$674.00	\$674.00
Date or dates debt was incurred 8/6/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.102	Priority creditor's name and mailing address Kelly Secker 6914 Tokalon Dr. Dallas, TX 75214	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,456.00	\$1,456.00
Date or dates debt was incurred 7/28/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.103	Priority creditor's name and mailing address Kevin McGahren-Clemens 2 Santa Monica Dr. Eastchester, NY 10709	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	\$821.00	\$821.00
Date or dates debt was incurred 10/7/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.104	Priority creditor's name and mailing address Kevin Neville 31 Anna Ave. Sutter Creek, CA 95685	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,726.00	\$1,726.00
	Date or dates debt was incurred 9/20/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.105	Priority creditor's name and mailing address Laura Dawson 3 Mary Ellen Ct. Center Moriches, NY 11934	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,643.00	\$1,643.00
	Date or dates debt was incurred 9/2/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.106	Priority creditor's name and mailing address Laura Lechler 2640 Milton Hills Dr. Charlottesville, VA 22902	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		\$821.00	\$821.00
	Date or dates debt was incurred 10/8/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.107	Priority creditor's name and mailing address Laura Todd 609 N. Mayo St. Crystal Beach, FL 34681	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		\$900.00	\$900.00
	Date or dates debt was incurred 11/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.108	Priority creditor's name and mailing address Lauren McGuire 16 Pokahoe Dr. Tarrytown, NY 10591	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,098.00	\$1,098.00
	Date or dates debt was incurred 10/31/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.109	Priority creditor's name and mailing address Lawrence Goldberg 220 W. Rittenhouse Sq., Apt. #22B Philadelphia, PA 19103	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,852.00	\$1,852.00	
	Date or dates debt was incurred 10/14/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.110	Priority creditor's name and mailing address Lesley Millay 6571 Chickasaw Lake Worth, FL 33467	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,098.00	\$1,098.00	
	Date or dates debt was incurred 8/18/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.111	Priority creditor's name and mailing address Leslie Anders 15 Barclay Rd. Scarsdale, NY 10583	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	\$599.00	\$599.00	
	Date or dates debt was incurred 8/7/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.112	Priority creditor's name and mailing address Leslie Bayer 2270 Val D'Iserre Cir. Steamboat Springs, CO 80487	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,296.00	\$1,296.00	
	Date or dates debt was incurred 8/12/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.113	Priority creditor's name and mailing address Linda Gaghan 7316 Churchill Rd. Mc Lean, VA 22101	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	\$299.00	\$299.00	
	Date or dates debt was incurred 10/13/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.114	Priority creditor's name and mailing address Linda Hoyt 460 Forest Trail Edwards, CO 81632	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,989.00	\$2,989.00
	Date or dates debt was incurred 8/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.115	Priority creditor's name and mailing address Lindsey Walker 237 N. Townsend St. Telluride, CO 81435	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,542.00	\$2,542.00
	Date or dates debt was incurred 7/29/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.116	Priority creditor's name and mailing address Lisa Morse 68 Colony Oaks Dr. Pittsburgh, PA 15209	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,079.00	\$1,079.00
	Date or dates debt was incurred 8/26/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.117	Priority creditor's name and mailing address Loretta & Greg Rivera 23 Cannon Run Newark, DE 19702	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		\$3,121.00	\$3,121.00
	Date or dates debt was incurred 10/22/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.118	Priority creditor's name and mailing address Lucy Diehl 3 Glenwater Ln. East Setauket, NY 11733	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,438.00	\$1,438.00
	Date or dates debt was incurred 9/3/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)	
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2.119	Priority creditor's name and mailing address Lyle Kahn 9051 Sperry St. Orlando, FL 32827	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	\$797.00	\$797.00
	Date or dates debt was incurred 11/12/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.120	Priority creditor's name and mailing address Lyn Rhinehart 506 Magnolia St., Apt. #1 New Smyrna Beach, FL 32168	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	\$657.00	\$657.00
	Date or dates debt was incurred 8/21/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.121	Priority creditor's name and mailing address Lynn Biondi 220 W. Rittenhouse Sq. Apt. 22A Philadelphia, PA 19103	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	\$455.00	\$455.00
	Date or dates debt was incurred 10/15/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.122	Priority creditor's name and mailing address Maddi Cheers 79 Huwitt Blvd. Center Moriches, NY 11934	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	\$844.00	\$844.00
	Date or dates debt was incurred 9/3/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.123	Priority creditor's name and mailing address Mandi Marcus 8234 Wellington Pl. Jessup, MD 20794	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,398.00	\$1,398.00
	Date or dates debt was incurred 10/14/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.124	Priority creditor's name and mailing address Margaret Davanzo 352 Las Olas Dr. Melbourne, FL 23951	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		\$886.00	\$886.00
	Date or dates debt was incurred 9/3/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.125	Priority creditor's name and mailing address Maria Addison 2027 Roc Rose N.E. Palm Bay, FL 32905	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,400.00	\$2,400.00
	Date or dates debt was incurred 11/11/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.126	Priority creditor's name and mailing address Marianne Coutu 839 Alfred Dr. Orlando, FL 32810	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		\$773.00	\$773.00
	Date or dates debt was incurred 11/4/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.127	Priority creditor's name and mailing address Marie Broadman 1311 Pennington Dr. Brunswick, MD 21716	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		\$199.00	\$199.00
	Date or dates debt was incurred 12/11/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.128	Priority creditor's name and mailing address Mark O'Mara 5170 Longsun Lane, Unit B Avon, CO 81620	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,537.00	\$1,537.00
	Date or dates debt was incurred 8/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.129	Priority creditor's name and mailing address Mary Boone 6500 Marsh Rd. Kingsley, MI 49649	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		\$687.00	\$687.00
	Date or dates debt was incurred 11/25/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.130	Priority creditor's name and mailing address Mary Dempsey 1209 Oak Park Ave. Norfolk, VA 23503	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		\$825.00	\$825.00
	Date or dates debt was incurred 10/22/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.131	Priority creditor's name and mailing address Mary Fleming 5112 Lake Shore Rd. Virginia Beach, VA 23455	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		\$6,000.00	\$3,350.00
	Date or dates debt was incurred 10/20/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.132	Priority creditor's name and mailing address Maryland Revenue Administration Att: Sales Tax 110 Carroll St. Annapolis, MD 21411	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.133	Priority creditor's name and mailing address Maureen Kelly 134 Via De La Reina Merritt Island, FL 32953	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		\$527.00	\$527.00
	Date or dates debt was incurred 1/29/2022	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)	
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2.134	Priority creditor's name and mailing address Maurice Huffman 2027 E. 31st St. Davenport, IA 52807	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,873.00	\$1,873.00
Date or dates debt was incurred 8/19/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.135	Priority creditor's name and mailing address Max Gelernter 152 Maple Heights Rd. Pittsburgh, PA 15232	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	\$762.00	\$762.00
Date or dates debt was incurred 8/26/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.136	Priority creditor's name and mailing address Melissa Koller 6511 Primrose Ln. Longmont, CO 80503	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,127.00	\$1,127.00
Date or dates debt was incurred 7/25/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.137	Priority creditor's name and mailing address Michael Kaplan 23 Moriches Ave. Mastic, NY 11950	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	\$3,350.00	\$3,350.00
Date or dates debt was incurred 9/2/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.138	Priority creditor's name and mailing address Michael Miller 6404 Wilkins Ave. Pittsburgh, PA 15217	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	\$635.00	\$635.00
Date or dates debt was incurred 8/27/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.139	Priority creditor's name and mailing address Mike Andrews 209 Bingham Rd. South Mills, NC 27976	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		\$3,276.00	\$3,276.00
	Date or dates debt was incurred 10/21/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.140	Priority creditor's name and mailing address Mike Bowman 1307 E. Abingdon Dr. Alexandria, VA 22314	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,514.00	\$1,514.00
	Date or dates debt was incurred 9/30/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.141	Priority creditor's name and mailing address Mike Madigan 432 Madison Forest Dr. Herndon, VA 20170	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,498.00	\$1,498.00
	Date or dates debt was incurred 10/14/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.142	Priority creditor's name and mailing address Mike Ullrich 401 26 1/2 St. Virginia Beach, VA 23451	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,725.00	\$1,725.00
	Date or dates debt was incurred 10/22/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
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2.143	Priority creditor's name and mailing address Mike Zirkle 3225 S. Middle Rd. Quicksburg, VA 22847	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,739.00	\$1,739.00
	Date or dates debt was incurred 10/7/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
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2.144	Priority creditor's name and mailing address Moira Haney 7408 Jervis St. Springfield, VA 22151	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	\$599.00	\$599.00
	Date or dates debt was incurred 9/10/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.145	Priority creditor's name and mailing address Monica Cetrone 109 Wolftrap Ln. Nellysford, VA 22958	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,418.00	\$1,418.00
	Date or dates debt was incurred 10/21/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.146	Priority creditor's name and mailing address Moore County Attn: Bankruptcy Filings PO Box 457 Carthage, NC 28327	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	\$0.00	\$0.00
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.147	Priority creditor's name and mailing address Nancy Moore 11 Ball Ave. Salem, NH 03079	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,476.00	\$1,476.00
	Date or dates debt was incurred 9/11/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.148	Priority creditor's name and mailing address Nancy Pillar 3825 Bluffview Dr. Marietta, GA 30062	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	\$694.00	\$694.00
	Date or dates debt was incurred 9/16/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. <small>Name</small>		Case number (if known)		
2.149	Priority creditor's name and mailing address Nancy Seyfriend Stanforth 8072 Cammonare Dr. Sarasota, FL 34238	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,306.00	\$2,306.00
	Date or dates debt was incurred 11/18/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.150	Priority creditor's name and mailing address NC Department of Revenue Attn: Bankruptcy Department PO Box 1168 Raleigh, NC 27540	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,580.49	\$1,580.49
	Date or dates debt was incurred 2023	Basis for the claim: Payroll Taxes			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.151	Priority creditor's name and mailing address Neil Dhar 545 Dune Rd. Westhampton Beach, NY 11978	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		\$649.00	\$649.00
	Date or dates debt was incurred 9/3/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.152	Priority creditor's name and mailing address New Jersey Divison of Taxation Attn: Sales Tax PO Box 281 Trenton, NJ 08695	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. <small>Name</small>	Case number (if known)		
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2.153	Priority creditor's name and mailing address New York Dept. of Taxation and Finance Attn: Sales Tax/Office of Counsel Building 9 WA Harriman Campus Albany, NY 12227	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
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	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only		
	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		

2.154	Priority creditor's name and mailing address Nisha Skukla 584 South Aiken Ave. Pittsburgh, PA 15232	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	\$578.00	\$578.00
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	Date or dates debt was incurred 9/10/2023	Basis for the claim: Undelivered Customer Order		
	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) (Z)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.155	Priority creditor's name and mailing address Ohio Dept. of Taxation Attn: Sales and Use Tax PO Box 2678 Columbus, OH 43216	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
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	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only		
	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		

2.156	Priority creditor's name and mailing address Oklahoma Tax Commission Attn: Sales Tax 2501 N. Lincoln Blvd. Oklahoma City, OK 73194	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
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	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only		
	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	Sittin Easy, Inc. Name		Case number (if known)		
2.157	Priority creditor's name and mailing address Pat Saine 306 Overlook Dr. Cross Junction, VA 22625	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		\$799.00	\$799.00
	Date or dates debt was incurred 10/15/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.158	Priority creditor's name and mailing address Patricia Green 143 Fox Hill Rd. Hampton, VA 23669	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		\$789.00	\$789.00
	Date or dates debt was incurred 10/8/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.159	Priority creditor's name and mailing address Paul & Debra Allison 44 Encore Lane Cartersville, GA 30120	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,900.00	\$2,900.00
	Date or dates debt was incurred 9/17/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.160	Priority creditor's name and mailing address Pennsylvania Dept. of Revenue Attn: Sales Tax PO Box 280905 Harrisburg, PA 17128	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.161	Priority creditor's name and mailing address Peter A. Sibley 966 Douglas Ave., Unit 328 Dunedin, FL 34698	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,407.00	\$1,407.00
	Date or dates debt was incurred 11/5/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
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2.162	Priority creditor's name and mailing address Peter Dean 8519 Freyman Dr. Chevy Chase, MD 20815	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	\$628.00	\$628.00
Date or dates debt was incurred 8/18/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.163	Priority creditor's name and mailing address Peter Oh 5113 Bayard St. Pittsburgh, PA 15232	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,672.00	\$1,672.00
Date or dates debt was incurred 8/27/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.164	Priority creditor's name and mailing address Phillip Kurpe 5998 6th Ave. S. Saint Petersburg, FL 33707	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,090.00	\$1,090.00
Date or dates debt was incurred 11/5/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.165	Priority creditor's name and mailing address Phyllis Bratton 522 4th Ave. S.E. Jamestown, ND 58401	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	\$314.00	\$314.00
Date or dates debt was incurred 10/8/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.166	Priority creditor's name and mailing address Porter Berry 125 Seafield Pt. Westhampton Beach, NY 11978	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	\$832.00	\$832.00
Date or dates debt was incurred 9/3/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name		Case number (if known)	
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2.167	Priority creditor's name and mailing address Randy Appar 42 River Rd. Point Pleasant, PA 18950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,269.00	\$1,269.00
Date or dates debt was incurred 10/13/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.168	Priority creditor's name and mailing address Rebecca Hull 2507 Tuscarora Trail Maitland, FL 32751	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	\$691.00	\$691.00
Date or dates debt was incurred 11/12/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.169	Priority creditor's name and mailing address Rich & Tina Dettbarn 4997 Ravenwood Rd. Virginia Beach, VA 23462	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	\$899.00	\$899.00
Date or dates debt was incurred 10/21/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.170	Priority creditor's name and mailing address Richard Lyon 2133 Craig's Store Rd. Afton, VA 22920	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	\$900.00	\$900.00
Date or dates debt was incurred 10/8/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.171	Priority creditor's name and mailing address Richard Miller 11 Rodeo Dr. Crested Butte, CO 81224	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	\$656.00	\$656.00
Date or dates debt was incurred 8/26/2023		Basis for the claim: Undelivered Customer Order		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.172	Priority creditor's name and mailing address Robert Byram 1850 59th St. Davenport, IA 52806	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		\$773.00	\$773.00
	Date or dates debt was incurred 8/19/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.173	Priority creditor's name and mailing address Ron Bracy 835 Stargazer Ln. Crozet, VA 22932	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		\$821.00	\$821.00
	Date or dates debt was incurred 10/7/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.174	Priority creditor's name and mailing address Rose Warhowsky 24 The Maples Roslyn Heights, NY 11577	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,509.00	\$2,509.00
	Date or dates debt was incurred 9/10/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.175	Priority creditor's name and mailing address Sally Faulkner 2096 Indian Summer Dr. Steamboat Springs, CO 80487	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,082.00	\$1,082.00
	Date or dates debt was incurred 8/12/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.176	Priority creditor's name and mailing address Sandra Ash 111 Reni Rd. Manhasset, NY 11030	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		\$761.00	\$761.00
	Date or dates debt was incurred 10/1/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.177	Priority creditor's name and mailing address Sandra Middleton 6236 Hidden Canyon Rd. Centreville, VA 20120	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,197.00	\$1,197.00
	Date or dates debt was incurred 9/30/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.178	Priority creditor's name and mailing address Sara Axelbaum 2 McKinley St. Bronxville, NY 10708	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		\$886.00	\$886.00
	Date or dates debt was incurred 9/9/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.179	Priority creditor's name and mailing address Sarah Nunally 12 Long Pond Dr. Nantucket, MA 02554	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,268.00	\$1,268.00
	Date or dates debt was incurred 10/22/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.180	Priority creditor's name and mailing address Sarah Romer 7015 Dalemar Dr. Clifton, VA 20124	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,198.00	\$1,198.00
	Date or dates debt was incurred 9/29/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.181	Priority creditor's name and mailing address Sarah Williams 481 Tillbrook Irwin, PA 15642	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		\$832.00	\$832.00
	Date or dates debt was incurred 9/8/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.182	Priority creditor's name and mailing address Scott Avery 505 Scenic Way Great Falls, VA 22066	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		\$847.00	\$847.00
	Date or dates debt was incurred 9/30/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.183	Priority creditor's name and mailing address Sharon K. Howard 1536 N. Riverhills Dr. Tampa, FL 33617	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,195.00	\$1,195.00
	Date or dates debt was incurred 11/4/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.184	Priority creditor's name and mailing address Sharon Petro 814 Village Rd. Charlottesville, VA 22903	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,714.00	\$1,714.00
	Date or dates debt was incurred 10/8/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.185	Priority creditor's name and mailing address Shawn O'Donoghue 114 N. West St. Alexandria, VA 22314	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		\$5,382.00	\$3,350.00
	Date or dates debt was incurred 10/1/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.186	Priority creditor's name and mailing address Simon Meguira 52 Birch Dr. Katonah, NY 10536	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,622.00	\$1,622.00
	Date or dates debt was incurred 9/9/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)	
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2.187	Priority creditor's name and mailing address Skyla Robinson 5417 NC 73 Jackson Springs, NC 27281	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,824.00	\$1,824.00
	Date or dates debt was incurred 11/2023	Basis for the claim: Unpaid Wages (Gross)		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.188	Priority creditor's name and mailing address South Carolina Dept. of Revenue Attn: Sales Tax 300A Outlet Pointe Blvd. Columbia, SC 29210	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.189	Priority creditor's name and mailing address Stephen Olizarowicz 20 Waterford Meadow Dr. Tewksbury, MA 01876	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	\$599.00	\$599.00
	Date or dates debt was incurred 9/12/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.190	Priority creditor's name and mailing address Steve Rosen 7 Cross River Rd Mount Kisco, NY 10549	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,697.00	\$1,697.00
	Date or dates debt was incurred 11/5/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.191	Priority creditor's name and mailing address Susan Einder 411 West End Ave. Apt. #186 New York, NY 10024	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,522.00	\$1,522.00
	Date or dates debt was incurred 9/30/2023	Basis for the claim: Undelivered Customer Order		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.192	Priority creditor's name and mailing address Susan Pinkston 16061 Flagstone Ct. Round Hill, VA 20141	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		\$599.00	\$599.00
	Date or dates debt was incurred 9/22/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.193	Priority creditor's name and mailing address Susan Wolf 4128 208th St. Port Byron, IL 61275	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		\$892.00	\$892.00
	Date or dates debt was incurred 8/19/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.194	Priority creditor's name and mailing address Tanya Friedman 448 Waverly Ave. Brooklyn, NY 11238	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,029.00	\$1,029.00
	Date or dates debt was incurred 11/2/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.195	Priority creditor's name and mailing address Tara Kelly 320 N. Hanover St., Apt. C Hershey, PA 17033	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		\$688.00	\$688.00
	Date or dates debt was incurred 10/14/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.196	Priority creditor's name and mailing address Tasha Murphy 27523 Silverspur St. Steamboat Springs, CO 80487	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,598.00	\$2,598.00
	Date or dates debt was incurred 8/13/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.197	Priority creditor's name and mailing address Thomas Helms 925 N. Highway A1A #503 Indialantic, FL 32903	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		\$928.00	\$928.00
	Date or dates debt was incurred 8/22/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.198	Priority creditor's name and mailing address Thomas Shepherd 19722 Emerald Springs Dr. Houston, TX 77094	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		\$120.00	\$120.00
	Date or dates debt was incurred 10/26/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.199	Priority creditor's name and mailing address Tiffany Smith 57 Nautical Dr. Winfield, WV 25213	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,197.00	\$1,197.00
	Date or dates debt was incurred 8/27/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.200	Priority creditor's name and mailing address Timothy Thomas 4113 Laurel Rd. Alexandria, VA 22309	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		\$879.00	\$879.00
	Date or dates debt was incurred 10/1/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.201	Priority creditor's name and mailing address Tina Evans 7 Phyllis Dr. Montvale, NJ 07645	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,427.00	\$1,427.00
	Date or dates debt was incurred 9/10/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	Sittin Easy, Inc. Name		Case number (if known)		
2.202	Priority creditor's name and mailing address Tom Arbaugh 15 Forest Ln. Staunton, VA 24401	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$2,213.00	\$2,213.00
	Date or dates debt was incurred 10/7/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.203	Priority creditor's name and mailing address Van T. Vo 6618 Shadow Oak Lane Orlando, FL 32809	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,000.00	\$1,000.00
	Date or dates debt was incurred 11/11/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.204	Priority creditor's name and mailing address Vickie Hauser 8405 W. Boulevard Dr. Alexandria, VA 22308	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		\$1,356.00	\$1,356.00
	Date or dates debt was incurred 10/1/2023	Basis for the claim: Undelivered Customer Order			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.205	Priority creditor's name and mailing address Virginia Tax Attn: Sales Tax Richmond, VA 23218	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.206	Priority creditor's name and mailing address West Virginia Tax Division Attn: Sales Tax 101 Lee St. East Charleston, WV 25301	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		Unknown	Unknown
	Date or dates debt was incurred	Basis for the claim: For Notice Purposes Only			
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

Debtor	<u>Sittin Easy, Inc.</u>	Case number (if known)	
	Name		

2.207	Priority creditor's name and mailing address <u>Winston Kelly</u> <u>2610 Inwood Ct.</u> <u>29705</u>	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	\$6,102.00	\$3,350.00
	Date or dates debt was incurred <u>7/30/2023</u>	Basis for the claim: <u>Undelivered Customer Order</u>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.208	Priority creditor's name and mailing address <u>Winston Kelly</u> <u>710 Mountain Village Blvd.</u> <u>Telluride, CO 81435</u>	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	\$3,128.00	\$3,128.00
	Date or dates debt was incurred <u>7/30/2023</u>	Basis for the claim: <u>Undelivered Customer Order</u>		
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (Z)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

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

			Amount of claim	
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3.1	Nonpriority creditor's name and mailing address <u>Better Business Bureau of North Carolina</u> <u>Attn: Managing Agent/Officer</u> <u>5540 Mnuford Rd., Ste. 130</u> <u>Raleigh, NC 27612</u> Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$630.00	
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3.2	Nonpriority creditor's name and mailing address <u>Box Company of America, LLC</u> <u>Attn: Managing Agent/Officer</u> <u>12 EV Hogan Dr.</u> <u>Hamlet, NC 28345</u> Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,316.36	
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3.3	Nonpriority creditor's name and mailing address <u>Century Link Communications, LLC</u> <u>Attn: Managing Agent/Officer</u> <u>100 Centurylink Dr.</u> <u>Monroe, LA 71203</u> Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$155.12	
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3.4	Nonpriority creditor's name and mailing address <u>First Bank</u> <u>Attn: Managing Agent/Officer</u> <u>205 SE Broad St.</u> <u>Southern Pines, NC 28387</u> Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,706.21	
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Debtor	Sittin Easy, Inc. <small>Name</small>	Case number (if known)	
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3.5	Nonpriority creditor's name and mailing address First Insurance Funding Corp. Attn: Managing Agent/Officer 450 Skokie Blvd. Northbrook, IL 60062 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,476.96
3.6	Nonpriority creditor's name and mailing address Frankie Page, CPA Attn: Managing Agent/Officer PO Box 4210 Pinehurst, NC 28374-4210 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accounting Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.7	Nonpriority creditor's name and mailing address Klingspor Corporation Attn: Managing Agent/Officer 856 21st St. Dr., SE 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: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,202.26
3.8	Nonpriority creditor's name and mailing address PNC Bank, National Association Attn: Bankruptcy Department 500 First Ave. Pittsburgh, PA 15219 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Checking Account Overdraft</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$794.11
3.9	Nonpriority creditor's name and mailing address Republic Services, Inc. Attn: Managing Agent/Officer 18500 North Allied Way Phoenix, AZ 85054 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$819.08
3.10	Nonpriority creditor's name and mailing address Republic Services, Inc. Attn: Managing Agent/Officer 18500 North Allied Way Phoenix, AZ 85054 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$819.08
3.11	Nonpriority creditor's name and mailing address SPT Components LLC Attn: Managing Agent/Officer 161 Marty Ln. Lexington, NC 27292 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,676.19

Debtor	Sittin Easy, Inc. <small>Name</small>		Case number (if known)
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3.12	Nonpriority creditor's name and mailing address Square Financial Services, Inc. Attn: Managing Agent/Officer 3165 E. Millrock Dr. Salt Lake City, UT 84121 Date(s) debt was incurred <u>9/2023</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,984.85</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Business Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.13	Nonpriority creditor's name and mailing address TayloeGray, LLC Attn: Managing Agent/Officer 221 N. 2nd St. Wilmington, NC 28401 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$450.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14	Nonpriority creditor's name and mailing address The Cincinnati Insurance Companies Attn: Managing Agent/Officer P.O. Box 145496 Cincinnati, OH 45250 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$319.00</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15	Nonpriority creditor's name and mailing address Uline Attn: Managing Agent/Officer 12575 Uline Dr. Pleasant Prairie, WI 53158 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$2,441.50</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16	Nonpriority creditor's name and mailing address United Parcel Service, Inc. Attn: Managing Agent/Officer 55 Glenlake Pkwy, NE Atlanta, GA 30328 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$21,456.06</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.17	Nonpriority creditor's name and mailing address Verizon Wireless Services, LLC Attn: Managing Agent/Officer One Verizon Way Basking Ridge, NJ 07920 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$433.23</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address Walter F. Harper, Jr. 411 McKenzies Mill Rd. West End, NC 27376 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$221,020.52</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shareholder Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor <u>Sittin Easy, Inc.</u> Name	Case number (if known) _____
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3.19 Nonpriority creditor's name and mailing address WKW Wood Attn: Managing Agent 5112 Springwood Dr. New Bern, NC 28562 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <u>\$14,787.75</u> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Internal Revenue Service Attn: Bankruptcy Processing 4905 Koger Blvd. Greensboro, NC 27407	Line <u>2.68</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	Republic Services, Inc. Attn: Managing Agent/Officer 1137 Albemarle Rd. 27371	Line <u>3.9</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	Republic Services, Inc. Attn: Managing Agent/Officer 1137 Albemarle Rd. 27371	Line <u>3.10</u> <input type="checkbox"/> Not listed. Explain _____	—

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

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

	Total of claim amounts
5a. Total claims from Part 1	5a. \$ <u>289,320.82</u>
5b. Total claims from Part 2	5b. + \$ <u>284,488.28</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ <u>573,809.10</u>

Fill in this information to identify the case:Debtor name Sittin Easy, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.**1. Does the debtor have any executory contracts or unexpired leases?**☒ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☐ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).*Property***2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

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

State the term remaining

List the contract number of any government contract _____

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract _____

Fill in this information to identify the case:Debtor name Sittin Easy, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

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 Walter F. Harper, Jr.

411 McKenzies Mill Rd.
West End, NC 27376

First Bank

☐ D _____
☒ E/F 3.4
☐ G _____

2.2 Walter F. Harper, Jr.

411 McKenzies Mill Rd.
West End, NC 27376Better Business
Bureau of North
Carolina☐ D _____
☒ E/F 3.1
☐ G _____

Fill in this information to identify the case:Debtor name Sittin Easy, Inc.United States Bankruptcy Court for the: MIDDLE DISTRICT OF NORTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/22

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

From the beginning of the fiscal year to filing date:
From 01/01/2024 to Filing Date

Sources of revenue
Check all that apply

☒ Operating a business☐ Other _____

Gross revenue
(before deductions and exclusions)

\$0.00

For prior year:
From 01/01/2023 to 12/31/2023

☒ Operating a business☐ Other _____\$935,016.00

For year before that:
From 01/01/2022 to 12/31/2022

☒ Operating a business☐ Other _____\$875,725.00**2. Non-business revenue**

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

☒ None.**Description of sources of revenue**

Gross revenue from each source
(before deductions and exclusions)

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 \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

Debtor Sittin Easy, Inc.

Case number (if known) _____

☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. WKW Wood Attn: Managing Agent 5112 Springwood Dr. New Bern, NC 28562	10/23/2023	\$2,000.00	<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__
3.2. Walter F. Harper, Jr. 411 McKenzies Mill Rd. West End, NC 27376	10/23/2023	\$4,000.00	<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__
3.3. Payments Made Pursuant to Payroll	Various dates during November and December 2023	Unknown	<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>Details to be provided to Trustee.</u>

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 \$7,575. (This amount may be adjusted on 4/01/25 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. Walter F. Harper, Jr. 411 McKenzies Mill Rd. West End, NC 27376 Principal	1/30/2023, 2/28/2023, 5/15/2023, 6/12/2023, 9/18/2023, 10/23/2023	\$24,275.00	Repayment of Shareholder Loan
4.2. Walter F. Harper, Jr. 411 McKenzies Mill Rd. West End, NC 27376 Principal	Various 2023	\$7,765.00	Cash received from customers at sales shows.
4.3. Walter F. Harper, Jr. 411 McKenzies Mill Rd. West End, NC 27376 Principal	Various 2023	\$10,350.00	Rent paid by corporate debtor.

5. Repossessions, foreclosures, and returns

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

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

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

Debtor Sittin Easy, Inc.

Case number (if known) _____

debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

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

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Internal Revenue Service Internal Revenue Service- Tax Liens Filed 11/27/2020 and 12/2/2020			<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input 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
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Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

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

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

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

☐ None.

Debtor Sittin Easy, Inc.

Case number (if known) _____

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Northern Blue, LLP 1414 Raleigh Rd., Ste. 435 Chapel Hill, NC 27517		12/29/2023 and 1/2/2024	\$3,500.00
	Email or website address <u>www.northernblue.com</u>			
	Who made the payment, if not debtor? Walter Harper			

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

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

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

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

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

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

☒ Does not apply

Address	Dates of occupancy From-To
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Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

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

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

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

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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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.

Debtor Sittin Easy, Inc.

Case number (if known) _____

Customer addresses, email addresses, and phone numbers.

Does the debtor have a privacy policy about that information?

- ☒ No
☐ Yes

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

- ☒ No. Go to Part 10.
☐ Yes. Does the debtor serve as plan administrator?

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

18. Closed financial accounts

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

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

☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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19. Safe deposit boxes

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

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
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20. Off-premises storage

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

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
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Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

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

☒ None

Part 12: Details About Environment Information

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

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

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

Debtor Sittin Easy, Inc.

Case number (if known) _____

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

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. **Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. **Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business25. **Other businesses in which the debtor has or has had an interest**

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

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
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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. Frankie Page, CPA Attn: Managing Agent/Officer PO Box 4210 Pinehurst, NC 28374-4210	

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. Walter F. Harper, Jr. 411 McKenzies Mill Rd. West End, NC 27376	

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.

Debtor Sittin Easy, Inc.

Case number (if known) _____

☒ None**Name and address****27. Inventories**

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

- ☐ No
- ☒ Yes. Give the details about the two most recent inventories.

	Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
27.1	Arthur Morfin	12/2022	

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

Walter F. Harper, Jr.
411 McKenzies Mill Rd.
West End, NC 27376

27.2	Walter Harper	12/31/2023	
------	---------------	------------	--

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

Walter F. Harper, Jr.
411 McKenzies Mill Rd.
West End, NC 27376

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
Walter F. Harper, Jr.	411 McKenzies Mill Rd. West End, NC 27376	President	50 %
Kim Harper	411 McKenzies Mill 27376	Secretary	50 %

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

- ☐ No
- ☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Kim Harper	411 McKenzies Mill West End, NC 27376		
Walter F. Harper, Jr.	411 McKenzies Mill Rd. West End, NC 27376	President, 50%	

Debtor Sittin Easy, Inc.

Case number (if known) _____

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

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

- ☐ No
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Walter F. Harper, Jr. 411 McKenzies Mill Rd. West End, NC 27376	\$42,390	Various In 2023	Shareholder loan payments, Commercial rent paid, and cash received from cutomers.
	Relationship to debtor President			

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

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
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32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the pension fund	Employer Identification number of the pension fund
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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 February 1, 2024

/s/ Walter Harper Walter Harper
 Signature of individual signing on behalf of the debtor Printed name

Position or relationship to debtor President

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

- ☒ No
☐ Yes

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
Middle District of North Carolina

In re Sittin Easy, Inc.

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

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

For legal services, I have agreed to accept	\$	3,500.00
Prior to the filing of this statement I have received	\$	3,500.00
Balance Due	\$	0.00

2. \$ 0.00 of the filing fee has been paid.
3. The source of the compensation paid to me was:
☐ Debtor ☒ Other (specify): Walter Harper
4. The source of compensation to be paid to me is:
☒ Debtor ☐ Other (specify):
5. ☒ 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.
6. 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]
- Analysis of the financial situation and rendering of advice and assistance to the client in determining if a petition should be filed under Title 11 of the US Code. Preparation and filing of the petition, schedules, statement of financial affairs, and other documents required by the court, including any amendments to the schedules. Representation at the meeting of creditors. Representation of debtor in providing Trustee and/or Bankruptcy Administrator with compliance documents or other information and documents. Unless otherwise stated fee paid includes filing fees.
7. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
Adversary Proceedings.

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.

February 1, 2024

Date

/s/ Stephanie L. Osborne

Stephanie L. Osborne 29374

Signature of Attorney

Norten Blue LLP

1414 Raleigh Rd

Ste 435

Chapel Hill, NC 27517-8834

(919) 968-4441 Fax:

slo@nbfirm.com

Name of law firm

**United States Bankruptcy Court
Middle District of North Carolina**

In re	<u>Sittin Easy, Inc.</u>	Debtor(s)
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Case No. _____
Chapter 7

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: February 1, 2024

/s/ Walter Harper
Walter Harper/President
Signer/Title

Adam Temple
629 Kappock St., Apt. 7B
Bronx, NY 10463

Alex Anderson
5417 Hwy 73
Jackson Springs, NC 27281

Alexa Curtis
14479 Lava Dome Way
Nevada City, CA 95959

Alissa Emmel
404 Greer Ave.
Silver Spring, MD 20901

Amy Yarcich
3504 E. Broad St.
Richmond, VA 23223

Andrew Fein
508 20 1/2 St.
Virginia Beach, VA 23451

Angelo Martinez
2628 Daniel Boone Ln.
Hope Mills, NC 28348

Anna Goodwin
1923 Sierra Cir. South
Largo, FL 33770

Anne Hearth
3 Creekmore Cove
Newport News, VA 23603

Annette Lynch
65 Highlands Cr.
Steamboat Springs, CO 80487

Arline Maisel
7405 Kessel St.
Forest Hills, NY 11375

Arnold Hurvitz
48 Winding Brook Rd.
New Rochelle, NY 10804

Arthur Morfin
175 Rummage Packhouse Rd.
Ellerbe, NC 28338

Audrey Dannenberg
103 Minor Rd.
Charlottesville, VA 22903

Ayman Farag
731 Johnson Ter.
Staten Island, NY 10309

Becky Kenton
2431 230th St.
De Witt, IA 52742

Better Business Bureau of North Carolina
Attn: Managing Agent/Officer
5540 Mnuford Rd., Ste. 130
Raleigh, NC 27612

Bobby Weikle
5900 Weston Ln.
Crozet, VA 22932

Bonita Sohn
1515 Mustang Run Unit #3
Steamboat Springs, CO 80487

Box Company of America, LLC
Attn: Managing Agent/Officer
12 EV Hogan Dr.
Hamlet, NC 28345

Brandon Belew
1261 Ortman Rd.
Afton, VA 22920

Bryson Rogers
2817 Woodside Ave.
Winter Park, FL 32789

Calisita C. Morfin
175 Rummage Packhouse Rd.
Ellerbe, NC 28338

Carolyn Grant
16214 Koester St.
Houston, TX 77040

Catherine Vogelsong
910 18th St. S.W.
Largo, FL 33770

Cathy Cox
185 Rock Garden Ter. N.W.
Tucker, GA 30084

Century Link Communications, LLC
Attn: Managing Agent/Officer
100 Centurylink Dr.
Monroe, LA 71203

Cheryl Trossbach
16264 Pine Tree Ln.
Ridge, MD 20680

Chris Ruhm
3638 Twin Creeks Rd.
Charlottesville, VA 22901

Christina Rasmussen
11 South Run
Cold Spring Harbor, NY 11724

Christine D'Angela
1910 Coles Rd.
Clearwater, FL 33755

Cindy Conner
2527 Anaconda Trail
Winter Park, FL 32789

Cindy Ruckpaul
33 Blue Bird Ln.
Hico, WV 25854

Claude Chirignan
135 Autumn Dr.
Hauppauge, NY 11788

Colorado Dept. of Revenue
Attn: Sales Tax
PO Box 17087
Denver, CO 80217

Connecticut Dept. of Revenue
Attn: Sales & Use Tax
450 Columbus Blvd.
Hartford, CT 06103

Cosgrove Gilbert
PO Box 211
West End, NC 27376

Craig Desnoyer
17111 Littleleaf Ct.
Chesterfield, MO 63005

Dan Greenberger
41-23 204th St.
Bayside, NY 11361

Dan Hershberger
1217 Aruthur St.
Davis, CA 95616

Daniel Hermann
15557 W. Camnio Real Way
Surprise, AZ 85374

David Jakubowski
32 Covell Rd.
Pomfret Center, CT 06259

David V. McAlhany
106 Carr Ct.
West End, NC 27376

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410 24 1/2 St.
Virginia Beach, VA 23451

Dean Stone
4306 210th St.
Clinton, IA 52732

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Frederick, MD 21701

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Maitland, FL 32751

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Crystal Beach, FL 34681

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Triangle, VA 22172

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Clearwater, FL 33755

Donna Reynolds
28 Sylvan Ct.
Harpers Ferry, WV 25425

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Bradenton, FL 34212

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Pittsburgh, PA 15217

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Springfield, VA 22153

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649 Depot Mills Dr.
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19 Forkland Ln.
Dobbs Ferry, NY 10522

Employment Security Commission
PO Box 25903
Raleigh, NC 27611

Endy Gutierres
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Candor, NC 27229

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220 Patten Rd.
West End, NC 27376

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Coraopolis, PA 15108

Erin Nelson
7314 Silver Fern Blvd.
Sarasota, FL 34241

First Bank
Attn: Managing Agent/Officer
205 SE Broad St.
Southern Pines, NC 28387

First Insurance Funding Corp.
Attn: Managing Agent/Officer
450 Skokie Blvd.
Northbrook, IL 60062

Florida Dept. of Revenue
Attn: Sales Tax
PO Box 6668
Tallahassee, FL 32314

Francis Spencer
37 Crawford Rd.
Norristown, PA 19403

Frankie Page, CPA
Attn: Managing Agent/Officer
PO Box 4210
Pinehurst, NC 28374-4210

Gabor Kiss
21 Edge Hill Ave.
Morristown, NJ 07960

Gary Schwartz
2752 Arlington Ave.
Bronx, NY 10463

Gayle Kislow
2260 Howes St.
Merrick, NY 11566

Gayle Sweda
15621 Trinity Fall Way
Bradenton, FL 34212

Georgia Dept. of Revenue
Attn: Sales Tax
1800 Century Blvd., N.E.
Atlanta, GA 30345

Internal Revenue Service
Attn: Centralized Insolvency
PO Box 7346
Philadelphia, PA 19101

Internal Revenue Service
Attn: Bankruptcy Processing
4905 Koger Blvd.
Greensboro, NC 27407

Iowa Dept. of Revenue
Attn: Sales Tax
PO Box 10412
Des Moines, IA 50306

Issac Wentz
4801 Mt. Air Farm
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5981 Rain Dance Trail
Littleton, CO 80125

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912 Rocky Branch Rd.
Baker, WV 26801

Jeanne Myers
216 Sheffield Rd.
Cherry Hill, NJ 08034

Jeff Soirefman
43 Birch Brook Rd.
Cortlandt Manor, NY 10567

Jeffrey Levine
450 Christian Herald
Valley Cottage, NY 10989

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25 Ferry Lane East
Westport, CT 06880

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5826 Holden St.
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9307 Mt. Vernon Cr.
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Larkspur, CO 80118

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Melbourne , FL 23951

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Palm Bay, FL 32905

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Orlando, FL 32810

Marie Broadman
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Brunswick, MD 21716

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6500 Marsh Rd.
Kingsley, MI 49649

Mary Dempsey
1209 Oak Park Ave.
Norfolk, VA 23503

Mary Fleming
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Virginia Beach, VA 23455

Maryland Revenue Administration
Att: Sales Tax 110 Carroll St.
Annapolis, MD 21411

Maureen Kelly
134 Via De La Reina
Merritt Island, FL 32953

Maurice Huffman
2027 E. 31st St.
Davenport, IA 52807

Max Gelernter
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Pittsburgh, PA 15232

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Mastic, NY 11950

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Alexandria, VA 22314

Mike Madigan
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Herndon, VA 20170

Mike Ullrich
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Quicksburg, VA 22847

Moirra Haney
7408 Jervis St.
Springfield, VA 22151

Monica Cetrone
109 Wolftrap Ln.
Nellysford, VA 22958

Moore County
Attn: Bankruptcy Filings
PO Box 457
Carthage, NC 28327

Nancy Moore
11 Ball Ave.
Salem, NH 03079

Nancy Pillar
3825 Bluffview Dr.
Marietta, GA 30062

Nancy Seyfriend Stanforth
8072 Cammonare Dr.
Sarasota, FL 34238

NC Department of Revenue
Attn: Bankruptcy Department
PO Box 1168
Raleigh, NC 27540

Neil Dhar
545 Dune Rd.
Westhampton Beach, NY 11978

New Jersey Division of Taxation
Attn: Sales Tax
PO Box 281
Trenton, NJ 08695

New York Dept. of Taxation and Finance
Attn: Sales Tax/Office of Counsel
Building 9 WA Harriman Campus
Albany, NY 12227

Nisha Skukla
584 South Aiken Ave.
Pittsburgh, PA 15232

Ohio Dept. of Taxation
Attn: Sales and Use Tax
PO Box 2678
Columbus, OH 43216

Oklahoma Tax Commission
Attn: Sales Tax
2501 N. Lincoln Blvd.
Oklahoma City, OK 73194

Pat Saine
306 Overlook Dr.
Cross Junction, VA 22625

Patricia Green
143 Fox Hill Rd.
Hampton, VA 23669

Paul & Debra Allison
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Cartersville, GA 30120

Pennsylvania Dept. of Revenue
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Harrisburg, PA 17128

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Phillip Kurpe
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Saint Petersburg, FL 33707

Phyllis Bratton
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Attn: Bankruptcy Department
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Randy Apgar
42 River Rd.
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Rebecca Hull
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Maitland, FL 32751

Republic Services, Inc.
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18500 North Allied Way
Phoenix, AZ 85054

Republic Services, Inc.
Attn: Managing Agent/Officer
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27371

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Richard Lyon
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Afton, VA 22920

Richard Miller
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Crested Butte, CO 81224

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Sandra Middleton
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Irwin, PA 15642

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Tampa, FL 33617

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Charlottesville, VA 22903

Shawn O'Donoghue
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Alexandria, VA 22314

Simon Meguire
52 Birch Dr.
Katonah, NY 10536

Skyla Robinson
5417 NC 73
Jackson Springs, NC 27281

South Carolina Dept. of Revenue
Attn: Sales Tax
300A Outlet Pointe Blvd.
Columbia, SC 29210

SPT Components LLC
Attn: Managing Agent/Officer
161 Marty Ln.
Lexington, NC 27292

Square Financial Services, Inc.
Attn: Managing Agent/Officer
3165 E. Millrock Dr.
Salt Lake City, UT 84121

Stephen Olizarowicz
20 Waterford Meadow Dr.
Tewksbury, MA 01876

Steve Rosen
7 Cross River Rd
Mount Kisco, NY 10549

Susan Einder
411 West End Ave. Apt. #186
New York, NY 10024

Susan Pinkston
16061 Flagstone Ct.
Round Hill, VA 20141

Susan Wolf
4128 208th St.
Port Byron, IL 61275

Tanya Friedman
448 Waverly Ave.
Brooklyn, NY 11238

Tara Kelly
320 N. Hanover St., Apt. C
Hershey, PA 17033

Tasha Murphy
27523 Silverspur St.
Steamboat Springs, CO 80487

TayloeGray, LLC
Attn: Managing Agent/Officer
221 N. 2nd St.
Wilmington, NC 28401

The Cincinnati Insurance Companies
Attn: Managing Agent/Officer
P.O. Box 145496
Cincinnati, OH 45250

Thomas Helms
925 N. Highway 1A #503
Indianapolis, FL 32903

Thomas Shepherd
19722 Emerald Springs Dr.
Houston, TX 77094

Tiffany Smith
57 Nautical Dr.
Winfield, WV 25213

Timothy Thomas
4113 Laurel Rd.
Alexandria, VA 22309

Tina Evans
7 Phyllis Dr.
Montvale, NJ 07645

Tom Arbaugh
15 Forest Ln.
Staunton, VA 24401

Uline
Attn: Managing Agent/Officer
12575 Uline Dr.
Pleasant Prairie, WI 53158

United Parcel Service, Inc.
Attn: Managing Agent/Officer
55 Glenlake Pkwy, NE
Atlanta, GA 30328

Van T. Vo
6618 Shadow Oak Lane
Orlando, FL 32809

Verizon Wireless Services, LLC
Attn: Managing Agent/Officer
One Verizon Way
Basking Ridge, NJ 07920

Vickie Hauser
8405 W. Boulevard Dr.
Alexandria, VA 22308

Virginia Tax
Attn: Sales Tax
Richmond, VA 23218

Walter F. Harper, Jr.
411 McKenzies Mill Rd.
West End, NC 27376

West Virginia Tax Division
Attn: Sales Tax
101 Lee St. East
Charleston, WV 25301

Winston Kelly
2610 Inwood Ct.
29705

Winston Kelly
710 Mountain Village Blvd.
Telluride, CO 81435

WKW Wood
Attn: Managing Agent
5112 Springwood Dr.
New Bern, NC 28562

**United States Bankruptcy Court
Middle District of North Carolina**

In re Sittin Easy, Inc.

Debtor(s)

Case No. _____

Chapter

7

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 Sittin Easy, 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*]

February 1, 2024

Date

/s/ Stephanie L. Osborne

Stephanie L. Osborne 29374

Signature of Attorney or Litigant

Counsel for Sittin Easy, Inc.

Norten Blue LLP

1414 Raleigh Rd

Ste 435

Chapel Hill, NC 27517-8834

(919) 968-4441 Fax:

slo@nbfirm.com