

Fill in this information to identify the case:

Debtor name Imperial Pacific International (CNMI), LLC

United States Bankruptcy Court for the: COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

Case number (if known) 24-00002

☐ 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 May 23, 2024

X /s/ Howyo Chi

Signature of individual signing on behalf of debtor

Howyo Chi

Printed name

Manager

Position or relationship to debtor



Fill in this information to identify the case:Debtor name **Imperial Pacific International (CNMI), LLC**United States Bankruptcy Court for the: **COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**Case number (if known) **24-00002**☐ Check if this is an amended filing**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

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

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 6,474,768.71
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 6,474,768.71

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 17,697,938.50
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 4,100,996.75
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 262,554,275.91
4. Total liabilities Lines 2 + 3a + 3b	\$ 284,353,211.16

Fill in this information to identify the case:Debtor name **Imperial Pacific International (CNMI), LLC**United States Bankruptcy Court for the: **COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**Case number (if known) **24-00002**☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

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

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

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

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

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

All cash or cash equivalents owned or controlled by the debtor**Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Bank of Saipan - Operations Account****Checking****3177****\$466.60**3.2. **Bank of Saipan - Payroll Account****Checking****3185****\$497.80****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

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

\$964.40**Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**

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

Part 3: Accounts receivable**10. Does the debtor have any accounts receivable?**

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

11. Accounts receivable

Debtor Imperial Pacific International (CNMI), LLC
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Tobacco (cigar)				
Inventory [712 Boxes]	<u>0</u>	<u>Unknown</u>	<u>Liquidation</u>	<u>\$100,000.00</u>

22. **Other inventory or supplies**23. **Total of Part 5.**

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

\$200,000.0024. **Is any of the property listed in Part 5 perishable?**☒ No☐ Yes25. **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			
Computer Equipment (approx 250 pc, printers, servers)	<u>Unknown</u>	<u>Liquidation</u>	<u>\$15,000.00</u>

Non-Office FF&E

A/C: \$100,000

Chairs: \$3,000

Desks/Tables: \$54,000

Cabinet / Drawer / Shelf: \$12,000

Villas FF&E (dining chairs, couches, beds, pianos): \$170,000

Staff housing FF&E: \$10,000

Kitchen: \$66,000

Decorative lighting: \$25,000

<u>Unknown</u>	<u>Liquidation</u>	<u>\$440,000.00</u>
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Phone equipment	<u>\$0.00</u>	<u>Liquidation</u>	<u>\$1,500.00</u>
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<u>Maintenance Equipment, Tools and Supplies</u>	<u>\$0.00</u>	<u>Liquidation</u>	<u>\$5,700.00</u>
<u>Forklifts (x2): \$30,000</u> <u>Lifting equipment platform: \$40,000</u>	<u>\$0.00</u>	<u>Liquidation</u>	<u>\$70,000.00</u>
<u>Laundry equipment (commercial laundry washing machines, regular washing machines, etc.)</u>	<u>\$0.00</u>	<u>Liquidation</u>	<u>\$18,000.00</u>

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

43. **Total of Part 7.**

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

\$550,200.00

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

☒ No

☐ Yes

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

☒ No

☐ Yes

Part 8: Machinery, equipment, and vehicles

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

☐ No. Go to Part 9.

☒ Yes Fill in the information below.

General description 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. 99 Vehicles (42 operational vehicles, 1 stolen, 43 inoperable, 13 condition unknown)	<u>Unknown</u>	<u>Liquidation</u>	<u>\$900,000.00</u>

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

49. **Aircraft and accessories**

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

51. **Total of Part 8.**

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

\$900,000.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No

☐ Yes

Debtor Imperial Pacific International (CNMI), LLC
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53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real property

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

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

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

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. Leasehold improvements located at (CPL Derence Jack Road, Orchid Street, Garapan, Saipan, MP 96950)	Leasehold	\$8,333,984.15	Liquidation	Unknown

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
 Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property

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

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

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations Patron List	Unknown		Unknown

Debtor Imperial Pacific International (CNMI), LLC
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64. **Other intangibles, or intellectual property**
Exclusive Casino Operator License Issued by
the Commonwealth Lottery Commission for
the Commonwealth of the Northern Mariana
Islands Unknown Unknown

65. **Goodwill**
Customer goodwill Unknown Unknown

66. **Total of Part 10.** \$0.00
Add lines 60 through 65. Copy the total to line 89.

67. **Do your lists or records include personally identifiable information of customers** (as defined in 11 U.S.C. §§ 101(41A) and 107?
☐ No
☒ Yes

68. **Is there an amortization or other similar schedule available for any of the property listed in Part 10?**
☒ No
☐ Yes

69. **Has any of the property listed in Part 10 been appraised by a professional within the last year?**
☒ No
☐ Yes

Part 11: All other assets

70. **Does the debtor own any other assets that have not yet been reported on this form?**
Include all interests in executory contracts and unexpired leases not previously reported on this form.

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

Current value of
debtor's interest

71. **Notes receivable**
Description (include name of obligor)

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

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

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
See Schedule A.74 - Recovery of gaming debt in cases
pending in the Superior Court for the Northern Mariana
Islands Unknown
Nature of claim
Amount requested \$1,260,543,868.00

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

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

77. **Other property of any kind not already listed** Examples: Season tickets,
Official Form 206A/B Schedule A/B Assets - Real and Personal Property

Debtor **Imperial Pacific International (CNMI), LLC**
Name

Case number (If known) **24-00002**

country club membership

**First Hawaiian Bank Account #7909 [with Magas
Property Management (CNMI), LLC]**

\$135,834.31

78. **Total of Part 11.**

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

\$135,834.31

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

☒ No

☐ Yes

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (If known) **24-00002****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>	\$964.40	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$4,687,770.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$200,000.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$550,200.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$900,000.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$135,834.31	
91. Total. Add lines 80 through 90 for each column	\$6,474,768.71	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$6,474,768.71

In re Imperial Pacific International (CNMI), LLC
Schedule A.74

Civil Number	Case	Amount Asserted in Complaint
23-0209-CV	IPI v. Xilei An	\$ 2,520,040.80
23-0210-CV	IPI v. Son Kuong Chan	\$ 614,347.00
23-0211-CV	IPI v. Jie Chang	\$ 859,697.00
23-0212-CV	IPI v. Wun Seng Chang	\$ 1,623,720.80
23-0213-CV	IPI v. Shiyu Fan	\$ 666,275.00
23-0214-CV	IPI v. Meng Kit Cheang	\$ 268,852.00
23-0215-CV	IPI v. Chiew Lin Cheng	\$ 786,110.00
23-0216-CV	IPI v. Shiu Tim Choy	\$ 13,266,912.92
23-0217-CV	IPI v. Wenhui Dai	\$ 1,702,405.10
23-0218-CV	IPI v. Jin Fang	\$ 947,688.00
23-0219-CV	IPI v. Ming Fu	\$ 2,819,170.00
23-0220-CV	IPI v. Ting Gao	\$ 763,442.00
23-0221-CV	IPI v. Yuansheng Guo	\$ 5,296,763.00
23-0222-CV	IPI v. Joocho Gwak	\$ 95,133.00
23-0223-CV	IPI v. Vaikeong Lai	\$ 68,378.00
23-0224-CV	IPI v. Kam Seng Ho	\$ 6,495.00
23-0225-CV	IPI v. Ka Wai Lam	\$ 982,240.00
23-0226-CV	IPI v. Bill Sang Lee	\$ 107,479.00
23-0228-CV	IPI v. Kuok Seng Leong	\$ 30,945.00
23-0229-CV	IPI v. Kunhang Li	\$ 816,563.00
23-0230-CV	IPI v. Shoujian Li	\$ 1,024,989.70
23-0231-CV	IPI v. Shu Li	\$ 5,359,260.00
23-0232-CV	IPI v. Bing Liu	\$ 792,294.40
23-0233-CV	IPI v. Chang Liu	\$ 464,502.00
23-0234-CV	IPI v. Hu Liu	\$ 9,477,725.00
23-0235-CV	IPI v. Qi Liu	\$ 777,367.00
23-0236-CV	IPI v. Xueyong Liu	\$ 454,435.00
23-0237-CV	IPI v. Jie Lin	\$ 49,791.00
23-0238-CV	IPI v. Yi Liu	\$ 432,465.00
23-0239-CV	IPI v. Yang Lin	\$ 9,280,504.00
23-0241-CV	IPI v. Yidong Lu	\$ 2,277,281.00
23-0242-CV	IPI v. Huaqiu Mai	\$ 434,701.70
23-0244-CV	IPI v. Kam Pui Ng	\$ 254,044.00
23-0245-CV	IPI v. Hongbo Rong	\$ 1,709,459.10
23-0246-CV	IPI v. Jian Shi	\$ 213,174.00

In re Imperial Pacific International (CNMI), LLC
Schedule A.74

23-0247-CV	IPI v. Yongjian Shi	\$	4,306,037.00
23-0248-CV	IPI v. Ye Song	\$	562,281.20
23-0249-CV	IPI v. Yongcheng Song	\$	1,903,098.00
23-0250-CV	IPI v. Tat Shan Suen	\$	486,069.00
23-0251-CV	IPI v. Hua Tan	\$	354,522.00
23-0252-CV	IPI v. Ming Liu Wang	\$	19,447,616.00
23-0253-CV	IPI v. Wai Cheng Victor Tou	\$	247,856.00
23-0254-CV	IPI v. Simeng Wang	\$	83,261.00
23-0255-CV	IPI v. Zhicai Wang	\$	31,856,257.00
23-0257-CV	IPI v. Junkang Wei	\$	78,633,581.00
23-0258-CV	IPI v. Mou Wen	\$	675,882.00
23-0259-CV	IPI v. Hing Wong	\$	747,988.00
23-0260-CV	IPI v. Hong Gay Patrick Jonathan	\$	1,753,863.00
23-0261-CV	IPI v. Pok Wong	\$	802,973.00
23-0262-CV	IPI v. Chunguang Wu	\$	162,415.00
23-0263-CV	IPI v. Min Xu	\$	14,000.00
23-0264-CV	IPI v. Dayuan Yang	\$	24,669.00
23-0265-CV	IPI v. Shengyong Ye	\$	18,683,935.00
23-0266-CV	IPI v. Fanzhi Zeng	\$	543,216.00
23-0267-CV	IPI v. CE Zhang	\$	25,338.00
23-0268-CV	IPI v. Dawei Zhang	\$	4,516,260.59
23-0269-CV	IPI v. Jianwei Zhang	\$	306,260.00
23-0271-CV	IPI v. Kunpeng Zhang	\$	100,771.00
23-0272-CV	IPI v. Ayun Zhao	\$	981,802.00
23-0273-CV	IPI v. Biqi Zhao	\$	20,111.00
23-0274-CV	IPI v. Jianzhong Zhao	\$	2,662,203.00
23-0275-CV	IPI v. Yang, Yinbing & Fenyong Zheng	\$	430,255.70
23-0276-CV	IPI v. Libin Zheng	\$	4,402,325.00
23-0277-CV	IPI v. Hailin Zhou	\$	330,939.00
23-0278-CV	IPI v. Feng Zhou	\$	4,306,630.00
23-0279-CV	IPI v. Wei Zhou	\$	245,081.45
23-0280-CV	IPI v. Jian Zong	\$	39,083,775.00
23-0282-CV	IPI v. Weiguo Li	\$	10,331,589.00
23-0283-CV	IPI v. Fugui Liu	\$	43,038.00
23-0284-CV	IPI v. Hehuang Liu	\$	46,466.00
23-0290-CV	IPI v. Rongshou Wei	\$	47,073.00
23-0291-CV	IPI v. Yajun Xi	\$	46,308.00
23-0292-CV	IPI v. Xinhong Xie	\$	47,777.00
23-0293-CV	IPI v. Qiang Xin	\$	6,003,316.00

In re Imperial Pacific International (CNMI), LLC
Schedule A.74

23-0294-CV	IPI v. Chaowen Yang	\$	3,109,298.00
23-0295-CV	IPI v. Guisen Yu	\$	2,365,800.00
23-0296-CV	IPI v. Qiang Zhang	\$	175,998.00
23-0297-CV	IPI v. Yucheng Zhang	\$	1,495,374.00
23-0298-CV	IPI v. Louhong Zhou	\$	1,914,700.60
23-0299-CV	IPI v. Jianbiao Cai	\$	181,540.00
23-0300-CV	IPI v. Yongjun Cai	\$	407,189.50
23-0301-CV	IPI v. Chenfeng Cheng	\$	234,130.00
23-0302-CV	IPI v. Yudong Dai	\$	140,603.00
23-0303-CV	IPI v. Xinping Gao	\$	409,150.00
23-0304-CV	IPI v. Joinqiu Gong	\$	450,236.00
23-0305-CV	IPI v. Gang Li	\$	939,225.00
23-0306-CV	IPI v. Guancai Liu		
23-0307-CV	IPI v. Song Liu	\$	261,021.30
23-0309-CV	IPI v. Wei Liu	\$	725,423.00
23-0310-CV	IPI v. Fuqiang Sun	\$	154,699.50
23-0312-CV	IPI v. Linguo Jin	\$	1,307,080.00
23-0313-CV	IPI v. Youcai Tan	\$	80,899.00
23-0314-CV	IPI v. Fengshang Wang	\$	7,781,575.46
23-0315-CV	IPI v. Xiaohong Wang	\$	1,613,227.00
23-0316-CV	IPI v. Jianping Zhang	\$	8,531,645.59
23-0324-CV	IPI v. Xinju Wan	\$	929,879.00
23-0325-CV	IPI v. Mingsong Wang	\$	2,461,770.00
23-0326-CV	IPI v. Shuhai Wang	\$	93,379.00
23-0327-CV	IPI v. Hongjiang Wei	\$	1,507,483.18
23-0330-CV	IPI v. Yuan-Xing Cai	\$	940,070.00
23-0331-CV	IPI v. Shaoguo Cao	\$	41,643,827.20
23-0332-CV	IPI v. Hou Choi Chan	\$	1,686,234.26
23-0333-CV	IPI v. Chak Sing Chan	\$	500,000.00
23-0334-CV	IPI v. I Long Chao	\$	361,788.00
23-0335-CV	IPI v. Lijun Chen	\$	63,851.00
23-0336-CV	IPI v. Dewei Chen		
23-0337-CV	IPI v. Xiaochun Chi	\$	140,230.00
23-0338-CV	IPI v. Leung Yiu Chiu	\$	550,642.10
23-0339-CV	IPI v. Song Free Chong	\$	28,000.00
23-0340-CV	IPI v. Wenlong Cui	\$	2,222,160.00
23-0341-CV	IPI v. Xiaobing Dai	\$	903,120.00
23-0342-CV	IPI v. Baicheng Deng	\$	2,178,813.00
23-0343-CV	IPI v. Chao Deng		

In re Imperial Pacific International (CNMI), LLC
Schedule A.74

23-0344-CV	IPI v. Jiang Deng	\$ 2,952,342.00
23-0345-CV	IPI v. Yaosong Ding	\$ 20,255,561.60
23-0346-CV	IPI v. Yihua Dong	\$ 1,739,250.00
23-0347-CV	IPI v. Xiding Han	\$ 43,917,459.60
23-0348-CV	IPI v. Jian Han	\$ 919,453.00
23-0349-CV	IPI v. Jingang Hu	\$ 9,958,446.50
23-0350-CV	IPI v. Bo Hu	\$ 4,548,640.00
23-0351-CV	IPI v. Biao Ji	\$ 623,112.00
23-0352-CV	IPI v. Man Kwan	\$ 2,427,426.43
23-0353-CV	IPI v. Chak Fai Lam	\$ 11,387,734.00
23-0355-CV	IPI v. Hei Wing Lau	\$ 13,755,850.00
23-0356-CV	IPI v. Siu Ching Leung	\$ 1,743,505.00
23-0358-CV	IPI v. Qiufeng Li	\$ 494,865.00
23-0359-CV	IPI v. Zaiwang Li	\$ 19,688,809.50
23-0360-CV	IPI v. Huaguo Li	\$ 27,339,985.00
23-0361-CV	IPI v. Lirong Liu	\$ 119,589,083.60
23-0362-CV	IPI v. Feng Liu	\$ 26,351,225.00
23-0364-CV	IPI v. Fuyong Long	\$ 76,467,851.66
23-0365-CV	IPI v. Dehua Lu	\$ 2,104,145.10
23-0367-CV	IPI v. Leung Way Ray Lui	\$ 614,555.00
23-0368-CV	IPI v. Quansheng Min	\$ 434,069.00
23-0369-CV	IPI v. Zhengfei Ni	\$ 423,295.10
23-0372-CV	IPI v. Haipeng Qu	\$ 559,390.00
23-0373-CV	IPI v. Zhen Xiang Sun	\$ 1,164,801.55
23-0374-CV	IPI v. Patrick Sun	\$ 566,237.50
23-0375-CV	IPI v. Shaoqun Tan	\$ 16,758,475.00
23-0376-CV	IPI v. Siu To Tong	\$ 3,839,700.00
23-0377-CV	IPI v. Heidi Chuhan Tseng	\$ 2,297,279.50
23-0378-CV	IPI v. Hok Ming Tseung	\$ 38,170,120.70
23-0379-CV	IPI v. Huiping Wan	\$ 1,613,087.25
23-0380-CV	IPI v. Jinfei Wang	\$ 12,020,701.00
23-0381-CV	IPI v. Yaohui Wang	\$ 13,526,865.00
23-0382-CV	IPI v. Huanchen Wang	\$ 30,617,065.31
23-0383-CV	IPI v. Cheng Wang	\$ 1,300,034.00
23-0384-CV	IPI v. Bingzhong Wu	\$ 18,894,564.00
23-0385-CV	IPI v. Wenge Xiao	\$ 48,417,946.50
23-0386-CV	IPI v. Xueping Xu	\$ 22,299,417.10
23-0387-CV	IPI v. Liyan Yan	\$ 139,480,635.00
23-0388-CV	IPI v. Yude Yan	\$ 21,620,931.00

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23-0389-CV	IPI v. Zhiqiang Yang	\$	1,360,105.00
23-0390-CV	IPI v. Xiao Juan Yang	\$	379,395.00
23-0391-CV	IPI v. Yanbing Yang	\$	312,249.20
23-0392-CV	IPI v. Xuejian Ye	\$	1,673,675.00
23-0393-CV	IPI v. Yu Yin	\$	1,214,910.00
23-0394-CV	IPI v. Jinlong Zhang	\$	1,368,530.00
23-0395-CV	IPI v. Wuqing Zhao	\$	897,489.40
23-0396-CV	IPI v. Feiyan Zheng	\$	34,403,311.00
23-0397-CV	IPI v. Peng Zhou	\$	277,147.15
23-0398-CV	IPI v. Longwang Zhuo	\$	1,367,549.50
24-0009-CV	IPI v. Jian Chen	\$	1,529,874.00
24-0010-CV	IPI v. Chun Tak Cheng	\$	2,435,000.00
24-0011-CV	IPI v. Man Kwai Cheung	\$	1,493,653.50
24-0012-CV	IPI v. Xue Chuan Gao	\$	947,610.00
24-0013-CV	IPI v. Lilin Guo	\$	1,803,906.09
24-0014-CV	IPI v. Yuk Ng	\$	7,374,400.00
24-0015-CV	IPI v. Sixin Qin	\$	86,291.61
24-0016-CV	IPI v. Yau Chiu Sit	\$	15,301.80
24-0017-CV	IPI v. Qunting Xu	\$	710,045.10
24-0018-CV	IPI v. Longfei Yang	\$	4,054,868.00
24-0019-CV	IPI v. Shengming Yu	\$	2,067,377.00
24-0020-CV	IPI v. Xuejiang Yu	\$	36,490.00
24-0021-CV	IPI v. Lei Zhu	\$	1,841,116.00
24-0022-CV	IPI v. Anyi Zuo		
24-0062-CV	IPI v. Tongwen Chen	\$	4,196,057.00
24-0063-CV	IPI v. Wai Lun Chik	\$	110,190.04
24-0064-CV	IPI v. Shaoguo Du	\$	942,124.00
24-0065-CV	IPI v. Yongjun Feng	\$	272,021.00
24-0066-CV	IPI v. Sheng Gao	\$	535,606.00
24-0067-CV	IPI v. Dingyu Hu	\$	54,643.00
24-0068-CV	IPI v. Dan Ge	\$	1,022,859.50
24-0069-CV	IPI v. Tingrong Hu	\$	455,519.00
24-0070-CV	IPI v. Guangneng Jiang	\$	224,745.59
24-0072-CV	IPI v. Xintao Li	\$	81,363.50
24-0073-CV	IPI v. Kaiwen Lin	\$	179,302.00
24-0074-CV	IPI v. Erguo Liu	\$	211,324.60
24-0075-CV	IPI v. Yingjie Liu	\$	1,737,162.00
24-0076-CV	IPI v. Xiaolong Lu	\$	451,808.00
24-0077-CV	IPI v. Jing Meng	\$	8,110,262.00

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24-0078-CV	IPI v. Koon Wah Nang	\$	207,429.00
24-0079-CV	IPI v. Jinlin Peng	\$	179,889.00
24-0080-CV	IPI v. Bingqu Ruan	\$	2,529,950.00
24-0081-CV	IPI v. Yaofei Shi	\$	588,603.00
24-0082-CV	IPI v. Liangqing Tang	\$	327,666.00
24-0083-CV	IPI v. Chun Tong	\$	260,083.00
24-0084-CV	IPI v. Pak Wing Tseung	\$	728,433.00
24-0085-CV	IPI v. Ho Feng Jim Tsim	\$	59,617.00
24-0086-CV	IPI v. Weixian Wang	\$	11,504,642.50
24-0087-CV	IPI v. Shifang Wu	\$	156,853.00
24-0088-CV	IPI v. Zhongming Wu	\$	104,590.00
24-0089-CV	IPI v. Lilin Yin	\$	478,162.25
24-0090-CV	IPI v. Chunhua Zhao	\$	2,645,027.00
24-0091-CV	IPI v. Chengcai Zhou	\$	355,143.00
24-0092-CV	IPI v. Jinlong Zhu	\$	2,028,183.00
24-0214-CV	IPI v. Meng Kit Cheang (Collective)	\$	268,852.00

Fill in this information to identify the case:Debtor name **Imperial Pacific International (CNMI), LLC**United States Bankruptcy Court for the: **COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**Case number (if known) **24-00002**☐ 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	Century Estate Investment Ltd Creditor's Name c/o Mathew Gregory PMB 419 Box 10000 Saipan, MP 96950 Creditor's mailing address Creditor's email address, if known Date debt was incurred December, 2022 Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien Debtor's personal property (FF&E, Liquor Inventory, Vehicles, materials) Describe the lien Financing Statement 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 checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$10,000,000.00	Unknown

2.2	CNMI Department of Revenue and Taxation Creditor's Name P.O. Box 5234 CHRB Saipan, MP 96950 Creditor's mailing address revtaxinfo@dof.gov.mp Creditor's email address, if known Date debt was incurred Last 4 digits of account number	Describe debtor's property that is subject to a lien Tax Lien [Business Gross Revenue Tax] Describe the 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)	\$7,487,368.81	Unknown
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Debtor **Imperial Pacific International (CNMI), LLC**

Name

Case number (if known)

24-00002

Do multiple creditors have an interest in the same property?

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

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☒ Disputed2.3 **Kang Kai**

Creditor's Name

**Room 703A, 7th Fl, Tai Sang Bank Bldg
130-132 Des Voeux Road C
Central, Hong Kong**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

2023

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

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

Describe debtor's property that is subject to a lien

\$210,569.69**Unknown****Leasehold improvements located at (CPL Derence Jack Road, Orchid Street, Garapan, Saipan, MP 96950)**

Describe the lien

Mortgage [Mortgage Released on May 20, 2024]

Is the creditor an insider or related party?

☒ No☐ Yes

Is anyone else liable on this claim?

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

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent☐ Unliquidated☐ Disputed

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

**\$17,697,938.
50****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

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

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

Name and address

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

Last 4 digits of account number for this entity

Fill in this information to identify the case:Debtor name **Imperial Pacific International (CNMI), LLC**United States Bankruptcy Court for the: **COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**Case number (if known) **24-00002**☐ 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 ANTHONY CAMACHO, JR. c/o Imperial Pacific International (CNMI) PMB 895 Box 10001 Saipan, MP 96950	As of the 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 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
2.2	Priority creditor's name and mailing address BILLY LAM PIU WING c/o Imperial Pacific International (CNMI) PMB 895 BOX 10001 Saipan, MP 96950	As of the 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 Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	Basis for the claim: Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Imperial Pacific International (CNMI), LLC Name	Case number (if known)	24-00002
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2.3	Priority creditor's name and mailing address BRAD RUMOON c/o Imperial Pacific International (CNMI P.O. Box 895 Box 10001 Saipan, MP 96950	As of the 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 <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Basis for the claim: <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address Dept of Labor, CNMI Building No. 1356 Saipan, MP 96950	As of the 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 <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Basis for the claim: <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.5	Priority creditor's name and mailing address ELIAS SEMAN PO BOX 500527 SAIPAN, MP 96950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$233.93	\$0.00
Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Basis for the claim: <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.6	Priority creditor's name and mailing address HAITAO ZONG P.O. BOX 10000 PMB 242 SAIPAN, MP 96950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,584.93	\$0.00
Date or dates debt was incurred <hr/> Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		Basis for the claim: <hr/> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Imperial Pacific International (CNMI), LLC Name	Case number (if known)	24-00002
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2.7	Priority creditor's name and mailing address HANQIN LIU P.O. BOX 10002 PMB 405 SAIPAN, MP 96950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,693.30	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.8	Priority creditor's name and mailing address HERMAN LIETO PMB 205 10003 SAIPAN, MP 96950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$353.93	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.9	Priority creditor's name and mailing address HOW-YO CHI PO BOX 504592 SAIPAN, MP 96950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$13,645.24	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.10	Priority creditor's name and mailing address Internal Revenue Service Centralized Insolvency Operation P.O. Box 7346 Philadelphia, PA 19101-7346	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,079,955.00	\$4,079,955.00
Date or dates debt was incurred		Basis for the claim: Federal Tax		
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	Imperial Pacific International (CNMI), LLC Name	Case number (if known)	24-00002
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2.11	Priority creditor's name and mailing address JESSE ICHIHARA c/o Imperial Pacific International (CNMI PMB 895 BOX 10001 Saipan, MP 96950	As of the 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:		
	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) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.12	Priority creditor's name and mailing address JESSE TENORIO, JR. c/o Imperial Pacific International (CNMI PMB 895 Box10001 Saipan, MP 96950	As of the 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:		
	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) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.13	Priority creditor's name and mailing address LEELAND BACKMAN PO BOX 502910 SAIPAN, MP 96950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$385.26	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.14	Priority creditor's name and mailing address NATIVIDAD CABRERA PO BOX 505151 SAIPAN, MP 96950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$893.32	\$0.00
	Date or dates debt was incurred	Basis for the claim:		
	Last 4 digits of account number	Is the claim subject to offset?		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Imperial Pacific International (CNMI), LLC <small>Name</small>	Case number (if known)	24-00002	
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2.15	Priority creditor's name and mailing address NIKKI RENAE ADA PO BOX 500124 SAIPAN, MP 96950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$1,484.31	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.16	Priority creditor's name and mailing address PIAORAN LI P.O. BOX 10003 PMB 681 SAIPAN, MP 96950	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$767.53	\$0.00
Date or dates debt was incurred		Basis for the claim:		
Last 4 digits of account number		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.17	Priority creditor's name and mailing address Treasurer of CNMI Dept of Rev & Tax P.O. Box 5234 CHRB Saipan, MP 96950	As of the 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: Taxes		
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		

2.18	Priority creditor's name and mailing address XUCHONG LIANG c/o Imperial Pacific International (CNMI) PMB 895 BOX 10001 Saipan, MP 96950	As of the 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:		
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) (4)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor	Imperial Pacific International (CNMI), LLC Name	Case number (if known)	24-00002
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2.19	Priority creditor's name and mailing address ZACHARY MANALO c/o Imperial Pacific International (CNMI) PMB 895 Box 10001 Saipan, MP 96950	As of the 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: _____		
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)			

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

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

			Amount of claim
3.1	Nonpriority creditor's name and mailing address 99 Cents Supermart, Incorporated PO BOX 502651 SAIPAN, MP 96950 Date(s) 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>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,966.14
3.2	Nonpriority creditor's name and mailing address AARON GILFIGIR PO BOX 7759 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$336.30
3.3	Nonpriority creditor's name and mailing address ABDULBAKI YASAR c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$187.95
3.4	Nonpriority creditor's name and mailing address ABELARDO SACRAMENTO PO BOX 502970 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$719.86
3.5	Nonpriority creditor's name and mailing address ABRAHAM IGISAIAR P.O. BOX 501824 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$775.00

Debtor **Imperial Pacific International (CNMI), LLC**
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3.6	Nonpriority creditor's name and mailing address ABSON CUNANAN PO BOX 501106 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$253.29
3.7	Nonpriority creditor's name and mailing address Actimize Limited 15/F, International Trade Tower 348 Kwun Tong Road, Kowloon HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Professional Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$772,714.29
3.8	Nonpriority creditor's name and mailing address Action Plus Co. Limited 5/F Shun Kwong Commercial Building Sheung Wan HONG KONG Date(s) 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>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.9	Nonpriority creditor's name and mailing address Addison Global Interiors, Inc 15007 Willis Rd Cadlwell, MP 83607 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,643.02
3.10	Nonpriority creditor's name and mailing address Adoracion Castro P.O. Box 503431 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,300.00
3.11	Nonpriority creditor's name and mailing address AHMET KIZMAZ c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$816.55
3.12	Nonpriority creditor's name and mailing address AHMET KUCUKHURMAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$838.07

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3.13	Nonpriority creditor's name and mailing address AHMET SENLI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay TURKEY Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.14	Nonpriority creditor's name and mailing address AHMET SIMSEK c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.15	Nonpriority creditor's name and mailing address AHMET YESIL c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,520.00
3.16	Nonpriority creditor's name and mailing address AIMIN ZHOU BOX 10003 PMB 1188 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$709.00
3.17	Nonpriority creditor's name and mailing address AIVEE RONA JULIAN PO BOX 10000 PMB 225 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$718.54
3.18	Nonpriority creditor's name and mailing address ALAN ELNAS PO BOX 500132 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,517.35
3.19	Nonpriority creditor's name and mailing address ALBERT SANTOS P.O. BOX 10000 PMB 321 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$690.89

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3.20	Nonpriority creditor's name and mailing address ALEJANDRO GAMAB PO BOX 10003 PMB 276 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,950.65
3.21	Nonpriority creditor's name and mailing address ALEXANDER ORTA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$360.20
3.22	Nonpriority creditor's name and mailing address ALEXANDER PALACIOS PO BOX 500372 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$884.76
3.23	Nonpriority creditor's name and mailing address ALEXANDRA SIDORENKO PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.24	Nonpriority creditor's name and mailing address ALFRED FERNANDEZ PO BOX 500169 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.25	Nonpriority creditor's name and mailing address Alfred Karcher SE & Co. KG P.O. Box 160 71349 Winnenden Garmany Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,284.64
3.26	Nonpriority creditor's name and mailing address ALFREDO ACOSTA JR PO BOX 503909 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$248.05

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3.27	Nonpriority creditor's name and mailing address Alfredo J. Cabaal d/b/a Fritz Pacific PO Box 505053 Saipan, MP 96950 Date(s) 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>Balance of Settlement amount</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$80,000.00
3.28	Nonpriority creditor's name and mailing address ALFREDO SANTOS PO BOX 10005 PMB 303 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$776.08
3.29	Nonpriority creditor's name and mailing address ALI AKBAS c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$191.03
3.30	Nonpriority creditor's name and mailing address ALI AYOGLU c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.31	Nonpriority creditor's name and mailing address ALI CAKIR c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$807.30
3.32	Nonpriority creditor's name and mailing address ALI GUNES c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91
3.33	Nonpriority creditor's name and mailing address ALI GUNEY c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$502.17

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3.34	Nonpriority creditor's name and mailing address ALICIA BISNAR P.O. BOX 501904 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$29.97 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35	Nonpriority creditor's name and mailing address All Parts Inc PO BOX 504096 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$721.85 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36	Nonpriority creditor's name and mailing address All Rosy Limited Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$60,000.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.37	Nonpriority creditor's name and mailing address Allan Elnas PO Box 500132 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$105.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38	Nonpriority creditor's name and mailing address ALLAN ENGRACIA PO BOX 10005 PMB 74 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,317.45 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39	Nonpriority creditor's name and mailing address ALPER ERGENE c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$184.87 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.40	Nonpriority creditor's name and mailing address ALTANBAGANA DASHDONDOG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.41	Nonpriority creditor's name and mailing address Altangerel Bat-Ochir PO Box 918 PMB 10000 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,956.45
3.42	Nonpriority creditor's name and mailing address ALTANGEREL UUGANBAYAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.43	Nonpriority creditor's name and mailing address ALVIN TAITANO PO BOX 500097 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$98.31
3.44	Nonpriority creditor's name and mailing address AM Group, LLC PMB 397 Box 100001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Construction Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$544,360.00
3.45	Nonpriority creditor's name and mailing address AMARDUUREN TSERENPIL c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,004.00
3.46	Nonpriority creditor's name and mailing address AMARJARGAL DORJJUGDER c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.47	Nonpriority creditor's name and mailing address AMARJARGAL SUKHBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21

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3.48	Nonpriority creditor's name and mailing address American Express (Bk & Insolvency) Dept 4060, 1 John Street Brighton, East Sussex BN88 1NH Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card charges</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$246,600.57
3.49	Nonpriority creditor's name and mailing address American Federal "ZJC" Group Ltd. Compan PO Box 722 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,380.00
3.50	Nonpriority creditor's name and mailing address American K & W Corporation dba Happ PMB 978 P.O. Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.51	Nonpriority creditor's name and mailing address American Sinopan LLC P.O. Box 10003, PMB 722 Saipan, MP 96950 Date(s) debt was incurred <u>2019</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26,003.51
3.52	Nonpriority creditor's name and mailing address ANA LIZA VIOLA PO Box 504401 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,023.15
3.53	Nonpriority creditor's name and mailing address ANDERSON RAMON PO BOX 503891 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$164.32
3.54	Nonpriority creditor's name and mailing address ANDREA MENESES PO Box 506574 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$492.75

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3.55	Nonpriority creditor's name and mailing address ANDREW ALDAN P.O. BOX 505272 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$131.73
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3.56	Nonpriority creditor's name and mailing address Andurance China Co., Limited Rm H3, 6F, No 688-690, Carmina Factory Bldg, Qingshan Rd, Cheung Sha Wan Kowloon, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$65,350.79
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3.57	Nonpriority creditor's name and mailing address Angel Playing Cards USA, Inc 4300 Flossmoor St Las Vegas, NV 89115 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$62,899.20
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3.58	Nonpriority creditor's name and mailing address ANGELLA DIMALANTA PO Box 500103 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$246.53
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3.59	Nonpriority creditor's name and mailing address ANGELO BAUTISTA PMB 628 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$233.61
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3.60	Nonpriority creditor's name and mailing address ANGELO SCALORA c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.61	Nonpriority creditor's name and mailing address Anhui Heli Industrial Vehicle Imp. & Exp 15 Wangjiang West Rd Shushan District Hefei, 230022, China Date(s) 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>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$221.45
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Debtor Imperial Pacific International (CNMI), LLC		Case number (if known) 24-00002
Name		
3.62	Nonpriority creditor's name and mailing address ANIBAL COLON RUIZ PO BOX 505478 SAIPAN, MP 96650 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$434.12 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address ANKHBAYAR BATBAYAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$992.13 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Nonpriority creditor's name and mailing address ANKHBAYAR JARGALSAIKHAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.65	Nonpriority creditor's name and mailing address ANNIE LEE PO BOX 10000 PMB 676 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66	Nonpriority creditor's name and mailing address ANTHONY JOHN MENDIOLA PO BOX 503035 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$418.35 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	Nonpriority creditor's name and mailing address ANTHONY MICHAEL ACOSTA PO BOX 500572 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,191.56 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68	Nonpriority creditor's name and mailing address ANTONINO GUZZARDI via Udine n. 23 Francofonte 96015 Siracusa (SR) ITALY Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,328.40 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Name	Case number (if known)	
Imperial Pacific International (CNMI), LLC	24-00002	
3.69 Nonpriority creditor's name and mailing address ANTONIO TARAS c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,147.58
3.70 Nonpriority creditor's name and mailing address ANTONIO TARASCIO via Francesco Petrarca n.32 Solarino 96010 Siracusa (SR) ITALY Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$814.68
3.71 Nonpriority creditor's name and mailing address ANZAHL DIMALALUAN PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$486.23
3.72 Nonpriority creditor's name and mailing address AON Insurance Micronesia (Saipan) I P.O. Box 502177 Saipan, MP 96950 Date(s) 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>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.73 Nonpriority creditor's name and mailing address APPLE PEARL CUENGCO PO BOX 500146 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.70
3.74 Nonpriority creditor's name and mailing address Aqua Resort Club Saipan P.O. Box 500009 Saipan, MP 96950 Date(s) 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>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.75 Nonpriority creditor's name and mailing address ARANJINDEMBEREL ENKH-AMGALAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.76	Nonpriority creditor's name and mailing address ARIEL REYES PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.77	Nonpriority creditor's name and mailing address ARIUNBOLD ENKHTAIVAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
3.78	Nonpriority creditor's name and mailing address ARIUNBOLD MANAL c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.79	Nonpriority creditor's name and mailing address ARIUNBOLD TUMURBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.80	Nonpriority creditor's name and mailing address ARMANDO PATAPAT PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,034.75
3.81	Nonpriority creditor's name and mailing address Armotech Corporation P.O. Box 504388 Saipan, MP 96950 Date(s) 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>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$850.00
3.82	Nonpriority creditor's name and mailing address ARMIDA ESPECTACION PO BOX 505188 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$539.68

Debtor Name	Case number (if known)	24-00002
Imperial Pacific International (CNMI), LLC Name 3.83 Nonpriority creditor's name and mailing address ARNEL GRUSPE PO BOX 506516 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,179.91
3.84 Nonpriority creditor's name and mailing address Art Man Corporation PMB 122 Box 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Balance of Judgment in Art Man Corporation v. Debtor, Case No. 21-cv-00038</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$86,837.21
3.85 Nonpriority creditor's name and mailing address Artman Environment Corporation c/o Thompson Law, LLC PMB 917 Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Balance of Default Judgment in Artman Environment Corp. v. [Debtor], District Court of NMI 21-CV-0038; Default Judgment in Artman Environment Corp. v. [Debtor], CNMI Superior Court 21-0078-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,061.02
3.86 Nonpriority creditor's name and mailing address Asia Pacific Hotels, Inc P.O. Box 501029 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.87 Nonpriority creditor's name and mailing address Atkins Kroll (Saipan) Inc. P.O. Box 500267 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Balance of Judgment in CNMI Superior Court, Case No. 20-0213-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$55,191.90
3.88 Nonpriority creditor's name and mailing address ATTA Illumination Technology Project Ind Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92,608.20
3.89 Nonpriority creditor's name and mailing address AUDREY JANE TAITANO P.O. BOX 501533 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$468.16

Debtor	Imperial Pacific International (CNMI), LLC <small>Name</small>	Case number (if known)	24-00002
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3.90	Nonpriority creditor's name and mailing address AUDREY JEAN CASTRO P.O. BOX 502507 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$703.34
3.91	Nonpriority creditor's name and mailing address AUGUSTIN HOCOG JR. PO Box 10000 Pmb 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$398.62
3.92	Nonpriority creditor's name and mailing address AURORA PARIAL PO BOX 505954 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$222.58
3.93	Nonpriority creditor's name and mailing address Auto Marine, Inc. PMB 483 P.O. Box 10003 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.94	Nonpriority creditor's name and mailing address AVILYNN BABAUTA PO BOX 503904 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$312.62
3.95	Nonpriority creditor's name and mailing address AYLIN CARREON PO Box 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$461.61
3.96	Nonpriority creditor's name and mailing address B & L Corporation PO Box 10001 PMB 11 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor	Imperial Pacific International (CNMI), LLC		Case number (if known)	24-00002
Name				
3.97	Nonpriority creditor's name and mailing address BAASAN PUREVDAGVA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13	
3.98	Nonpriority creditor's name and mailing address BAASANJARGAL URTNASAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.99	Nonpriority creditor's name and mailing address BAASANKHUU IDERCHULUUN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$499.15	
3.100	Nonpriority creditor's name and mailing address BAATARKHUU DAMIRAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66	
3.101	Nonpriority creditor's name and mailing address BAATARKHUU TUMURKHUYAG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.102	Nonpriority creditor's name and mailing address BAIGALMAA TSERENDULAM c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$947.31	
3.103	Nonpriority creditor's name and mailing address Ballen Corporation dba Pacific Hardware P.O. Box 503257 Saipan, MP 96950 Date(s) 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>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,089.65	

Debtor	Imperial Pacific International (CNMI), LLC		Case number (if known)	24-00002
Name				
3.104	Nonpriority creditor's name and mailing address Banes Horey Berman & Miller, LLC Suite 201, Marianas Business Plaza PO Box 501969 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.105	Nonpriority creditor's name and mailing address Bank of Saipan P.O. Box 500690 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.106	Nonpriority creditor's name and mailing address BANZRAGCH ELBEG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21	
3.107	Nonpriority creditor's name and mailing address BARIS KURTCU c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$825.75	
3.108	Nonpriority creditor's name and mailing address BAT-IREEDUI LKHAGVADORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.109	Nonpriority creditor's name and mailing address BAT-OCHIR BAYARSAIKHAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13	
3.110	Nonpriority creditor's name and mailing address BATBOLD BAZARGUR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,250.44	

Debtor	Imperial Pacific International (CNMI), LLC		Case number (if known)	24-00002
	Name			
3.111	Nonpriority creditor's name and mailing address BATKHISHIG DUGERSUREN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$0.00
3.112	Nonpriority creditor's name and mailing address BATKHISHIG NERGUI c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$995.21
3.113	Nonpriority creditor's name and mailing address BATKHUYAG PUREVZULZAGA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$0.00
3.114	Nonpriority creditor's name and mailing address BATMEND ERDENECHULUUN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$992.13
3.115	Nonpriority creditor's name and mailing address BATNASAN SONOM c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$992.13
3.116	Nonpriority creditor's name and mailing address BATSAIKHAN GURBADAM c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$0.00
3.117	Nonpriority creditor's name and mailing address BATTOGOO ADIYA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$425.15

Debtor	Imperial Pacific International (CNMI), LLC		Case number (if known)	24-00002
	Name			
3.118	Nonpriority creditor's name and mailing address BATTUR TUDEVVANCHIG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,146.20
3.119	Nonpriority creditor's name and mailing address BATZORIG ENKHTUVSHIN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$995.21
3.120	Nonpriority creditor's name and mailing address BATZORIG GANBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$992.13
3.121	Nonpriority creditor's name and mailing address BAYARBAATAR BATBAYAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,109.21
3.122	Nonpriority creditor's name and mailing address BAYARKHUU BAAYA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,081.48
3.123	Nonpriority creditor's name and mailing address BAYARMAGNAI GENDENSUREN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$992.13
3.124	Nonpriority creditor's name and mailing address BAYARSAIKHAN MYAGMAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$995.21

Debtor	Imperial Pacific International (CNMI), LLC Name	Case number (if known)	24-00002
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3.125	Nonpriority creditor's name and mailing address BAYRAM KARA c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
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3.126	Nonpriority creditor's name and mailing address Beijing Jingmao Int'l Logistics Co., Ltd Rm 101, Hengtong Building, No.1 Eighth St Airport Logistics Base, Shunping Rd Shunyi District, Beijing CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$116,369.39
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3.127	Nonpriority creditor's name and mailing address Beijing Ocean International Water Treatm 5 Zone 9, Pinggu Economic Zone Pinggu Dis Beijing, China 100200 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$793.92
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3.128	Nonpriority creditor's name and mailing address Beijing Shitong Culture Co., Ltd Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$93,414.00
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3.129	Nonpriority creditor's name and mailing address BEN LEON GUERRERO JR. PO BOX 504865 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$759.62
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3.130	Nonpriority creditor's name and mailing address BENJAMIN ANADE PO BOX 501321 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,161.00
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3.131	Nonpriority creditor's name and mailing address BENJIE ESCANO PO BOX 7610 SVRD SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,816.44
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3.132	Nonpriority creditor's name and mailing address BENUSTO JONAVAN OLOPAI PO Box 5606 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.31
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3.133	Nonpriority creditor's name and mailing address BERKIN MAMO c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.134	Nonpriority creditor's name and mailing address BERNARD SANTOS P.O. BOX 503387 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$55.35
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3.135	Nonpriority creditor's name and mailing address BERTHA ADA PO BOX 501789 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$133.13
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3.136	Nonpriority creditor's name and mailing address BETTINA MAI PO BOX 502526 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$110.16
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3.137	Nonpriority creditor's name and mailing address Beverly Apparel Limited Wai Wah Commercial Centre No. 6 Wilmer St, Sai Ying Pun Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$367.04
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3.138	Nonpriority creditor's name and mailing address BEVERLY CRISTOBAL PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$270.80
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Debtor Name	Imperial Pacific International (CNMI), LLC	Case number (if known)	24-00002
3.139	Nonpriority creditor's name and mailing address BHIM RAI P.O. BOX 10003 PMB 248 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$592.98
3.140	Nonpriority creditor's name and mailing address BICHAN WANG PO Box 10001 PMB 91 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$558.30
3.141	Nonpriority creditor's name and mailing address BIG BELL, INC. PO Box 5423 CHRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$64,500.00
3.142	Nonpriority creditor's name and mailing address BigBang Entertainment LLC c/o Thompson Law, LLC PMB 917 Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Claims asserted in CNMI Superior Court 23-0057-CV for return of security deposit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$351,652.65
3.143	Nonpriority creditor's name and mailing address BILGUUNTUGS BATJARGAL c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
3.144	Nonpriority creditor's name and mailing address BIN PAN PO BOX 503616 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,454.20
3.145	Nonpriority creditor's name and mailing address BINH NGUYEN P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,061.50

Debtor Name	Case number (if known)	
Imperial Pacific International (CNMI), LLC	24-00002	
3.146 Nonpriority creditor's name and mailing address Bisnes-Mami Saipan, Inc. DBA NAPA Auto & P.O. Box 504640 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,039.08
3.147 Nonpriority creditor's name and mailing address Blue Stone Management (Australia) Pty Lt Level 17, Sydney New South Wales, Australia, 2000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,500.00
3.148 Nonpriority creditor's name and mailing address Boyer Trading Company, LLC PO BOX 503007 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,430.00
3.149 Nonpriority creditor's name and mailing address BRANDON DELA CRUZ PO Box 505770 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$209.19
3.150 Nonpriority creditor's name and mailing address BRENDA LYNN SABLAN P.O. BOX 501903 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.151 Nonpriority creditor's name and mailing address BRENDA MANGARFAL PO Box 501053 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$198.36
3.152 Nonpriority creditor's name and mailing address BRIAN APOSTOL PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,996.64

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3.153	Nonpriority creditor's name and mailing address Brian Dela Cruz Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$251.46
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3.154	Nonpriority creditor's name and mailing address BRIAN LOYD LIZAMA PO BOX 5139 CHRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.155	Nonpriority creditor's name and mailing address BRIAN PELEP PO Box 506623 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$662.65
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3.156	Nonpriority creditor's name and mailing address BRIAN TORRES PO BOX 501231 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.157	Nonpriority creditor's name and mailing address Browne George Ross LLP 2121 Avenue of the Stars, 28th Floor Los Angeles, CA 90067 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.158	Nonpriority creditor's name and mailing address BRYAN REJANO P.O. BOX 10005 PMB 239 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$222.36
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3.159	Nonpriority creditor's name and mailing address BRYAN TORRES PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$270.10
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3.160	Nonpriority creditor's name and mailing address BUCK JOHN ODOSHI PO BOX 505762 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$274.98	
3.161	Nonpriority creditor's name and mailing address BUNPETCH SARNWONG PO BOX 10000 PMB 349 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$176.02	
3.162	Nonpriority creditor's name and mailing address Burger, Comer & Magliari PO Box 504053 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00	
3.163	Nonpriority creditor's name and mailing address BURT SUDA PO BOX 5836 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39.15	
3.164	Nonpriority creditor's name and mailing address Business Gross Revenue Tax P.O. Box 5234 CHRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,378,477.76	
3.165	Nonpriority creditor's name and mailing address BUYANBAATAR MUNA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$523.80	
3.166	Nonpriority creditor's name and mailing address BYAMBAA GOMBODORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21	

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Imperial Pacific International (CNMI), LLC Name 3.167 Nonpriority creditor's name and mailing address BYAMBAA NAMJIL c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
3.168 Nonpriority creditor's name and mailing address BYAMBAJAV TSEDENPELJEE c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.169 Nonpriority creditor's name and mailing address C & R Corporation P.O. Box 501091 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.170 Nonpriority creditor's name and mailing address C Spire Business P.O. Box 830674 MSC # 703 Birmingham, AL 35283 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.171 Nonpriority creditor's name and mailing address C2R Lighting (HK) Limited Unit 504B, 5/F Join-In Hang Sing Centre Nos. 71-75 Container Port Rd Kwai Chung,NT, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$561.65
3.172 Nonpriority creditor's name and mailing address CABIR COSKUN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$801.10
3.173 Nonpriority creditor's name and mailing address CAMERON TOWAI P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$185.13

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3.174	Nonpriority creditor's name and mailing address CAN ZHUANG MEI PO BOX 10003 PMB 478 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,914.37
3.175	Nonpriority creditor's name and mailing address Canaan Realty, LLC. P.O. Box 502592 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.176	Nonpriority creditor's name and mailing address CANER AKSU c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$623.67
3.177	Nonpriority creditor's name and mailing address CANLI PENG PMB 242 BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.178	Nonpriority creditor's name and mailing address Care Route International Logistics Co., 24G, Yandang Bldg #107 Yandang R, Shanghai, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,982.46
3.179	Nonpriority creditor's name and mailing address CAREN DECKER PO 506661 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.180	Nonpriority creditor's name and mailing address Caren Decker PMB 918 P.O. Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.181	Nonpriority creditor's name and mailing address Cargo Express (SPN), Inc. PO Box 506391 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$525.37
3.182	Nonpriority creditor's name and mailing address CARLITO MABAET PO BOX 506190 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$351.10
3.183	Nonpriority creditor's name and mailing address Carlos Caceres Garcia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,187.20
3.184	Nonpriority creditor's name and mailing address CARMELA PANTING PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$508.41
3.185	Nonpriority creditor's name and mailing address Carmelo Colomasi PO Box 10000 PMB 918 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,114.37
3.186	Nonpriority creditor's name and mailing address CARMELO ITALIA c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.187	Nonpriority creditor's name and mailing address CARMELO MIANO c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.188	Nonpriority creditor's name and mailing address CARMEN HASSELBACK P.O. BOX 10000 PMB 378 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,643.12
3.189	Nonpriority creditor's name and mailing address CAROLINA MANGLONA P.O. BOX 10005 PMB 688 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$68.17
3.190	Nonpriority creditor's name and mailing address Casino Essentials, LLC P.O. Box 87801 San Diego, CA 92138 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,595.04
3.191	Nonpriority creditor's name and mailing address CASSANDRA AYUYU PO BOX 503904 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$734.72
3.192	Nonpriority creditor's name and mailing address CATALINO GAMBOA P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$583.19
3.193	Nonpriority creditor's name and mailing address CATHERINE BUCALIG PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$514.76
3.194	Nonpriority creditor's name and mailing address CATHERINE JANNE DELA CRUZ PO Box 8150 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$344.90

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3.195	Nonpriority creditor's name and mailing address CATHERINE MOSES P.O. BOX 501474 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$317.25
<hr/>			
3.196	Nonpriority creditor's name and mailing address Catherine P. Salas P.O. Box 10001 PMB 915 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.197	Nonpriority creditor's name and mailing address CATHERINE SALAS P.O. BOX 501369 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.198	Nonpriority creditor's name and mailing address CATLYN ORTIZ PO BOX 505948 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$708.34
<hr/>			
3.199	Nonpriority creditor's name and mailing address CECILIO PAGARIGAN P.O. BOX 502209 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.200	Nonpriority creditor's name and mailing address CELINA ENCARNACION PO BOX 10000 PMB 552 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$242.13
<hr/>			
3.201	Nonpriority creditor's name and mailing address CENGİZ KAYA c/o IDS Mimarlık Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay TURKEY Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87

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3.202 Nonpriority creditor's name and mailing address Centours International Travel Co., Ltd Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,634.54
3.203 Nonpriority creditor's name and mailing address Central Credit LLC 7250 S Tenaya Way, Ste 100 Las Vegas, NV 89113 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.204 Nonpriority creditor's name and mailing address Ceri Pacific Investment, Ltd P.O. Box 10001 PMB 305 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$205,564.41
3.205 Nonpriority creditor's name and mailing address Ceridian Corporation P.O. Box 10989 Newark, NJ 00719-3989 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,536.53
3.206 Nonpriority creditor's name and mailing address Chalan Kiya Industrial Center, Inc. P.O. Box 500621 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$66,000.00
3.207 Nonpriority creditor's name and mailing address Chan Yee Kee Building Materials Co., Ltd 201, Wah Hing Commercial Building 283 Lockhart Rd, Wanchai, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,235.18
3.208 Nonpriority creditor's name and mailing address CHANDIS COOPER 5210 CHRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **Imperial Pacific International (CNMI), LLC**
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3.209	Nonpriority creditor's name and mailing address CHANG-CHUN CHUNG No. 72, Lunding 1st. Guiren Dist. Tainan City 711 Taiwan (R.O.C.) Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.79
3.210	Nonpriority creditor's name and mailing address CHANG-JUI WU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,891.93
3.211	Nonpriority creditor's name and mailing address CHANTIA HAMMOND PO BOX 505478 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,513.72
3.212	Nonpriority creditor's name and mailing address CHAO GUO PMB 301 PPP BOX 1000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,309.88
3.213	Nonpriority creditor's name and mailing address CHAO LI P.O. Box 10001 PMB 915 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.214	Nonpriority creditor's name and mailing address CHAO-MING CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,419.81
3.215	Nonpriority creditor's name and mailing address CHAO-TE WU No.5, Ln. 30, Wenming St. Lukang Township Changhua City 505 Taiwan (ROC) Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45

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3.216	Nonpriority creditor's name and mailing address CHAO-WEN LO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,158.75
3.217	Nonpriority creditor's name and mailing address CHARLENE TERRY PO BOX 502209 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$316.60
3.218	Nonpriority creditor's name and mailing address CHE-WEI TU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,238.70
3.219	Nonpriority creditor's name and mailing address CHEE KEONG NGO PO Box 10002 PMB 3163 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.220	Nonpriority creditor's name and mailing address Chen, Xingyu P.O. Box 10001 PMB 915 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.221	Nonpriority creditor's name and mailing address CHEN-CHANG YEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,849.42
3.222	Nonpriority creditor's name and mailing address Cheng Chung Design (HK) Ltd. 27F, CNT Tower NO.338 Hennessy Rd Wan Chai HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.223	Nonpriority creditor's name and mailing address CHENG YUN LIU PO BOX 506571 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$770.37
3.224	Nonpriority creditor's name and mailing address CHENG-CHUNG FENG No. 123-1, In. 1, Linsen Rd. Pingtung City Pingtung Country Taiwan (ROC) 900 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,826.59
3.225	Nonpriority creditor's name and mailing address CHENG-HSIANG WENG No.4, Aly. 110, Ln. 282, Wanli Rd. South Dist. Tainan City 202 Taiwan (ROC) Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,601.76
3.226	Nonpriority creditor's name and mailing address CHENG-HSUAN SU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,388.18
3.227	Nonpriority creditor's name and mailing address CHENG-HUI HUANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.228	Nonpriority creditor's name and mailing address CHENG-LUNG CHAO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
3.229	Nonpriority creditor's name and mailing address Chengwei Shang Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,740.00

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3.230	Nonpriority creditor's name and mailing address Chewan Human Resources Co., Ltd Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$29,649.12 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.231	Nonpriority creditor's name and mailing address CHI-FONG LIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.232	Nonpriority creditor's name and mailing address CHIA-CHIN YEH PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.233	Nonpriority creditor's name and mailing address CHIA-CHING WANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.234	Nonpriority creditor's name and mailing address CHIA-CHUAN HUNG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$811.80 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.235	Nonpriority creditor's name and mailing address CHIA-YU LIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,328.40 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.236	Nonpriority creditor's name and mailing address CHIEN-NAN CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$758.06 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.237	Nonpriority creditor's name and mailing address CHIH-CHIEH WANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$845.86
3.238	Nonpriority creditor's name and mailing address CHIH-CHING KUO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.239	Nonpriority creditor's name and mailing address CHIH-HAO YEH PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.240	Nonpriority creditor's name and mailing address CHIN-CHANG FANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,327.95
3.241	Nonpriority creditor's name and mailing address China Telecom (Macau) Company Limited MacaoAlameda Dr. Carlos d'Assumpcao Edificio Cnac, 12, Macau Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$301.65
3.242	Nonpriority creditor's name and mailing address CHINBAT ENKHEE c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.243	Nonpriority creditor's name and mailing address Chinese Association of Saipan, CNMI PMB 988 Box 10012 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.244	Nonpriority creditor's name and mailing address CHING-CHUAN TSAI PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.245	Nonpriority creditor's name and mailing address CHING-HSIANG CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
3.246	Nonpriority creditor's name and mailing address CHING-HUA CHANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.247	Nonpriority creditor's name and mailing address CHING-PO TSENG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,251.64
3.248	Nonpriority creditor's name and mailing address CHING-TE WANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
3.249	Nonpriority creditor's name and mailing address CHOON GUAN GAN PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,301.35
3.250	Nonpriority creditor's name and mailing address CHOUMP LUANGPHINITH PO Box 10003 PMB 342 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,320.96

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3.251	Nonpriority creditor's name and mailing address CHRISTELLIZA ILANO PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$561.57
3.252	Nonpriority creditor's name and mailing address Christelliza Sablan Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$561.57
3.253	Nonpriority creditor's name and mailing address CHRISTIE HIX P.O. BOX 502986 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$242.75
3.254	Nonpriority creditor's name and mailing address CHRISTINE ESTEVES PO BOX 501501 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$138.16
3.255	Nonpriority creditor's name and mailing address CHRISTINE JOY GABRIEL P.O. BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.256	Nonpriority creditor's name and mailing address CHRISTINE MONTANA PO BOX 10000 PMB 772 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$503.59
3.257	Nonpriority creditor's name and mailing address CHRISTOPHER RANGAMAR P.O. BOX 504287 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$381.61

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3.258	Nonpriority creditor's name and mailing address CHUAN FU HUANG PO BOX 10000, PMB 737 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,293.42
3.259	Nonpriority creditor's name and mailing address CHUAN TZU LIN ACEBO PO BOX 503327 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$491.69
3.260	Nonpriority creditor's name and mailing address CHUAN-CHENG KUO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
3.261	Nonpriority creditor's name and mailing address CHUANG-NAN LEE PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$965.36
3.262	Nonpriority creditor's name and mailing address CHUANHUI XU PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.263	Nonpriority creditor's name and mailing address CHULUUNBAT SUGAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
3.264	Nonpriority creditor's name and mailing address CHULUUNTSETSEG CHULUUNBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13

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3.265	Nonpriority creditor's name and mailing address CHUN CHENG PO BOX 73 PMB 10003 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,625.96
3.266	Nonpriority creditor's name and mailing address Chun Fung Engineering Consultancy C Avenida de Marciano Baptista, Nos. Macau MO Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.267	Nonpriority creditor's name and mailing address CHUN JEE WONG PO Box 10000 PMB 242 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.268	Nonpriority creditor's name and mailing address CHUN-FENG LIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,493.71
3.269	Nonpriority creditor's name and mailing address CHUN-HSIANG LEE PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.270	Nonpriority creditor's name and mailing address CHUN-HSIEN HUANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,356.45
3.271	Nonpriority creditor's name and mailing address CHUN-HSUAN CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,237.49

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3.272	Nonpriority creditor's name and mailing address CHUN-HUNG CHOU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,384.95
3.273	Nonpriority creditor's name and mailing address CHUN-LIN CHI PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,727.95
3.274	Nonpriority creditor's name and mailing address CHUN-WEN WANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$811.80
3.275	Nonpriority creditor's name and mailing address CHUN-YI CHUANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,174.18
3.276	Nonpriority creditor's name and mailing address CHUN-YU LIU 2F No.167, Zizhong 2nd St. Zhongli Dist., Taoyuan City 320 TAIWAN Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$835.17
3.277	Nonpriority creditor's name and mailing address CHUNG MING NGEOW P.O. BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.278	Nonpriority creditor's name and mailing address CHUNG-CHI LIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,123.09

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3.279	Nonpriority creditor's name and mailing address CHUNG-SHENG WU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.280	Nonpriority creditor's name and mailing address CHUNG-TAI CHEN LIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.281	Nonpriority creditor's name and mailing address Chunsheng Gu Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$473.50
3.282	Nonpriority creditor's name and mailing address City Trust Bank P.O. Box 501867 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.283	Nonpriority creditor's name and mailing address CLIFFORD ALDAN PO Box 500766 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$719.65
3.284	Nonpriority creditor's name and mailing address CLINTON MANLABAO PO BOX 501106 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$723.41
3.285	Nonpriority creditor's name and mailing address CNMI Department of Public Lands P.O. Box 500380 Saipan, MP 96950 Date(s) 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>Lease</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.286	Nonpriority creditor's name and mailing address Coca-Cola Beverage Co. Micronesia, Inc. P.O. Box 500266 Saipan, MP 96950 Date(s) 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>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$2,811.76
3.287	Nonpriority creditor's name and mailing address COCHING TUGADE P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$0.00
3.288	Nonpriority creditor's name and mailing address Commonwealth Casino Commission Unit 13/14F Springs Plaza, Gualo Rai Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Licensing fees and penalties</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$17,620,000.00
3.289	Nonpriority creditor's name and mailing address Commonwealth Healthcare Corporation, P.O. Box 500409, Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$0.00
3.290	Nonpriority creditor's name and mailing address Commonwealth Utilities Corp. P.O. Box 501220 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$0.00
3.291	Nonpriority creditor's name and mailing address CONNIE MEDINO PO BOX 10002 PMB 2452 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,382.82
3.292	Nonpriority creditor's name and mailing address CONRAD CANLAS P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$736.57

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3.293	Nonpriority creditor's name and mailing address CONRADO PASCUAL PO Box 505398 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60.68
3.294	Nonpriority creditor's name and mailing address Consillio Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$74,763.77
3.295	Nonpriority creditor's name and mailing address Consolidated Transportation Services, In PO Box 501937 Tanapag Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,438.00
3.296	Nonpriority creditor's name and mailing address Construction & Material Supply, Inc P.O. Box 500609 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,902.50
3.297	Nonpriority creditor's name and mailing address Cornerstone Technologies (Sonasoft) 2059 Camden Ave, #298 San Jose, CA 95124 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,700.00
3.298	Nonpriority creditor's name and mailing address CORRADO MODICA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,878.02
3.299	Nonpriority creditor's name and mailing address COSTEL RADU BUTAROIU Sat Gorgota(Com Razvad) Judetu Dimbovita STR Principala 180 Romania 137395 ROMANIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$914.35

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3.300	Nonpriority creditor's name and mailing address CRESSA ANN SALIBIA PO BOX 10000 PMB 619 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$207.51
3.301	Nonpriority creditor's name and mailing address CRISANTA DALIVA PO BOX 505397 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,138.06
3.302	Nonpriority creditor's name and mailing address CRUZ DELA PO BOX 503110 CK SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.303	Nonpriority creditor's name and mailing address CRUZ DELA P.O. BOX 500323 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.304	Nonpriority creditor's name and mailing address CRYSTAL LIZAMA PO BOX 504227 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,427.86
3.305	Nonpriority creditor's name and mailing address Crystal Star Corporation P.O. Box 502770 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.306	Nonpriority creditor's name and mailing address CSC Asia Pacific Production 21/F CMA Bldg 64 Connaught Rd, Central Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$254.89

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Imperial Pacific International (CNMI), LLC Name 3.307 Nonpriority creditor's name and mailing address CUMAALI KOCOGLU c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.308 Nonpriority creditor's name and mailing address CUMALI CIFTCI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$191.03
3.309 Nonpriority creditor's name and mailing address D & W Saipan Inc. dba Highway Express P.O. Box 500440 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.310 Nonpriority creditor's name and mailing address D&Q Saipan Co., Ltd P.O. Box 504462 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,822.83
3.311 Nonpriority creditor's name and mailing address DAGVADORJ ALTANCHIMEG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
3.312 Nonpriority creditor's name and mailing address Dah Chong Hong Macau Logistics Warehouse Rm A-D 12/F Edif Tai Wah 693 Avenida da Praia Grande Macau, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,470.13
3.313 Nonpriority creditor's name and mailing address DAISY STA. ANA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$346.04

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3.314	Nonpriority creditor's name and mailing address DALKHAASUREN ARIYAMANGAL c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
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3.315	Nonpriority creditor's name and mailing address DAMASO BULUSAN PO BOX 10003 PMB 260 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,168.55
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3.316	Nonpriority creditor's name and mailing address DAMIAN BREL PO Box 7547 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$459.16
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3.317	Nonpriority creditor's name and mailing address DAN DERIC IBARRA PO Box 506160 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$139.43
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3.318	Nonpriority creditor's name and mailing address DANIELLE MAFNAS PO Box 503489 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.319	Nonpriority creditor's name and mailing address DANNY HUI PO BOX 10001 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,387.70
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3.320	Nonpriority creditor's name and mailing address DARLYN OFALLA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor Name	Case number (if known)	
Imperial Pacific International (CNMI), LLC	24-00002	
3.321 Nonpriority creditor's name and mailing address DARWIN DOMINGO PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$171.63
3.322 Nonpriority creditor's name and mailing address Datong Decoration Materials and Engineer Avenida da Praia Grande 409 China Law Bldg, 21/F Macau Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Construction Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$518,499.50
3.323 Nonpriority creditor's name and mailing address DAVAADORJ BAZARRAGCHAA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
3.324 Nonpriority creditor's name and mailing address DAVAAJARGAL BANZRAGCH c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$345.09
3.325 Nonpriority creditor's name and mailing address DAVAASUREN DAGVADORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
3.326 Nonpriority creditor's name and mailing address DAVAATSEREN CHULUUNBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.327 Nonpriority creditor's name and mailing address DAVID HOSONO PO BOX 500536 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,304.18

Debtor	Imperial Pacific International (CNMI), LLC <small>Name</small>	Case number (if known)	24-00002
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3.328	Nonpriority creditor's name and mailing address DAVID INOS PO Box 7666 SVRB SAIPAN, MP 96951 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$164.32
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3.329	Nonpriority creditor's name and mailing address David J. Rillera Jr. DBA DR Constructors P.O. Box 26315 Barrigada, GU 96921 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,377.95
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3.330	Nonpriority creditor's name and mailing address DC Systems Digital Communications Ltd. Alameda Dr. Carlos D' Assumpcao No. 258 EDIF. Kin Heng Long Plaza 13 Andar, B Macau Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$117,900.00
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3.331	Nonpriority creditor's name and mailing address DE-XIN XU No.3-7, Xiny Ln., YuJiao Rd. Qiaotou Dist. Kaosiung City 825 Taiwan (ROC) Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,117.30
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3.332	Nonpriority creditor's name and mailing address DEBRA QUINDOZA PMB 269 BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$402.85
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3.333	Nonpriority creditor's name and mailing address DECKSON CHIPUELONG P.O. BOX 503973 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$283.50
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3.334	Nonpriority creditor's name and mailing address Del Benson P.O. Box 5310 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,000.00
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.335	Nonpriority creditor's name and mailing address Delta Trading Co., LTD PMB A-7 Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,363.48
3.336	Nonpriority creditor's name and mailing address DENIZ OZTURK c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$816.55
3.337	Nonpriority creditor's name and mailing address DENNIES PARDO PO BOX 502511 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$211.42
3.338	Nonpriority creditor's name and mailing address DENNIS ONG PO BOX 501787 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.339	Nonpriority creditor's name and mailing address DEQIANG LIU PO Box 501075 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,411.51
3.340	Nonpriority creditor's name and mailing address DER-HARN LEE PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,551.80
3.341	Nonpriority creditor's name and mailing address DEREK CASTRO PO BOX 505980 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$872.72

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.342	Nonpriority creditor's name and mailing address DERRICK TUDELA PO BOX 7448 SVRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.343	Nonpriority creditor's name and mailing address DEYVEE JEEN CELIS P.O. BOX 500282 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,110.33
3.344	Nonpriority creditor's name and mailing address DFK Limited RM15 A15/F Goodwill, Industr. Bldg 36-44 PAK TIN Par Street Tsuen Wan HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,100,000.00
3.345	Nonpriority creditor's name and mailing address DH Co., Ltd. P.O. Box 501988 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.346	Nonpriority creditor's name and mailing address DHH Washington DC Law Office 1300 Pennsylvania Ave, NW, Ste 700 Washington, DC 20004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$700.00
3.347	Nonpriority creditor's name and mailing address DHL Express 16592 Collections Center Drive Chicago, IL 60693 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,108.47
3.348	Nonpriority creditor's name and mailing address DHS Engineers, LLC 1201-3rd Ave, Ste 220 Seattle, WA 98101 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,000.00

Debtor	Imperial Pacific International (CNMI), LLC Name	Case number (if known)	24-00002
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3.349	Nonpriority creditor's name and mailing address Diagnostic Laboratory Services, Inc 99-859 Iwaiwa St. Aiea, HI 96701-3267 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.350	Nonpriority creditor's name and mailing address DIANA ROSE SERRANO P.O. BOX 504734 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95.01
3.351	Nonpriority creditor's name and mailing address DICKY FERIA P.O. BOX 503527 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$529.31
3.352	Nonpriority creditor's name and mailing address DIMAS OMAR PO BOX 10001 PMB LB 31 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$880.52
3.353	Nonpriority creditor's name and mailing address DINA ARQUILITA P.O. BOX 10003 PMB 67 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$349.77
3.354	Nonpriority creditor's name and mailing address DINH TRUNG NGUYEN PO Box 10003 PMB 819 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,633.68
3.355	Nonpriority creditor's name and mailing address Dip Sing Enterprises Company Limited G/F, Bakerview 66 Baker St, Hung Hom, KLN, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,504.76

Debtor	Imperial Pacific International (CNMI), LLC		Case number (if known)	24-00002
Name				
3.356	Nonpriority creditor's name and mailing address Docomo Pacific 219 South Marine Corps Drive Suite 206 Tamuning, GU 96913-3927 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$18,864.83
3.357	Nonpriority creditor's name and mailing address DOLORES ROMOLOR PO BOX 8215 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$200.22
3.358	Nonpriority creditor's name and mailing address DOMENIQUE GONZALES PO BOX 505051 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$372.91
3.359	Nonpriority creditor's name and mailing address DOMINADOR ANDRES PO BOX 506186 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,115.32
3.360	Nonpriority creditor's name and mailing address DONALD BROWNE PO BOX 10001 PMB 353 SAIPAN, MP 96950 Date(s) 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>Default Judgment in Donald R Browne v. [Debtor], CNMI Superior Court 22-0062-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$111,362.76
3.361	Nonpriority creditor's name and mailing address DONALD KILELEMAN PO BOX 500984 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$460.11
3.362	Nonpriority creditor's name and mailing address DONAVON HALLMARK PO BOX 10001 PMB 331 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$18,263.77

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.363	Nonpriority creditor's name and mailing address Dong Fang Trading dba Yuan Xing Garden c/o Robert Torres Law Group PO Box 500730 CK Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Breach of contract claim asserted in Dong Fang Trading dba Yuan Xing Garden v. [Debtor], CNMI Superior Court 20-0213-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$134,807.90
3.364	Nonpriority creditor's name and mailing address Dong Hua Yao PO Box 10003 PMB 305 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.76
3.365	Nonpriority creditor's name and mailing address DONG-HAO JHUO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.366	Nonpriority creditor's name and mailing address Dongguan Zesen Furnishing Co., Ltd Date(s) 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>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$877.20
3.367	Nonpriority creditor's name and mailing address Sun Donghai Room 4933, Four Season Place Central, HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,000,000.00
3.368	Nonpriority creditor's name and mailing address Donnie Vince Seman Fejeran c/o Law Office of Bruce Berline, LLC P.O. Box 5686 CHRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Workers Compensation Claim asserted in CNMI Superior Court 21-0100-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.369	Nonpriority creditor's name and mailing address DONNIE WILLIAMS PO Box 5087 CHRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.370	Nonpriority creditor's name and mailing address DORRAINE AGUILAR PMB 89 PO BOX 10003 GARAPAN SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$235.64
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3.371	Nonpriority creditor's name and mailing address Dowling Advisory Group 3579 E. Foothill Blvd, Suite 651 Pasadena, CA 91107 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$65,443.75
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3.372	Nonpriority creditor's name and mailing address DR Safety Consultant, LLC P.O.BOX 10001 PMB 381 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.373	Nonpriority creditor's name and mailing address DRUSCILLA FITIAL PO BOX 501824 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,876.80
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3.374	Nonpriority creditor's name and mailing address DULAMSUREN BAYARMAGNAI c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.375	Nonpriority creditor's name and mailing address DULCE ELLAZAR PO Box 10000 Pmb 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$817.53
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3.376	Nonpriority creditor's name and mailing address DULMAA DASHTSEREN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
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Imperial Pacific International (CNMI), LLC	24-00002	
3.377 Nonpriority creditor's name and mailing address DWAYNE JAY BAUTISTA P.O. BOX 8254 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47.81
3.378 Nonpriority creditor's name and mailing address E-Communications LLC P.O. Box 501988 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$182.00
3.379 Nonpriority creditor's name and mailing address East Gain Global CNMI LTD PMB 895 Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,150,000.00
3.380 Nonpriority creditor's name and mailing address East Telecom Corporation P.O. Box 505577 Saipan, MP 96950 Date(s) 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>Goods provided; services rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.381 Nonpriority creditor's name and mailing address EBUBEKIR GUL c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91
3.382 Nonpriority creditor's name and mailing address EBUBEKIR GUNEYK c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.383 Nonpriority creditor's name and mailing address ECOLAB (Guam)LLC P.O. Box 9183 Tamuning, GU 96931 Date(s) 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>Balance of Default Judgment, CNMI Superior Court, Civil No. 21-0130-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,485.23

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3.384	Nonpriority creditor's name and mailing address ED PATRICK PELISAMEN PO Box 502639 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.85
3.385	Nonpriority creditor's name and mailing address EDEN LUZA P. O. BOX 506265 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$117.71
3.386	Nonpriority creditor's name and mailing address EDEN SERAFIN PO BOX 10003 PMB 736 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30.85
3.387	Nonpriority creditor's name and mailing address EDGARDO OLIVA P.O. BOX 503119 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$851.16
3.388	Nonpriority creditor's name and mailing address EDIHUEL NECESITO PO BOX 504405 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$183.94
3.389	Nonpriority creditor's name and mailing address EDISON PENA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,910.97
3.390	Nonpriority creditor's name and mailing address EDITA LUMAUAG PO Box 502701 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$88.28

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3.391	Nonpriority creditor's name and mailing address EDMUND ROGOLOFOI PO BOX 7545 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.392	Nonpriority creditor's name and mailing address Edrington Hong Kong Limited 17F, Two Pacific Place 88 Queensway, Admiralty, Central Hong Kong, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,931.19
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3.393	Nonpriority creditor's name and mailing address EDUARDO FLORES PO BOX 505478 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$147.93
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3.394	Nonpriority creditor's name and mailing address EDWARD ANDRADA PO Box 10000 PMB 225 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$593.65
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3.395	Nonpriority creditor's name and mailing address EDWARD HOCOG JR. PO Box 10001 PMB 915 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.396	Nonpriority creditor's name and mailing address EDWARD SANTOS PO BOX 7260 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,585.64
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3.397	Nonpriority creditor's name and mailing address EDWIN MENDOZA P.O. Box 506557 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$262.76
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3.398	Nonpriority creditor's name and mailing address EFC Services Corporation P.O. Box 502415 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.399	Nonpriority creditor's name and mailing address EFG Pacific Holdings, LLC dba Pacific Po PMB 955 P.O. Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60.00
3.400	Nonpriority creditor's name and mailing address EFREN REYES PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$859.72
3.401	Nonpriority creditor's name and mailing address ELAINE SARMIENTO PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$727.15
3.402	Nonpriority creditor's name and mailing address ELBERT ESPAYOS PO BOX 7206 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$998.55
3.403	Nonpriority creditor's name and mailing address ELEMEN SOLOMON PO Box 503604 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$262.76
3.404	Nonpriority creditor's name and mailing address ELIZABETH PINKERTON PO Box 502122 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$134.43

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3.405	Nonpriority creditor's name and mailing address ELLSBETH ALEPUYO PO BOX 5506 CHRB AS MATUIS SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$150.00
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3.406	Nonpriority creditor's name and mailing address ELNER BAGUINAT P.O. BOX 10000 PMB 541 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,553.50
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3.407	Nonpriority creditor's name and mailing address ELVIRA ENGOTAN PO BOX 10001 PMB 510 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$512.61
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3.408	Nonpriority creditor's name and mailing address EMANUELE PICCIONE c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$881.14
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3.409	Nonpriority creditor's name and mailing address EMARIAN MENDOZA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$486.02
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3.410	Nonpriority creditor's name and mailing address EMEE ROSE SACDALAN PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$197.25
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3.411	Nonpriority creditor's name and mailing address EMELITA DALUSONG PO Box 502417 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$238.59
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3.412	Nonpriority creditor's name and mailing address EMERINA CABRERA P.O. Box 5448 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.70
3.413	Nonpriority creditor's name and mailing address EMERSON MANZANO PO BOX 8007 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.414	Nonpriority creditor's name and mailing address EMILIA MARATITA 7095 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$172.59
3.415	Nonpriority creditor's name and mailing address EMILY SANTOS PO BOX 503669 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$220.74
3.416	Nonpriority creditor's name and mailing address EMIN ENGUR c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$834.99
3.417	Nonpriority creditor's name and mailing address EMINA KAIPAT PO BOX 10002 PMB 523 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$430.98
3.418	Nonpriority creditor's name and mailing address EMRAH OGUT c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87

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3.419 Nonpriority creditor's name and mailing address EMRAH ONCEL c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.420 Nonpriority creditor's name and mailing address EMRE DEMIRCI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.421 Nonpriority creditor's name and mailing address EMRE KABATAS c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$623.67
3.422 Nonpriority creditor's name and mailing address ENDER KARAGOZ c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$834.99
3.423 Nonpriority creditor's name and mailing address ENGUR MURAT c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$825.75
3.424 Nonpriority creditor's name and mailing address ENKHBAATAR ENKHBAT c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.425 Nonpriority creditor's name and mailing address ENKHBAT TSOGTBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13

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3.426	Nonpriority creditor's name and mailing address ENKHMEND NATSAGDORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,081.48
3.427	Nonpriority creditor's name and mailing address ENKHSUREN ENKHJARGAL c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
3.428	Nonpriority creditor's name and mailing address ENKHTAIVAN ERDENE-OCHIR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$56.36
3.429	Nonpriority creditor's name and mailing address ENRIQUE LISUA P.O. BOX 504128 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$816.39
3.430	Nonpriority creditor's name and mailing address ERAY DOGAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.431	Nonpriority creditor's name and mailing address ERDEM SATIR c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$834.99
3.432	Nonpriority creditor's name and mailing address ERDENE ENKHBAT c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13

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Imperial Pacific International (CNMI), LLC Name 3.433 Nonpriority creditor's name and mailing address ERDENEBAT DAMDINSUREN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,081.48
3.434 Nonpriority creditor's name and mailing address ERDENEBAT NYAMDEMBEREL c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.435 Nonpriority creditor's name and mailing address ERDENEMUNKH KHALZAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
3.436 Nonpriority creditor's name and mailing address ERIC POON PMB 961 BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.00
3.437 Nonpriority creditor's name and mailing address Ernst & Young (CNMI), Inc. P.O. Box 503198 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.438 Nonpriority creditor's name and mailing address ERTAN GUL c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$834.99
3.439 Nonpriority creditor's name and mailing address ERTUGRUL DOGAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,007.37

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3.440	Nonpriority creditor's name and mailing address ESAEI EPEN PO BOX 505738 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$580.52
3.441	Nonpriority creditor's name and mailing address ESREF DEMIRAY c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.442	Nonpriority creditor's name and mailing address EUGENE FOREMAN P.O. BOX 501723 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$861.92
3.443	Nonpriority creditor's name and mailing address EURICA SERAFINA DOWAI PO Box 502910 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.70
3.444	Nonpriority creditor's name and mailing address Eurofins Eaton Analytical Inc 750 Royal Oaks Drive, Ste 100 Monrovia, CA 91016 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,350.00
3.445	Nonpriority creditor's name and mailing address EVANGELYN ARIZALA P.O. BOX 502305 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$339.04
3.446	Nonpriority creditor's name and mailing address EVANGELYN LABAN PO Box 10002 PMB 434 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$258.38

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3.447	Nonpriority creditor's name and mailing address EVELYN ANGELES PO Box 501520 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$265.68
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3.448	Nonpriority creditor's name and mailing address EVELYN BAETIONG PO Box 10005 PMB 2067 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$277.20
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3.449	Nonpriority creditor's name and mailing address Exact Crane and NDT Services PMB A-30 PO Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,914.21
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3.450	Nonpriority creditor's name and mailing address Excise Tax (CNMI Treasury) PMB 5234 CHRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,092.16
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3.451	Nonpriority creditor's name and mailing address FABIAN MALABANAN P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$280.13
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3.452	Nonpriority creditor's name and mailing address Falcon Fire Protection, LLC 333 West Harmon Industrial Park Rd Tamuning, GU 96913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,386.00
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3.453	Nonpriority creditor's name and mailing address FANG-KUAN CHOU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.52
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3.454	Nonpriority creditor's name and mailing address FE FRIAL P.O. BOX 505750 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$242.43
3.455	Nonpriority creditor's name and mailing address Fe R. Cabrera P.O. Box 504126 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.456	Nonpriority creditor's name and mailing address FEDERICA NARCISI 22 via Alcide De Gasperi 64018 Tortoreto Lido (TE) ITALY Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,048.12
3.457	Nonpriority creditor's name and mailing address FEI ZHAO PO Box 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,234.56
3.458	Nonpriority creditor's name and mailing address FELICIAN ANDRES PMB 10002 BOX 1103 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$152.02
3.459	Nonpriority creditor's name and mailing address FELY MENDEZ PO BOX 10001 PMB 526 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.460	Nonpriority creditor's name and mailing address FENG SUN PO BOX 10003 PMB 73 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,138.03

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3.461	Nonpriority creditor's name and mailing address FERDINAND DEDIOS P.O. BOX 10002 PMB 2411 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,333.77 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.462	Nonpriority creditor's name and mailing address FERDINAND IBRAO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$122.95 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.463	Nonpriority creditor's name and mailing address FERDINAND TABIOS PO BOX 10002 PMB 541 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,466.81 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.464	Nonpriority creditor's name and mailing address FERHAT BULBUL c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$187.95 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.465	Nonpriority creditor's name and mailing address File & ServeXpress 4347 W. Northwest Hwy Ste 130-280 Dallas, TX 75220 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$86.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.466	Nonpriority creditor's name and mailing address FILIPINA DELEON GUERRERO PO Box 10003 PMB 312 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$229.19 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.467	Nonpriority creditor's name and mailing address Firmstone Building Materials Limited Flat B, 17/F North Point Industrial Bldg 499 King's Road North Point, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,395.91 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.468	Nonpriority creditor's name and mailing address FLOMIHNA MANAHANE P.O. BOX 500376 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,800.00
3.469	Nonpriority creditor's name and mailing address FM Corporation (Manpower) P.O. Box 506013 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$20,713.50
3.470	Nonpriority creditor's name and mailing address Forest Alliance Limited Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$287,666.93
3.471	Nonpriority creditor's name and mailing address Foshan Tinian International Travel Ltd Tai, 2/F, Qiaodu Mansion, No. 19 Huayuan East Rd. Foshan Guandong, 528000 CHINA Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Travel Expenses</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$523,101.29
3.472	Nonpriority creditor's name and mailing address Frances C Mafnas PMB 918 P.O. Box 10000 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$0.00
3.473	Nonpriority creditor's name and mailing address FRANCESCO MARIA PICCITTO c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,328.40
3.474	Nonpriority creditor's name and mailing address Francesco Piccitto PO Box 10000 PMB 918 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,328.40

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3.475	Nonpriority creditor's name and mailing address FRANCIA MANAIT P.O. BOX 500774 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$327.85
3.476	Nonpriority creditor's name and mailing address Francisco C. Duenas P.O. Box 504241 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.477	Nonpriority creditor's name and mailing address FRANK ELI CAMACHO PO BOX 5840 CHRB CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$232.74
3.478	Nonpriority creditor's name and mailing address FRED NEBRIDA PO BOX 502762 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160.18
3.479	Nonpriority creditor's name and mailing address Freeh Sporkin and Sullivan LLP 2550 M St NW, Second Floor Washington, DC 20037 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.480	Nonpriority creditor's name and mailing address FRETTE S.R.L. VIA BORGAZZI, 23 20900 MONZA(MB) ITALY Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.481	Nonpriority creditor's name and mailing address FRIENDLY PENA PO BOX 503578 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.482	Nonpriority creditor's name and mailing address Frontier Solutions 3307 Church Road, Suite 220 Richmond, VA 23233 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81,913.71
3.483	Nonpriority creditor's name and mailing address FU LIANG LIU PO BOX 10003 PMB 192 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,445.04
3.484	Nonpriority creditor's name and mailing address FU-HONG YANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.485	Nonpriority creditor's name and mailing address FUAT MERT OZTUNA c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,146.49
3.486	Nonpriority creditor's name and mailing address Fuji Xerox (Hong Kong) Limited 14 Taikoo Wan Rd 8/F, Cityplaza 3, Taikooshing, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,052.88
3.487	Nonpriority creditor's name and mailing address Fujian Xishi Co., Ltd 19F, Guojun Plaza No. 1222 Xiahe Rd, Siming, Xiamen, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$47,162.95
3.488	Nonpriority creditor's name and mailing address Fujitec Pacific, Inc. 128 N. Marine Corps Drive, Suite C Tamuning, GU 96913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Balance of Judgment in Fujitech Pacific Inc. v. [Debtor], CNMI Superior Court 22-0171-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,517,755.15

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3.489	Nonpriority creditor's name and mailing address FWY Corporation dba Meet Saipan Garapan Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.490	Nonpriority creditor's name and mailing address G Anthony Long dba Law Office G Anthony P.O. Box 504970 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$75,000.00
3.491	Nonpriority creditor's name and mailing address G4S Secure Solutions P.O. Box 500806 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.492	Nonpriority creditor's name and mailing address Gab Du C. Chong PO BOX 310 PMB 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.493	Nonpriority creditor's name and mailing address GABRIEL DELOS SANTOS PO BOX 10002 PMB 1361 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,647.78
3.494	Nonpriority creditor's name and mailing address GAETANO MODICA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,011.02
3.495	Nonpriority creditor's name and mailing address Gaetano Romano PO Box 10000 PMB 918 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,114.37

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3.496	Nonpriority creditor's name and mailing address Galaide Development, LLC PMB 238 PPP Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.497	Nonpriority creditor's name and mailing address Galaide Development, LLC PMB 588 Box 10012 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.498	Nonpriority creditor's name and mailing address GALBADRAKH BAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
3.499	Nonpriority creditor's name and mailing address GALU UTU PO BOX 501454 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$222.42
3.500	Nonpriority creditor's name and mailing address Gaming Partners International Asia Limit Est Marg Ilha Verde Ed Indl Cross Border Macau, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$99,395.50
3.501	Nonpriority creditor's name and mailing address Gaming Tax Withholding P.O. Box 5123 CHRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$235,775.59
3.502	Nonpriority creditor's name and mailing address GANBAATAR ISHGEEKHUU c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.503	Nonpriority creditor's name and mailing address GANBAATAR LANTUU c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$992.13
3.504	Nonpriority creditor's name and mailing address GANBAT BATBAYAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$992.13
3.505	Nonpriority creditor's name and mailing address GANBAT DENSMAA c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$0.00
3.506	Nonpriority creditor's name and mailing address GANBOLD MIJIDORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$992.13
3.507	Nonpriority creditor's name and mailing address GANSUKH DAVAAKHUU c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$0.00
3.508	Nonpriority creditor's name and mailing address GANTSETSEG CHOIJAMTS c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$992.13
3.509	Nonpriority creditor's name and mailing address GANTUMUR ADIYA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		\$1,081.48

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3.510	Nonpriority creditor's name and mailing address GANZORIG BUYANNEMEKH c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$947.90
3.511	Nonpriority creditor's name and mailing address GARCIA CACERES PO BOX 505478 MANGO RESORT SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.512	Nonpriority creditor's name and mailing address GARY CAPOTE P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,433.34
3.513	Nonpriority creditor's name and mailing address GEMMA TOLENTINO PO Box 10000 PMB 433 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$398.99
3.514	Nonpriority creditor's name and mailing address GENG CHANG PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.515	Nonpriority creditor's name and mailing address GEORGE PANGELINAN PO BOX 7914 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,668.70
3.516	Nonpriority creditor's name and mailing address GEORGE PINAULA PO Box 503770 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,133.34

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3.517	Nonpriority creditor's name and mailing address Geotesting, Inc. PO BOX 5505 CHRB SAIPAN, MP 96950 Date(s) 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>Stipulated Settlement</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70,000.00
<hr/>			
3.518	Nonpriority creditor's name and mailing address GERALDINE MAE VALDEZ PO Box 505148 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$269.60
<hr/>			
3.519	Nonpriority creditor's name and mailing address GERALYN DELA CRUZ PO BOX 502033 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.520	Nonpriority creditor's name and mailing address GERELCHULUUN SUGAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
<hr/>			
3.521	Nonpriority creditor's name and mailing address GERELT-OD NARMANDAKH c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
<hr/>			
3.522	Nonpriority creditor's name and mailing address GERONIMO VERGARA PO BOX 500331 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$754.95
<hr/>			
3.523	Nonpriority creditor's name and mailing address GiD Limited 1/F, Chuang's Enterprises Buildings 382 Lockhart Rd, Wan Chai Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.524	Nonpriority creditor's name and mailing address Giesecke & Devrient Asia Pacific Ltd. Rm 03, 31/F Sun Hung Kai Centre 30 Harbour Rd, Wan Chai, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,817.18
3.525	Nonpriority creditor's name and mailing address GILLAN LUCERO PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$429.83
3.526	Nonpriority creditor's name and mailing address GINA NAVARRO P.O. Box 7298 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$95.22
3.527	Nonpriority creditor's name and mailing address GINA RUDOLPH P.O. BOX 505087 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$748.74
3.528	Nonpriority creditor's name and mailing address GIOVANNI DI PIETRO c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.529	Nonpriority creditor's name and mailing address GIUSEPPE GILIBERTO via Verdi n. 36 Solarino 96010 Siracusa (SR) Italy Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$881.12
3.530	Nonpriority creditor's name and mailing address Giuseppe Santacroce PO Box 10000 PMB 918 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,560.73

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3.531	Nonpriority creditor's name and mailing address GIUSEPPE SANTOCONO via Bel Passo n. 12, Siracusa 96100 Siracusa (SR) Italy Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$881.14
3.532	Nonpriority creditor's name and mailing address GLECIE BUCASAS PO BOX 10003 PMB 763 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38.59
3.533	Nonpriority creditor's name and mailing address GLENN MICHAEL MANGLONA P.O. BOX 7971 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,600.21
3.534	Nonpriority creditor's name and mailing address GLENN PATRICK BELL c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,653.10
3.535	Nonpriority creditor's name and mailing address Global Security & Innovative Strategies, 1401 H St NW #875 Washington, DC 20005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,000.00
3.536	Nonpriority creditor's name and mailing address GOKHAN CIFTCI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.537	Nonpriority creditor's name and mailing address GOKHAN GUNES c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91

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3.538	Nonpriority creditor's name and mailing address Gold Mantis Gardening Landscape Co., Ltd No. 99 Jinshang Road, Suzhou Industrial Suzhou, China, 215008 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$43,890.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.539	Nonpriority creditor's name and mailing address GOV-Miscellaneous PMB 918 P.O. Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.540	Nonpriority creditor's name and mailing address GRACE ZHANG PO Box 505292 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.541	Nonpriority creditor's name and mailing address Grand Bearing Co., Ltd Unit A, 3/F Cheong Wah Comm Bldg 926 Canton Rd, Mong Kok Kowloon, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$374.92 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.542	Nonpriority creditor's name and mailing address Grand Express Travel Company Limited R. Cidade De Sintra 446, R/C, Flat Macau MO Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$8,711.00 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.543	Nonpriority creditor's name and mailing address Grand Top Hotel Supplies Ltd. Flat B, 7/F Fu Hop Factory Bldg 209-211 Wai Yip St, Kwun Tong Kowloon, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$178.42 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.544	Nonpriority creditor's name and mailing address Grandland Group (CNMI) Limited PMB 705 Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$503,427.57 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Labor Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.545	Nonpriority creditor's name and mailing address Green Mont Decoration Engineering Co., L Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$30,939.51 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.546	Nonpriority creditor's name and mailing address GREGORY MANUEL SABLAN JR. PO Box 504056 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$90.70 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.547	Nonpriority creditor's name and mailing address GT Building Systems Intl Pte. Ltd. Ming Arcade, 21 Cuscaden Road Singapore (249720) SINGAPORE Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$705,602.02 <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Remaining balance of Judgment in CNMI Superior Court 20-0214-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.548	Nonpriority creditor's name and mailing address Guangdong Development Co., Ltd PO BOX 501640 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$44,897.80 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.549	Nonpriority creditor's name and mailing address Guangdong HuaRuiDe Development Co., Ltd. P.O. Box 501640 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$600,070.07 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Travel Expenses</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.550	Nonpriority creditor's name and mailing address Guangzhou Style Arts Co., Ltd Rm 2902-2903, Henglexuan, Heng an Bldg 260 Huangpu Rd, Guangzhou Jinhua Zhejiang, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$31,840.80 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.551	Nonpriority creditor's name and mailing address GUIANINA MANIQUIS PO BOX 10000 PMB 601 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,518.27 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.552	Nonpriority creditor's name and mailing address GUIHUA LIU PO BOX 502636 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$103.14
3.553	Nonpriority creditor's name and mailing address GUL MEHMETHAN CENGIZ c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$825.75
3.554	Nonpriority creditor's name and mailing address GUMA FAMILIA ESTATES, LLC P.O. Box 502592 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,030.00
3.555	Nonpriority creditor's name and mailing address GUOQIANG SUI P.O. BOX 505828 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$782.28
3.556	Nonpriority creditor's name and mailing address GUOQIN PALACIOS PO Box 502459 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.557	Nonpriority creditor's name and mailing address GUOXIN ZHOU P.O. BOX PMB 662 10003 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$767.53
3.558	Nonpriority creditor's name and mailing address GWENDOLYN NGIRAROIS PO BOX 5026 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$497.39

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3.559	Nonpriority creditor's name and mailing address H.S. Lee Construction Company, Inc. P.O. Box 500440 Saipan, MP 96950 Date(s) 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>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.560	Nonpriority creditor's name and mailing address HAI QIANG WEN PO BOX 503015 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$667.53
3.561	Nonpriority creditor's name and mailing address HAI SAKISAT P.O. BOX 10001 PMB 479 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.562	Nonpriority creditor's name and mailing address HAILI RAO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.563	Nonpriority creditor's name and mailing address HAISONG CHEN PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,125.74
3.564	Nonpriority creditor's name and mailing address Haiyan Hanker Electronic Co., Ltd No.2853 Donghai Road, Wanghai Street Haiyan,Wuyuan, Zhejiang, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,934.72
3.565	Nonpriority creditor's name and mailing address HALIL TEKIN KOC c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$431.36

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3.566	Nonpriority creditor's name and mailing address HAMZA CERIT c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.567	Nonpriority creditor's name and mailing address HAN SHAO PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,560.22
3.568	Nonpriority creditor's name and mailing address HAN-CHUNG CHANG 13F, NO.17, NANTU ST., LUZHU DISTRICT TAOYUAN CITY TAIWAN Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.569	Nonpriority creditor's name and mailing address Hang Hing Weaving Factory Limited 2-6 Wah Sing Street 12-13/F, Blk A & B, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$258,994.30
3.570	Nonpriority creditor's name and mailing address Hangzhou Waterland Env'tal Tech. Co., Ltd 1-1012 Juzili Sandun 310030 Hangzhou CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.571	Nonpriority creditor's name and mailing address Hanqin Liu P.O. Box 10000 PMB 918 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.572	Nonpriority creditor's name and mailing address HAO LUO Pmb 760 Ppp Box 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.573	Nonpriority creditor's name and mailing address Hao's Air-Conditioning PO Box 501666 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.574	Nonpriority creditor's name and mailing address HAO-WEI CHEN 3F-1, No. 20, Guangxing St. Shulin Dist. New Taipei City Taiwan (ROC) 238 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,826.66
3.575	Nonpriority creditor's name and mailing address Hardt Eye Clinic P.O. Box 507768 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,816.00
3.576	Nonpriority creditor's name and mailing address HARVEY VARIAS PO BOX 10003 PMB 141 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$735.67
3.577	Nonpriority creditor's name and mailing address HASAN ERDEM c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.578	Nonpriority creditor's name and mailing address HASAN ERGUN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.579	Nonpriority creditor's name and mailing address HASAN GOKCE c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,038.37

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3.580	Nonpriority creditor's name and mailing address HASAN KOC c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$240.22
3.581	Nonpriority creditor's name and mailing address HASAN TALHA KOROGLU c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,874.87
3.582	Nonpriority creditor's name and mailing address Hasselback Law Office, LLC PMB 378 PPP Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.583	Nonpriority creditor's name and mailing address Hawaiian Rock Products PMB 139-PPP P.O. Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.584	Nonpriority creditor's name and mailing address HAZEL BERSABAL PMB 531 P.O. BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.04
3.585	Nonpriority creditor's name and mailing address HAZEL JOY DAYRIT P.O. BOX 10000 PMB 675 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$267.18
3.586	Nonpriority creditor's name and mailing address HAZIM YILMAZ c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$187.95

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3.587	Nonpriority creditor's name and mailing address Hebei Xinghua Casting Pipe Co., Ltd Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$3,645.90 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.588	Nonpriority creditor's name and mailing address HEIDI GAMBOA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,361.13 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.589	Nonpriority creditor's name and mailing address Hemine Ipwan Island dba IPWAN Security c/o Thompson Law, LLC PMB 917 Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$163,605.30 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Balance of Default Judgment in Hemine Ipwan Islam dba Ipwan Security Service v. [Debtor], CNMI Superior Court 21-0179-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.590	Nonpriority creditor's name and mailing address HENAN MA BEACH GARDEN ESTATE #201 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$12,426.04 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.591	Nonpriority creditor's name and mailing address HENEDINA SOL CASTRO PO BOX 504520 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$95.22 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.592	Nonpriority creditor's name and mailing address Hengdeli International Company Ltd Unit 3806-09, Tower 6, The Gateway Harbour City, Kowloon HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$6,385,749.60 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.593	Nonpriority creditor's name and mailing address HENRY JONAH TUDELA P.O. BOX 505694 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$472.06 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.594	Nonpriority creditor's name and mailing address HENRY LITULUMAR III PO Box 504864 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.70
3.595	Nonpriority creditor's name and mailing address HENRY SABOLO PO Box 505235 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.596	Nonpriority creditor's name and mailing address Herman B. Cabrera P.O. Box 501421 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.597	Nonpriority creditor's name and mailing address Heshun Corporation dba New Double R P.O. Box 10003 PMB 168 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.598	Nonpriority creditor's name and mailing address HILARION SANTOS P.O. BX 504365 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$968.57
3.599	Nonpriority creditor's name and mailing address Himawari Saipan, Inc. P.O. Box 10003 PMB 252 GARAPAN SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$958.10
3.600	Nonpriority creditor's name and mailing address HIO WUN HOI P.O. BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,142.59

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3.601	Nonpriority creditor's name and mailing address HIRAM LEE CASTRO PO Box 500153 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.70
3.602	Nonpriority creditor's name and mailing address HK Wahshing Printing Company Block 2, 19/F, Flat K Kingley Indus Bldg Wong Chuk Hang, Southern District HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.603	Nonpriority creditor's name and mailing address Hogan Lovells US LLP Columbia Square 555 Thirteenth Street, N Washington, DC 20004 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.604	Nonpriority creditor's name and mailing address HOMESMART CORPORATION dba Best Deal P.O. Box 504974 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.605	Nonpriority creditor's name and mailing address Hong Kong Seechin Industrial Limited Flat/RM B11 9/F Wong King Indl. Bldg 2 Tai Yau St San Po Kong, Kowloon 999077 HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,435.55
3.606	Nonpriority creditor's name and mailing address Hong Kong Sinologistics Co., Ltd. Unit 16, 10/F Metro Centre II 21 Lam Hing St, Kowloon Bay HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.607	Nonpriority creditor's name and mailing address Hong Kong Telecommunications (HKT) Limit 18/F, PCCW Tower, Taikoo Place, 979 King Hong Kong, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$198,250.50

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3.608	Nonpriority creditor's name and mailing address HONG TAI CHEN PO BOX 505635 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$516.53
3.609	Nonpriority creditor's name and mailing address Wong Wai Hong House No. 81, Miami Crescent 328 Fan Kam Rd, Sheung Shui NT, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$239,000.00
3.610	Nonpriority creditor's name and mailing address HONG-MING HSIAO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,277.08
3.611	Nonpriority creditor's name and mailing address HONGKONG CARMAN FASHION COMPANY LTD RM 1202,12/F Tung Chun Commercial Center 438-444 Shanghai St KLN Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.612	Nonpriority creditor's name and mailing address HONGXIA CASTRO PO BOX 10002 PMB 519 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$333.07
3.613	Nonpriority creditor's name and mailing address HOPE LISA LITULUMAR P.O. BOX 504864 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$158.09
3.614	Nonpriority creditor's name and mailing address Hoshion International Co Limited STE 1503, 15/F, CARNIVAL COMMERCIAL BLDG 18 JAVA ROAD, NORTH POINT Hong Kong, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$617.00

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3.615	Nonpriority creditor's name and mailing address How Yo Chi PO Box 10001 PMB 915 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,645.24
3.616	Nonpriority creditor's name and mailing address HSI-KUN HUNG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.617	Nonpriority creditor's name and mailing address HSIANG-CHEN CHEN PO Box 10003 PMB 84 SAIPAN, MP 96951 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,014.01
3.618	Nonpriority creditor's name and mailing address HSIANG-PING CHIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,859.00
3.619	Nonpriority creditor's name and mailing address HSIEN-CHUNG WANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,388.18
3.620	Nonpriority creditor's name and mailing address HSIEN-MAO CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
3.621	Nonpriority creditor's name and mailing address HSIN-HSING LIU 1F No. 26, Aly. 16, Ln. 71, Jiangnan St. Neihu Dist. Taipei City 114 TAIWAN (ROC) Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,101.88

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3.622	Nonpriority creditor's name and mailing address HSIN-HUNG CHUNG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
3.623	Nonpriority creditor's name and mailing address HSIN-SHIUNG HSIEH PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.624	Nonpriority creditor's name and mailing address HSUAN-JEN CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.625	Nonpriority creditor's name and mailing address HUAN PAOLO SANGUYO PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,413.43
3.626	Nonpriority creditor's name and mailing address Huang Chuanfu PMB 575 Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$79,270.00
3.627	Nonpriority creditor's name and mailing address Huang Yu Hui Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,500.00
3.628	Nonpriority creditor's name and mailing address HUAXIAN XU P.O. BOX 505577 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$268.36

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3.629	Nonpriority creditor's name and mailing address Hughes Hubbard & Reed LLP 1775 I Street NW Washington, DC 20006-2401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Breach of contract claim [Hughes Hubbard & Reed LLP v. [Debtor], CNMI Superior Court 23-0289-CV]</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,583,158.54
3.630	Nonpriority creditor's name and mailing address HUI-LONG HO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.631	Nonpriority creditor's name and mailing address HUIYAN SHU P.O. BOX 10003 PMB 128 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$888.58
3.632	Nonpriority creditor's name and mailing address HUMPHREY CRUZ JR P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,445.86
3.633	Nonpriority creditor's name and mailing address HUMPYLINA CRUZ PO BOX 7329 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$357.34
3.634	Nonpriority creditor's name and mailing address HUNG-CHAN CHANG 5F No. 29, Ln. 150 Sanmin Rd. Fangyuan Dist. Taichung City Taiwan (ROC) 420020 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,388.18
3.635	Nonpriority creditor's name and mailing address HUNG-JEN CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,935.30

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3.636	Nonpriority creditor's name and mailing address HUNG-YANG CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.637	Nonpriority creditor's name and mailing address I Connect 543A N Marine Corps Drive Tamuning, GU 96913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,236.64
3.638	Nonpriority creditor's name and mailing address I-CHENG HUNG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,669.97
3.639	Nonpriority creditor's name and mailing address I-CHUN LIAO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.640	Nonpriority creditor's name and mailing address IBRAHIM ASLAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.641	Nonpriority creditor's name and mailing address IBRAHIM ERDOGAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.642	Nonpriority creditor's name and mailing address IBRAHIM ISIK c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87

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3.643 Nonpriority creditor's name and mailing address ICY MAXIMO PO BOX 504745 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$458.46
3.644 Nonpriority creditor's name and mailing address iDiscover, LLC 1601 James M. Wood Blvd Los Angeles, CA 90015 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$66,938.00
3.645 Nonpriority creditor's name and mailing address IDRIS KOCAMAZ c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91
3.646 Nonpriority creditor's name and mailing address IDS Mimarlik Yonetim Danismanlik Ticaret Menekse-2 Sokak, No: 31/10 Kizilay- Cankaya/ANK TR Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$175,559.89
3.647 Nonpriority creditor's name and mailing address IGLECERIO JAGONG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.648 Nonpriority creditor's name and mailing address IGT Asia Pte Ltd 10 Collyer Quay, #10-01, Ocean Financial Singapore, 49315 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$361,431.00
3.649 Nonpriority creditor's name and mailing address Ikon Solutions Asia Inc Algo Center, 162 L.P. Leviste Street, Sa Manila, Philippines Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$45,071.78

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3.650	Nonpriority creditor's name and mailing address ILKER KILIC c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$623.67
3.651	Nonpriority creditor's name and mailing address IMDAT DOGAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$187.95
3.652	Nonpriority creditor's name and mailing address In Production & Printing Company Limited Unit K, 3/F Blk 1, KingleyIndustrialBldg 35 Yip Kan St, Wong Chuk Hang Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$102.71
3.653	Nonpriority creditor's name and mailing address Integritas3 27 406 SE 22nd Way Sammamish, WA 98075 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,000.00
3.654	Nonpriority creditor's name and mailing address Inventive Star Limited c/o Vistra Corporate Services Centre Wickhams Cay II, Road Town, Tortola VG1110, British Virgin Islands Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.655	Nonpriority creditor's name and mailing address ISHA KING P.O. BOX 10003 PMB 287 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,207.07
3.656	Nonpriority creditor's name and mailing address Ishige Hiroto Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,381.15

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3.657	Nonpriority creditor's name and mailing address Isla Delight Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,737.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.658	Nonpriority creditor's name and mailing address IVAN SANTOS PO BOX 7015 SVRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$210.39 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.659	Nonpriority creditor's name and mailing address J.C. Tenorio Enterprises, Inc. P.O. Box 500137 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,818.72 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.660	Nonpriority creditor's name and mailing address J.M. Aquino, P.C. 278 S Marine Corps Dr Hengi Plaza, Ste 206 Tamuning, GU 96913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.661	Nonpriority creditor's name and mailing address JACK NORITA PO BOX 501145 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$177.16 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.662	Nonpriority creditor's name and mailing address JACLYN LITULUMAR PO BOX 501936 CK SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,252.97 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.663	Nonpriority creditor's name and mailing address JACOB FRANKLYN ILO P.O. BOX 502798 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$681.62 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.664	Nonpriority creditor's name and mailing address JACQUELINE FUJIHIRA PO BOX 503520 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.665	Nonpriority creditor's name and mailing address JAIME ITIBUS PO BOX 505823 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$458.98
3.666	Nonpriority creditor's name and mailing address JAKE AGULTO PO BOX 502027 CK SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.667	Nonpriority creditor's name and mailing address JAKE HIRAM MARATITA PO BOX 503181 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,035.15
3.668	Nonpriority creditor's name and mailing address Jake Maratita P.O. Box 10000 PMB 918 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.669	Nonpriority creditor's name and mailing address JAMAL CABRERA PO BOX 502938 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,800.00
3.670	Nonpriority creditor's name and mailing address JAMBALDORJ ENKHBOLD c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar MONGOLIA Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21

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3.671	Nonpriority creditor's name and mailing address JAMERITO CASAMA PO Box 10003 PMB 686 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$198.24 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.672	Nonpriority creditor's name and mailing address James C. Whang / So. Pacific Lumber Corp c/o Thompson Law, LLC PMB 917 Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$737,333.74 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Balance of Judgment in South Pacific Lumber Corporation</u> <u>Whang v. IPI, District Court of NMI, Civil No. 21-CV-0027</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.673	Nonpriority creditor's name and mailing address JAMES ROBERT ADA PO Box 501789 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$200.54 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.674	Nonpriority creditor's name and mailing address JAMES ROGER KAIPAT PO Box 10003 PMB 363 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$528.59 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.675	Nonpriority creditor's name and mailing address James S. Sirok, AAL 3rd FI Marianas Business Plaza Ste 301 P.O. Box 502145 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.676	Nonpriority creditor's name and mailing address JAMES ULLOA PO BOX 502293 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,479.69 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.677	Nonpriority creditor's name and mailing address JAN MICHAEL REMO PO BOX 10000 PMB 601 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$2,418.15 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.678	Nonpriority creditor's name and mailing address JANE ANNE CRANEY PO Box 10000, PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$418.56
3.679	Nonpriority creditor's name and mailing address JANE RAMILO PO Box 10001 PMB 4 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$953.53
3.680	Nonpriority creditor's name and mailing address JANELLE BREL PO BOX 503451 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$344.84
3.681	Nonpriority creditor's name and mailing address JANICE LOWE PO BOX 5003, SUSUPE SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$91.61
3.682	Nonpriority creditor's name and mailing address JARED WONG PO BOX 10000 PMB 676 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$968.63
3.683	Nonpriority creditor's name and mailing address JASON REY CORILLA PO BOX 504571 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$394.03
3.684	Nonpriority creditor's name and mailing address Jax Interior Products Limited Unit 2401, 24/F., Perfect Industria No. 31 Tai Yau Street, Kowloon HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,567.80

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3.685	Nonpriority creditor's name and mailing address JAY SISON PO Box 506600 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$323.80
3.686	Nonpriority creditor's name and mailing address JAY VEGA P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.687	Nonpriority creditor's name and mailing address JAY-R LOUIE PELISAMEN PO BOX 7186 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$373.52
3.688	Nonpriority creditor's name and mailing address JAYELH CAMBRONERO PO BOX 10000 PMB 225 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$605.13
3.689	Nonpriority creditor's name and mailing address JAYPEE MIRANDA PO BOX 10000 PMB 225 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,536.97
3.690	Nonpriority creditor's name and mailing address JAYROUL DORIA PO Box 502559 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$918.08
3.691	Nonpriority creditor's name and mailing address JAYSON GLEAN PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$123.18

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3.692	Nonpriority creditor's name and mailing address JAYSON YAGO P.O. BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$368.51
3.693	Nonpriority creditor's name and mailing address JC Marketing Inc, (Saipan) PMB 897 Box 10001 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,814.80
3.694	Nonpriority creditor's name and mailing address JCC Associates, Inc dba Saipan Seas P.O. Box 10003 PMB 168 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,257.00
3.695	Nonpriority creditor's name and mailing address JEDLOWELL ZAPANTA PO BOX 502536 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$345.62
3.696	Nonpriority creditor's name and mailing address Jeffrey San Nicolas Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,702.08
3.697	Nonpriority creditor's name and mailing address JENIZEUS ESPIRITU PO BOX 10000 PMB 619 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$554.16
3.698	Nonpriority creditor's name and mailing address JENNET NAVARRO PO BOX 501250 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$180.91

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3.699	Nonpriority creditor's name and mailing address JENNICA JAZELL MUNA PO Box 504207 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$276.75
3.700	Nonpriority creditor's name and mailing address JENNIE IGISOMAR PO BOX 7390 SVRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.701	Nonpriority creditor's name and mailing address JENNIFER CABRERA PO BOX 506519 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,315.81
3.702	Nonpriority creditor's name and mailing address JENNIFER TAIMANAO PO BOX 10000 PMB 753 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$684.53
3.703	Nonpriority creditor's name and mailing address JEREMIAH SUEL II P.O. BOX 503504 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$845.95
3.704	Nonpriority creditor's name and mailing address JEREMY CALPO PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,930.83
3.705	Nonpriority creditor's name and mailing address JERICO LOPEZ PO BOX 504958 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$476.09

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3.706	Nonpriority creditor's name and mailing address JEROME GARCIA PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$334.51
3.707	Nonpriority creditor's name and mailing address JEROME KINTOL PO BOX 501054 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,371.00
3.708	Nonpriority creditor's name and mailing address JESSE AQUININGOC PO BOX 7307 AGAT, GU 96928 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.709	Nonpriority creditor's name and mailing address JESSE JUAN DOWAI P.O. BOX 500966 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$226.49
3.710	Nonpriority creditor's name and mailing address JESSE OLOPAI PO BOX 504864 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$198.31
3.711	Nonpriority creditor's name and mailing address JESSICA MITHNOY PO BOX 520481 TINIAN, MP 96952 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$87.16
3.712	Nonpriority creditor's name and mailing address JESSIE JAMES CEPEDA PO Box 505008 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.713	Nonpriority creditor's name and mailing address JESUS LOUIE CRUZ PO BOX 604 SAN JOSE VILLAGE TINIAN, MP 96952 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$264.52
3.714	Nonpriority creditor's name and mailing address JESUS REYES PO Box 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$486.57
3.715	Nonpriority creditor's name and mailing address JESUS ROANN AWA PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,035.90
3.716	Nonpriority creditor's name and mailing address JEZREL GALUTERA P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$944.32
3.717	Nonpriority creditor's name and mailing address JG Sablan Rock Quarry, Inc. P.O. Box 500956 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.718	Nonpriority creditor's name and mailing address JHENG-TING KE PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
3.719	Nonpriority creditor's name and mailing address JHON PAUL A. DELA CRUZ PO Box 501802 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$436.40

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3.720	Nonpriority creditor's name and mailing address JIA JUN LI PO BOX 501365 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$220.65
3.721	Nonpriority creditor's name and mailing address JIA-SONG GUO PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$427.19
3.722	Nonpriority creditor's name and mailing address JIALI KAIPAT PO BOX 506549 CK SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.723	Nonpriority creditor's name and mailing address JIAN-CHANG JIAN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,420.23
3.724	Nonpriority creditor's name and mailing address Jiangsu Central Laundry Co., Ltd Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$159,016.00
3.725	Nonpriority creditor's name and mailing address Jiangxizhaojun Industrial Co., Ltd Rm 609-611, Baoan North Rd Luohu District, Shenzhen, Guangdong CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,183.69
3.726	Nonpriority creditor's name and mailing address JIAO SUN P.O. BOX 10001 PMB 915 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,480.14

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3.727	Nonpriority creditor's name and mailing address Jie Hui Stone Decoration Engineering Co. china Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$407,198.51
3.728	Nonpriority creditor's name and mailing address JIE-YIN CHENG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,441.96
3.729	Nonpriority creditor's name and mailing address JIHOON YOO PMB 527 PPP BOX 10002 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.730	Nonpriority creditor's name and mailing address JIING-HWA CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
3.731	Nonpriority creditor's name and mailing address JIMMY BONIOL P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.732	Nonpriority creditor's name and mailing address JIMMY LIMES PO BOX 502611 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,417.53
3.733	Nonpriority creditor's name and mailing address JING ZHOU Qingnian Lu Xi Li 12-3-1102 Chaoyong Beijing China Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,603.91

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3.734	Nonpriority creditor's name and mailing address Jinguo Ding Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,115.32
3.735	Nonpriority creditor's name and mailing address JINHU ZHAO PMB 242 BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,309.88
3.736	Nonpriority creditor's name and mailing address JIOVONNI OLOPAI PO Box 503757 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$568.08
3.737	Nonpriority creditor's name and mailing address Jiulle International Design Co., Ltd Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,910.00
3.738	Nonpriority creditor's name and mailing address JIXIAN CHENG 10001 PMB 915 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,047.37
3.739	Nonpriority creditor's name and mailing address JMI Edison P.O. Box 6577 Tamuning, GU 96931 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.740	Nonpriority creditor's name and mailing address JN Saipan CNMI, LLC P.O. Box 506614 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$58,881.60

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3.741	Nonpriority creditor's name and mailing address JOANA MESIK P.O. BOX 7573 SVRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.742	Nonpriority creditor's name and mailing address JOANN GATDULA PO BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$317.18
3.743	Nonpriority creditor's name and mailing address JOAQUIN VICTOR TORRES PO Box 505441 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$595.94
3.744	Nonpriority creditor's name and mailing address Jobo Cloud-Intelligent System (Shenzen) Room 201, Bldg A, No.1 Qianwan 1st Road Qianhai-Hong Kong Cooperation Zone Shenzen CN Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.745	Nonpriority creditor's name and mailing address JOCELYN PALACIOS PO BOX 501045 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,356.51
3.746	Nonpriority creditor's name and mailing address JOEFELIN SANTOS P.O. BOX 504422 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$376.69
3.747	Nonpriority creditor's name and mailing address Joeten Motors Company Inc PO BOX 500680 Beach Road Oleai SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,464.01

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3.748	Nonpriority creditor's name and mailing address JOEY PATRICK SAN NICOLAS PO Box 10001 PMB 602 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.749	Nonpriority creditor's name and mailing address JOHN DANIEL ARRIOLA PO Box 504735 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$299.78
3.750	Nonpriority creditor's name and mailing address JOHN LAURITZEN PO BOX 503992 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.751	Nonpriority creditor's name and mailing address JOHN MARK BAUTISTA PO Box 506009 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.752	Nonpriority creditor's name and mailing address JOHN PATRICK CARAGAY PO Box 10003 PMB 557 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$135.13
3.753	Nonpriority creditor's name and mailing address JOHN RANDY TAMAN P.O. BOX 504550 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$111.02
3.754	Nonpriority creditor's name and mailing address JOHN ROMEL DONA PO Box 10001 PMB A-52 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$251.47

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3.755	Nonpriority creditor's name and mailing address JOHN ROQUE BREL PO BOX 5506 CHRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.756	Nonpriority creditor's name and mailing address JOHN SANCHEZ PO BOX 501746 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$771.16
3.757	Nonpriority creditor's name and mailing address JOHN TENORIO P.O. BOX 500906 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$752.67
3.758	Nonpriority creditor's name and mailing address JOHN YVES ATENCIO PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$707.13
3.759	Nonpriority creditor's name and mailing address JOHNSON CABRERA PO BOX 363 1003 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.760	Nonpriority creditor's name and mailing address JOJIE MONTENEJO PO BOX 502408 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,702.72
3.761	Nonpriority creditor's name and mailing address JOMER ENRIQUEZ PMB 1702 PO BOX 10005 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,179.24

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3.762	Nonpriority creditor's name and mailing address JONAS CAMPO P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,452.26
3.763	Nonpriority creditor's name and mailing address JONATHAN PELISAMEN PO Box 7186 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$78.30
3.764	Nonpriority creditor's name and mailing address JONATHAN PETER LALLANA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,447.93
3.765	Nonpriority creditor's name and mailing address JONATHAN RICHARD NOGIS P.O. Box 500422 SAIPAN, MP 96951 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$63.76
3.766	Nonpriority creditor's name and mailing address JONATHAN SANTOS PO BOX 505124 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.767	Nonpriority creditor's name and mailing address JONATHAN URUMELOG PO BOX 502798 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$640.52
3.768	Nonpriority creditor's name and mailing address JONYA CASTRO P.O. BOX 10003 PMB 89 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$146.34

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3.769	Nonpriority creditor's name and mailing address JOPHINE SAN NICOLAS P.O. BOX 505366 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$222.37
3.770	Nonpriority creditor's name and mailing address JORDAN FRANKLIN REYES PO Box 8221 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300.68
3.771	Nonpriority creditor's name and mailing address JOSE MESTA YAMADA PO BOX 5221 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$198.90
3.772	Nonpriority creditor's name and mailing address JOSE SABLAN PO BOX 501903 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160.32
3.773	Nonpriority creditor's name and mailing address JOSE TERLAJE P.O. BOX 7079 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,416.36
3.774	Nonpriority creditor's name and mailing address JOSEPH ANTHONY MAGOFNA P.O. BOX 501455 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$166.01
3.775	Nonpriority creditor's name and mailing address JOSEPH BUEKIS PO BOX 500842 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.776	Nonpriority creditor's name and mailing address JOSEPH JUAN CRUZ PO BOX 500154 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$231.14
3.777	Nonpriority creditor's name and mailing address JOSEPH MENDIOLA PO BOX 501503 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$526.29
3.778	Nonpriority creditor's name and mailing address JOSEPH PILAPIL P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$942.62
3.779	Nonpriority creditor's name and mailing address JOSEPH THOMAS SABLAN P.O. BOX 502639 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$415.65
3.780	Nonpriority creditor's name and mailing address JOSEPH VICTOR TINGUHA PO BOX 503894 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.781	Nonpriority creditor's name and mailing address Joseph Villagomez P.O.Box 10005 PMB 617 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.782	Nonpriority creditor's name and mailing address JOSEPHA MARIA CAMACHO PO BOX 5727 CHRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.783	Nonpriority creditor's name and mailing address JOSEPHINE BALTAZAR P.O. BOX 501321 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$285.38
3.784	Nonpriority creditor's name and mailing address JOSH EJERCITO P.O. BOX 502898 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$67.86
3.785	Nonpriority creditor's name and mailing address JOSHUA DE MESA PO Box 100003 PMB 557 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$241.96
3.786	Nonpriority creditor's name and mailing address JOSHUA DELA CRUZ P.O BOX 7831 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$939.22
3.787	Nonpriority creditor's name and mailing address Joshua Gray c/o Law Office of Bruce Berline, LLC P.O. Box 5682 CHRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Balance of Default Judgment [District Court of NMI 1-19-CV-0008]</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,359,339.02
3.788	Nonpriority creditor's name and mailing address JOVELYN GARCIA PO BOX 504835 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$435.61
3.789	Nonpriority creditor's name and mailing address JOVELYN QUITUGUA PO BOX 10001 PMB 308 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$207.31

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3.790	Nonpriority creditor's name and mailing address JOY NAVARRO PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$967.64
3.791	Nonpriority creditor's name and mailing address JOYCE LIM P.O. BOX 10003 PMB 254 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,153.85
3.792	Nonpriority creditor's name and mailing address JR PISANO PMB 8137 SVRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.793	Nonpriority creditor's name and mailing address JR. SABLAN PO BOX 10005 PMB 1557 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.794	Nonpriority creditor's name and mailing address Juan Atalig PO Box 10001 PMB915 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.795	Nonpriority creditor's name and mailing address JUAN CEPEDA PO BOX 503413 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,842.83
3.796	Nonpriority creditor's name and mailing address JUAN EDWARD ATALIG PO BOX 503409 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,058.05

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3.797	Nonpriority creditor's name and mailing address JUAN LEON GUERRERO JR. PO BOX 502224 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,514.69
<hr/>			
3.798	Nonpriority creditor's name and mailing address JUAN LIAO P.O. BOX 10000 PMB 676 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,048.98
<hr/>			
3.799	Nonpriority creditor's name and mailing address Juan M. Concepcion P.O. Box 254 Agana, GU 96932 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.800	Nonpriority creditor's name and mailing address JUANCHO MENDOZA PO Box 10003 PMB 717 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,201.96
<hr/>			
3.801	Nonpriority creditor's name and mailing address JUANITA ARRIOLA P.O. BOX 7437 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$107.74
<hr/>			
3.802	Nonpriority creditor's name and mailing address JUANITO BAUTISTA PO BOX 10005 PMB 74 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,907.78
<hr/>			
3.803	Nonpriority creditor's name and mailing address JUANITO PERENA P.O. BOX 506095 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$225.60

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3.804	Nonpriority creditor's name and mailing address JUDITH TAN PO BOX 500231 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$459.03
3.805	Nonpriority creditor's name and mailing address JUDY ANN BRAVO PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12.16
3.806	Nonpriority creditor's name and mailing address JUI-HSI SUN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.807	Nonpriority creditor's name and mailing address JUI-HSIUNG YANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.808	Nonpriority creditor's name and mailing address JUN DONG PMB 1164 BOX 10003 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,590.03
3.809	Nonpriority creditor's name and mailing address JUN FAN NO 423 GUANGMING RD LIGHTHOUSE LIAONING PROVINCE E. SIDE LIODYANG CITY CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.810	Nonpriority creditor's name and mailing address JUN WANG PO BOX 10003 PMB 275 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$812.72

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3.811	Nonpriority creditor's name and mailing address JUN YAN P.O. Box 10000 PMB 242 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.812	Nonpriority creditor's name and mailing address JUN-JIA YE PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,501.94
3.813	Nonpriority creditor's name and mailing address JUNAR VILLANUEVA PMP PPP BOX 299 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.814	Nonpriority creditor's name and mailing address JUNIOR ENISER PO BOX 506193 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.815	Nonpriority creditor's name and mailing address JUNIOR YORUW PO Box 502173 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.70
3.816	Nonpriority creditor's name and mailing address Junming Jiang Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$431.91
3.817	Nonpriority creditor's name and mailing address Junson Construction LLC F11, MPM Complex, Auto Zamchid Street 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar, Mongolia Date(s) 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>Construction services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.818	Nonpriority creditor's name and mailing address JUNYU LI PMB 290 PPP BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.819	Nonpriority creditor's name and mailing address JUSTIN DANIEL PEREZ PO Box 503700 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$363.09
3.820	Nonpriority creditor's name and mailing address JUSTIN KEITH MONNENS P.O. BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,559.47
3.821	Nonpriority creditor's name and mailing address K.M. UREMOCH PO Box 504471 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$284.06
3.822	Nonpriority creditor's name and mailing address KA FUN HO PO Box 10000 PMB 776 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,169.43
3.823	Nonpriority creditor's name and mailing address KADIR CELEBI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.824	Nonpriority creditor's name and mailing address KADIR MUCUR c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$816.55

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3.825	Nonpriority creditor's name and mailing address Kang Kai Room 703A, 7th Fl, Tai Sang Bank Bldg 130-132 Des Voeux Road C Central, Hong Kong Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,228.08
3.826	Nonpriority creditor's name and mailing address KAIO LOI P.O. BOX 10003 PMB 588 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,816.69
3.827	Nonpriority creditor's name and mailing address Kaisa Group Holdings Ltd Room 1901, 19/F, Lee Garden One 33 Hysan Avenue, Causeway Bay HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,800,000.00
3.828	Nonpriority creditor's name and mailing address Kan Pacific Saipan, Ltd. c/o Seman Law Office, LLC P.O. Box 10001 PMB 168 Saipan, MP 96950 Date(s) 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>Balance of judgments issued in District Court of NMI, Case No. 1-21-CV-0034 and Case No. NMI 1-23-CV-0011</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$843,527.31
3.829	Nonpriority creditor's name and mailing address KAREN MAY DUMANDAN 29 Sampaguita St. FERIA Rd Matandang Balara Quezon City Philippines Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.830	Nonpriority creditor's name and mailing address KASSANDRA MARQUEZ P.O. BOX 502430 CK SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.831	Nonpriority creditor's name and mailing address KATHRENE ROSE COLDEEN PO BOX 5373 CHRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.832	Nonpriority creditor's name and mailing address Kautz Glass Co. Inc P.O. Box 502656 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$86.00
3.833	Nonpriority creditor's name and mailing address KAY KI'ILANI GINES PO BOX 5420 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$116.03
3.834	Nonpriority creditor's name and mailing address KAYLA DARNELL LITULUMAR PO Box 500093 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$426.42
3.835	Nonpriority creditor's name and mailing address KAYSIE AQUINO PO BOX 505824 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.836	Nonpriority creditor's name and mailing address KE-SHIH YANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,621.19
3.837	Nonpriority creditor's name and mailing address Keen State Global (CNMI) LLC PMB 895 Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$375,000.00
3.838	Nonpriority creditor's name and mailing address KELLEY BUTCHER PO BOX 506197 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,425.15

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3.839	Nonpriority creditor's name and mailing address KELVIN SEK HIN NG Rm. 1412 Hiu Tin House, Hiu Lai Courtm Sau Mau Ping Kwun Tong, Kowloon Hong Kong Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,567.95
3.840	Nonpriority creditor's name and mailing address KENNETH AGUON PO BOX 502302 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$548.41
3.841	Nonpriority creditor's name and mailing address Kenneth Hines 27406 SE 22nd Way Sammamish, WA 98075 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,148.56
3.842	Nonpriority creditor's name and mailing address KENNY DIAZ PO BOX 501757 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,975.94
3.843	Nonpriority creditor's name and mailing address KENNY TAIJERON PO Box 8135 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$79.87
3.844	Nonpriority creditor's name and mailing address KENT KALEN PO BOX 505097 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.845	Nonpriority creditor's name and mailing address KERAI MARIO KAIPAT PO BOX 501361 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,291.72

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3.846	Nonpriority creditor's name and mailing address KERIN ESNER P.O. BOX 7272 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$355.96
3.847	Nonpriority creditor's name and mailing address Kesy Marketing P.O. Box 503643 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,240.72
3.848	Nonpriority creditor's name and mailing address KEVIN JOHN BARROS PO BOX 506572 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$939.22
3.849	Nonpriority creditor's name and mailing address KHASH-ERDENE TSEDEV c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.850	Nonpriority creditor's name and mailing address KHEMAIES ROMDHANI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$914.35
3.851	Nonpriority creditor's name and mailing address KHISHIGBAYAR DONDOV c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.852	Nonpriority creditor's name and mailing address KHUCHITBOLD SANDAG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.853	Nonpriority creditor's name and mailing address KI AHN PMB 685 BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,061.54
3.854	Nonpriority creditor's name and mailing address KIEN TRUONG 909 SULPHUR SPRINGS LANE APT #202 LAS VEGAS, NV 89128 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,043.83
3.855	Nonpriority creditor's name and mailing address Kim Hanna Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,345.48
3.856	Nonpriority creditor's name and mailing address Kim Jong Bo Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,393.79
3.857	Nonpriority creditor's name and mailing address KIM KONG LIM P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,047.65
3.858	Nonpriority creditor's name and mailing address KIMBERLY ACEBO PO BOX 503292 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$538.92
3.859	Nonpriority creditor's name and mailing address KIMBERLY ANN MAGOFNA PO Box 10002 PMB 2182 SAIPAN, MP 96951 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$110.29

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3.860	Nonpriority creditor's name and mailing address Kin Cheong Lung Marine Products Limited Unit 1, 3/F, Winfull Commercial Bldg 172-176 Wing Lok Street Sheung Wan, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$408.24
3.861	Nonpriority creditor's name and mailing address King Deco Engineering Limited Rm 1405A, Chung Kiu Commercial Bldg 47-51 Shantung St, Mongkok Kowloon, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$177,059.20
3.862	Nonpriority creditor's name and mailing address King Gain Ltd Rm 1312, 13/F, Lucky Centre 165-171 Wanchai Rd Wanchai, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,700,000.00
3.863	Nonpriority creditor's name and mailing address King's Wine Cellar (HK) Limited G/F, Mainslit Building, 42-44 Stanley St Central, Hong Kong Island Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$815.43
3.864	Nonpriority creditor's name and mailing address Kingfisher Corporation P.O. Box 5232 CHRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,590.00
3.865	Nonpriority creditor's name and mailing address Kingston Finance Ltd 72/F, The Center 99 Queen's Road Central Central, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$12,798,831.22
3.866	Nonpriority creditor's name and mailing address KIOS RUDOLPH PO Box 502442 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$26.86

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3.867	Nonpriority creditor's name and mailing address KIRK DAGUDOG P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$369.84
3.868	Nonpriority creditor's name and mailing address KIT YEE LEONG PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$818.97
3.869	Nonpriority creditor's name and mailing address Kiu Hung International Holdings Ltd Flat E, 20th Fl, Lucky Plaza 315-321 Lockhart Road, Wanchai HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$229,014.78
3.870	Nonpriority creditor's name and mailing address KOK SENG CHIN PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$332.84
3.871	Nonpriority creditor's name and mailing address KOK WENG CHEONG PMB 539 PPP BOX 10002 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.872	Nonpriority creditor's name and mailing address KOK YEOW THAM PO BOX 10003 PMB 229 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$918.08
3.873	Nonpriority creditor's name and mailing address Konami Gaming, Inc PO Box 848401 Los Angeles, CA 90084-8401 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.874	Nonpriority creditor's name and mailing address KORYN ITIBUS PO BOX 503233 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.875	Nonpriority creditor's name and mailing address KREMYLOU MADRID PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.876	Nonpriority creditor's name and mailing address KRISTY ANN ADA PO BOX 505095 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,409.31
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3.877	Nonpriority creditor's name and mailing address KRIZHELL BAUTISTA PO BOX 10001 PMB 948 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$634.47
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3.878	Nonpriority creditor's name and mailing address Kronos Asia Holding Ltd. Level 23, One Island East 18 Westlands Rd, Taikoo Place HONG KONG Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.879	Nonpriority creditor's name and mailing address KUAN-HENG NI PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,744.51
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3.880	Nonpriority creditor's name and mailing address KUAN-NENG LIAO No. 56-20, Hebin 2nd Ln. Jiuda Rd. Dasna Dist. Kaosiang City 840 TAIWAN Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
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3.881	Nonpriority creditor's name and mailing address KUANG-SHENG YANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,976.36
3.882	Nonpriority creditor's name and mailing address KUM THONG THIEN PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.883	Nonpriority creditor's name and mailing address KUO-CHENG LIAO PMB 560 PO Box 10002 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,237.55
3.884	Nonpriority creditor's name and mailing address KYLE MULLIGAN PO BOX 505478 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,331.63
3.885	Nonpriority creditor's name and mailing address Lam & Co 19/F, Harbour Commercial Bldg 122-124 Connaught Rd Central Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$48,431.15
3.886	Nonpriority creditor's name and mailing address LAMBERTO FLORES PO Box 8046 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$138.96
3.887	Nonpriority creditor's name and mailing address LAN ZHAI PO BOX 503597 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$794.24

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3.888	Nonpriority creditor's name and mailing address LARRY EVANS JR. PO BOX 505962 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.889	Nonpriority creditor's name and mailing address LARRY JAY MANALO PO BOX 504314 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$562.44
3.890	Nonpriority creditor's name and mailing address LARRY SINGA PO BOX 504367 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$396.82
3.891	Nonpriority creditor's name and mailing address LAURO SANTOS P.O. BOX 10001 PMB 467 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,575.37
3.892	Nonpriority creditor's name and mailing address LAVONNE RUIZ PMB 433 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,662.90
3.893	Nonpriority creditor's name and mailing address Law Office of Colin Thompson PMB 917 Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.894	Nonpriority creditor's name and mailing address Law Office of Matthew T. Gregory, LL PMB 419, Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.895	Nonpriority creditor's name and mailing address Law Office Of Michael W. Dotts, LLC P.O. Box 505979 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$318,763.24 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Balance of Judgment in CNMI Superior Court 21-0277-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.896	Nonpriority creditor's name and mailing address Law Office of Phillip J. Tydingco P.O. Box 5373 CHRB POB 106 PPP Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.897	Nonpriority creditor's name and mailing address Law Office of Stephen J. Nutting P.O. Box 5096 CHRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.898	Nonpriority creditor's name and mailing address Law Office of William M. Fitzgerald P.O. Box 500909 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.899	Nonpriority creditor's name and mailing address LAWRENCE ANTHONY LIMES PO Box 503291 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$115.07 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.900	Nonpriority creditor's name and mailing address LAWRENCE GUEVARRA PO Box 504677 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$192.82 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.901	Nonpriority creditor's name and mailing address LBT Appraisal P.O. Box 7593 SVRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.902	Nonpriority creditor's name and mailing address LEA JOY CRUZ P.O. Box 10000 PMB 225 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$330.68
3.903	Nonpriority creditor's name and mailing address LEAH VIVERO PMB 236 PPP BOX 10003 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,514.71
3.904	Nonpriority creditor's name and mailing address LEI WANG PO Box 10002 PMB 3714 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,564.88
3.905	Nonpriority creditor's name and mailing address LENIE IPARBA PO BOX 10000 PMB 444 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$442.30
3.906	Nonpriority creditor's name and mailing address LENIE LAXAMANA P.O. BOX 503866 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$709.73
3.907	Nonpriority creditor's name and mailing address LEODINE ATALIG P.O. BOX 7454 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$165.73
3.908	Nonpriority creditor's name and mailing address Leopoldo Pisano Jr Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$735.32

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3.909	Nonpriority creditor's name and mailing address LEOPOLDO VALDEZ PO Box 505148 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$249.16
3.910	Nonpriority creditor's name and mailing address LERICA PRIMO PO BOX 500601 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9.03
3.911	Nonpriority creditor's name and mailing address LEVEI BALDOZA P.O. BOX 10000 PMB 449 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,930.32
3.912	Nonpriority creditor's name and mailing address LEVENT OZKAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.913	Nonpriority creditor's name and mailing address Li Pak Hin P.O. Box 10000 PMB 918 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.914	Nonpriority creditor's name and mailing address Li Zhi Lin Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$986.77
3.915	Nonpriority creditor's name and mailing address Li Ziyi PO Box 10001 PMB 915 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,720.14

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3.916	Nonpriority creditor's name and mailing address Li's Limited Corporation P.O. Box 5609 CHRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,596.00
3.917	Nonpriority creditor's name and mailing address LIANG CHANG PO Box 10000 PMB 242 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.918	Nonpriority creditor's name and mailing address LIANHAI SUN P.O. BOX 505577 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$363.89
3.919	Nonpriority creditor's name and mailing address Liaoning Talent Intl Cooperation 10F Minshang Zongbu Plaza, No.51 Be CN Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,797.22
3.920	Nonpriority creditor's name and mailing address LIEZEL GALUTERA PO Box 10000 PMB 511 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$861.36
3.921	Nonpriority creditor's name and mailing address LIHUA MA PO BOX 501365 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,175.74
3.922	Nonpriority creditor's name and mailing address Cui Lijie Suites 7001, 7002, & 7014-7016, 70th Fl Two Intl. Finance Centre, 8 Finance St Central, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan #1 \$2,960,000.00</u> <u>Loan #2 \$8,300,000.00</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,260,000.00

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3.923	Nonpriority creditor's name and mailing address LILI SU P.O. BOX 503716 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,142.59
3.924	Nonpriority creditor's name and mailing address LINA ZHAO P.O. BOX 10003 PMB 352 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$192.97
3.925	Nonpriority creditor's name and mailing address LINDSAY MALLARI PO Box 10001 PMB 68 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$260.10
3.926	Nonpriority creditor's name and mailing address Ling Lin Store PO Box 505729 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.927	Nonpriority creditor's name and mailing address LIRONG SABLAN PO BOX 505906 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$101.95
3.928	Nonpriority creditor's name and mailing address LISA LEEBRUG P.O. BOX 506231 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$59.91
3.929	Nonpriority creditor's name and mailing address Litigation Edge PTE LTD 114 Lavender Street #09-88, Singapore 338729 SINGAPORE Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.930	Nonpriority creditor's name and mailing address Liu Hanqin P.O. BOX 10002 PMB 405 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,017.70
3.931	Nonpriority creditor's name and mailing address Liu Song Zhen PO Box 10003 PMB 84 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,659.72
3.932	Nonpriority creditor's name and mailing address LIWU WU PMB 556 BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,122.78
3.933	Nonpriority creditor's name and mailing address LIXIN CASTRO P.O. BOX 502580 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,295.24
3.934	Nonpriority creditor's name and mailing address LIYA HU P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$78.26
3.935	Nonpriority creditor's name and mailing address LIYELMATAU GIDEON P.O. BOX 8145 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$700.52
3.936	Nonpriority creditor's name and mailing address LIZ CLAIRE CASILIHAN P.O. BOX 505822 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$881.06

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3.937	Nonpriority creditor's name and mailing address Lizama Law Office Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,575.00
3.938	Nonpriority creditor's name and mailing address LKHAGVADORJ TSEENDSUREN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$918.10
3.939	Nonpriority creditor's name and mailing address LKHAGVADORJ TUMURBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
3.940	Nonpriority creditor's name and mailing address LKHAGVADULAM PUREVDORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
3.941	Nonpriority creditor's name and mailing address LKHAGVASUREN OCHIRBAT c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.942	Nonpriority creditor's name and mailing address LOGAN LUPI PO Box 10003 PMB 101 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,567.21
3.943	Nonpriority creditor's name and mailing address LOREN ADAM PO BOX 10003 PMB 596 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,352.26

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3.944	Nonpriority creditor's name and mailing address LORETO DAOA JR PO BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$585.96
3.945	Nonpriority creditor's name and mailing address LORGIL TECSON P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$330.68
3.946	Nonpriority creditor's name and mailing address LORNET BANGOT PO BOX 506673 CK SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.947	Nonpriority creditor's name and mailing address LORRAINE CARLA CASTRO P.O. BOX 503075 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$177.89
3.948	Nonpriority creditor's name and mailing address LOSANNA SANTOS PO Box 504291 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.70
3.949	Nonpriority creditor's name and mailing address LOU ANN MAGSINO PO BOX 505954 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$164.61
3.950	Nonpriority creditor's name and mailing address LOVELY JANINE MACARANAS PMB 242 PPP 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,264.44

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3.951	Nonpriority creditor's name and mailing address Lucy T. Sablan P.O. Box 500121 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.952	Nonpriority creditor's name and mailing address Luen Fung Enterprises P.O. Box 502725 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.953	Nonpriority creditor's name and mailing address LUIGI DI MARTINO via Pasquale Scandurra n.4 Siracusa 96100 Siracusa (SR) Italy Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,328.40
3.954	Nonpriority creditor's name and mailing address Luis Jou 3439 CHARLOTTE AVE Rosemead, CA 91770 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,450.00
3.955	Nonpriority creditor's name and mailing address LUZ CIELO ALCANO PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,202.50
3.956	Nonpriority creditor's name and mailing address LUZON MANLAPAZ PO BOX 503146 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32.15
3.957	Nonpriority creditor's name and mailing address M.A KUCH P.O. BOX 504178 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$569.20

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3.958	Nonpriority creditor's name and mailing address MA CATALINA TEJADA c/o YWA Human Resources Corporation 1268 Gen. Luna Street Ermita Manila Manila, 1000 Philippines Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,091.93
3.959	Nonpriority creditor's name and mailing address MA KRISTINA ROMERO PO Box 10001 PMB 432 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.960	Nonpriority creditor's name and mailing address MA ROSARIO DELA TORRE PO BOX 504090 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,443.88
3.961	Nonpriority creditor's name and mailing address MA TEJADA PO BOX 10000 PMB 306 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.962	Nonpriority creditor's name and mailing address MA. CATRINA SANTOS PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.963	Nonpriority creditor's name and mailing address MA.JUANA CERVANIA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.964	Nonpriority creditor's name and mailing address MA.SOCORRO MERCADO PO BOX 506037 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$101.30

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3.965	Nonpriority creditor's name and mailing address MACARIA HERNANDEZ PO Box 10005 PMB 10006 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$107.75
3.966	Nonpriority creditor's name and mailing address Macau Bidanli Lighting Co., Ltd No. 215, North Rd Dongan, Guzhen, Zhongshan Guangdong, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,326.77
3.967	Nonpriority creditor's name and mailing address Macau Kaida Decoration and Illumination 25 Masons Way, Codmore Hill Pulborough, West Sussex England, RH20 1DZ Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,400.00
3.968	Nonpriority creditor's name and mailing address MADILYN BORCE PO BOX 10000 PMB 353 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$476.00
3.969	Nonpriority creditor's name and mailing address Madlen Marie Dela Cruz Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$74.48
3.970	Nonpriority creditor's name and mailing address MAE ARELLANO PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$884.76
3.971	Nonpriority creditor's name and mailing address MAEGAN AGULTO PO BOX 502022 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,923.23

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3.972	Nonpriority creditor's name and mailing address Maegan S. Agulto P.O. Box 10000 PMB 918 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,923.23
3.973	Nonpriority creditor's name and mailing address MAGDALENA ATTAO P.O. BOX 500709 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.974	Nonpriority creditor's name and mailing address Magdalena P. Attao PO Box 10001 PMB 915 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.975	Nonpriority creditor's name and mailing address MALEEN AMANDUS PO Box 505560 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$373.97
3.976	Nonpriority creditor's name and mailing address MAN GUAN PO BOX 10000 PMB 737 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,910.36
3.977	Nonpriority creditor's name and mailing address MANDAKHBAYAR ADIYA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.978	Nonpriority creditor's name and mailing address MANLAIBAYAR TOGTOKHJARGAL c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$991.06

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3.979	Nonpriority creditor's name and mailing address Manni Guan PMB 918 P.O. Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,440.49
3.980	Nonpriority creditor's name and mailing address MANUTIASOSUPO WABOL P.O. BOX 504404 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$666.52
3.981	Nonpriority creditor's name and mailing address MARCO SANTIAGO PO BOX 502332 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$597.44
3.982	Nonpriority creditor's name and mailing address Marfega Trading Co. Inc. PO Box 502356 CK Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,283.50
3.983	Nonpriority creditor's name and mailing address MARIA CARLA SANTOS DALUYEN PO BOX 7286 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,160.61
3.984	Nonpriority creditor's name and mailing address MARIA CHRISTINA AMOYO PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.985	Nonpriority creditor's name and mailing address MARIA CRISTINA LAGDA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$188.04

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3.986	Nonpriority creditor's name and mailing address MARIA JOANN PERSAUD PO Box 502442 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29.92
3.987	Nonpriority creditor's name and mailing address MARIA KHRISTINA UY PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$854.66
3.988	Nonpriority creditor's name and mailing address MARIA LUZ WILLIAMS c/o YWA Human Resources Corporation 1268 Gen. Luna Street Ermita Manila Manila, 1000 Philippines Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$272.84
3.989	Nonpriority creditor's name and mailing address MARIA SUSANA CHAN PO BOX 506181 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$477.63
3.990	Nonpriority creditor's name and mailing address MARIA VERONICA SUAREZ PO Box 504736 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$458.48
3.991	Nonpriority creditor's name and mailing address MARIA WILLIAMS P.O. BOX 8123 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.992	Nonpriority creditor's name and mailing address Mariana Pioneer (CNMI), LLC P.O. Box 10001 PMB 305 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,410.00

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3.993	Nonpriority creditor's name and mailing address Marianas Acquisition Corporation PMB 1009 P.O. Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,254.87
3.994	Nonpriority creditor's name and mailing address Marianas Consultancy Services, LLC PMB 997 Box 100000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.995	Nonpriority creditor's name and mailing address Marianas Creation, LLC PO Box 500231 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,400.00
3.996	Nonpriority creditor's name and mailing address Marianas Legal Strategy Group, LLC PMB323, Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.997	Nonpriority creditor's name and mailing address Marianas Medical Supplies, LLC PO Box 501877 SAIPAN, MP 96950-8903 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$213.00
3.998	Nonpriority creditor's name and mailing address Marianas Pacific Distributors, Inc. P.O. Box 500965 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$145,148.40
3.999	Nonpriority creditor's name and mailing address Marianas Printing Service, Inc P. O. Box 500030 CK SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$135.00

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3.100 0	Nonpriority creditor's name and mailing address Marianas Professional Services, Inc. P.O. Box 7593 SVRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,000.00
3.100 1	Nonpriority creditor's name and mailing address Marianas Water & Ice Co. PO Box 501808 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,258.25
3.100 2	Nonpriority creditor's name and mailing address MARICAR KISA PO BOX 506149 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.100 3	Nonpriority creditor's name and mailing address MARICEL CABASAL PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$63.31
3.100 4	Nonpriority creditor's name and mailing address MARICEL MAGBANUA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,286.76
3.100 5	Nonpriority creditor's name and mailing address MARIE RABAUIMAN PO BOX 503314 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$366.22
3.100 6	Nonpriority creditor's name and mailing address MARIEL PANALIGAN PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.14

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3.100 7	Nonpriority creditor's name and mailing address MARILYNN NEKAIFES P.O. BOX 503001 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$286.76
3.100 8	Nonpriority creditor's name and mailing address MARIO QUERUBIN CAMACHO PO BOX 5840 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$251.97
3.100 9	Nonpriority creditor's name and mailing address MARIO SALAMAT PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$253.05
3.101 0	Nonpriority creditor's name and mailing address MARIO SALAS JR. PO BOX 506036 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$524.58
3.101 1	Nonpriority creditor's name and mailing address MARISSA AFLLEJE-SABLAN PO BOX 500131 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.101 2	Nonpriority creditor's name and mailing address MARITES LUMANTAO P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,797.26
3.101 3	Nonpriority creditor's name and mailing address MARK ANGELO TARAYAO P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$612.24

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3.101 4	Nonpriority creditor's name and mailing address MARK ANTHONY PANGILINAN PO Box 7286 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,630.22
3.101 5	Nonpriority creditor's name and mailing address MARK DAVID ESCANO P.O. Box 506415 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$847.28
3.101 6	Nonpriority creditor's name and mailing address MARLEEN DELACRUZ PO BOX 503110 CK SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.101 7	Nonpriority creditor's name and mailing address MARLENE CADO PO BOX 501924 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$88.28
3.101 8	Nonpriority creditor's name and mailing address MARRIA ELEZABET CAUAGDAN Pmb 55 Ppp Box 10003 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$138.06
3.101 9	Nonpriority creditor's name and mailing address MART LKHASUREN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.102 0	Nonpriority creditor's name and mailing address MARVIN DE BELEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$159.55

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3.102 1	Nonpriority creditor's name and mailing address MARY GRACE CAGUAY P.O. BOX 10000 PMB 718 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$231.66
3.102 2	Nonpriority creditor's name and mailing address MARY GRACE SALDO P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$888.25
3.102 3	Nonpriority creditor's name and mailing address MARY JANE DIESTRO PO Box 504202 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$68.35
3.102 4	Nonpriority creditor's name and mailing address MARY JANE SILAPAN PO Box 506405 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$702.38
3.102 5	Nonpriority creditor's name and mailing address MARY JOYCE TAN P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$885.30
3.102 6	Nonpriority creditor's name and mailing address MARY ROSE LANSANGAN PO Box 10003 PMB 177 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$277.46
3.102 7	Nonpriority creditor's name and mailing address MATHEW TENORIO PO BOX 506393 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$189.60

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3.102 8	Nonpriority creditor's name and mailing address MATTHEW CHANDLE HAMILTON PO Box 500112 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.102 9	Nonpriority creditor's name and mailing address Matthew Gregory Client Trust Account PMB 419, Box 10000 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.103 0	Nonpriority creditor's name and mailing address Max Nice International Industrial Limite JCG Building, Mong Kok, Kowloon Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$407.67
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3.103 1	Nonpriority creditor's name and mailing address MAXIMO MANGARERO P.O. BOX 502516 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,126.36
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3.103 2	Nonpriority creditor's name and mailing address MAYDELINE MARR PO BOX 10000 PMB 153 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$176.02
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3.103 3	Nonpriority creditor's name and mailing address MCC International Saipan Ltd. Co. 5960 Plaza Drive P.O. Box 500730 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Construction Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,993,862.00
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3.103 4	Nonpriority creditor's name and mailing address Mega Fortris (Malaysia) Sdn Bhd 29 Jalan Anggerik Mokara 31/47 Kota Kemu Selangor, Malaysia Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,940.00
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3.103 5	<p>Nonpriority creditor's name and mailing address</p> <p>MEHMET BARIS DERINTAS c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Accrued Leave</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$834.99
3.103 6	<p>Nonpriority creditor's name and mailing address</p> <p>MEHMET CAVDAR c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Accrued Leave</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$184.87
3.103 7	<p>Nonpriority creditor's name and mailing address</p> <p>MEHMET CERCIBASI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Accrued Leave</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$825.75
3.103 8	<p>Nonpriority creditor's name and mailing address</p> <p>MEHMET KARAKAYA c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Accrued Leave</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$816.55
3.103 9	<p>Nonpriority creditor's name and mailing address</p> <p>MEHMET SAFSOYLU c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Accrued Leave</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,007.37
3.104 0	<p>Nonpriority creditor's name and mailing address</p> <p>MEHMET SARITAS c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: _</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$0.00
3.104 1	<p>Nonpriority creditor's name and mailing address</p> <p>MELINA SALAS PO BOX 501641 SAIPAN, MP 96950</p> <p>Date(s) debt was incurred _</p> <p>Last 4 digits of account number _</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Accrued Leave</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,891.24

Debtor **Imperial Pacific International (CNMI), LLC**
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3.104 2	Nonpriority creditor's name and mailing address MELINDA SOLIS PO BOX 10000 PMB 103 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$642.42
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3.104 3	Nonpriority creditor's name and mailing address MELLISA BORJA PO BOX 506044 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$623.30
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3.104 4	Nonpriority creditor's name and mailing address MELVIN ALAN SAKISAT PO BOX 10001 PMB 479 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$164.21
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3.104 5	Nonpriority creditor's name and mailing address MELVIN CRUZ PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.104 6	Nonpriority creditor's name and mailing address MENG CHOW P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,246.88
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3.104 7	Nonpriority creditor's name and mailing address MENGSHA ZHOU PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$539.31
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3.104 8	Nonpriority creditor's name and mailing address MERCEDES LANDICHO PO Box 505860 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.104 9	Nonpriority creditor's name and mailing address METIN OZGER c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$184.87</u>
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3.105 0	Nonpriority creditor's name and mailing address MetLife P.O. Box Dept LA 21296 Pasadena, CA 91185-1296 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$28,527.75</u>
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3.105 1	Nonpriority creditor's name and mailing address MIAO YANG WANG PO BOX 10000 PMB 163 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$769.95</u>
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3.105 2	Nonpriority creditor's name and mailing address MICHAEL ANTHONY JORDAN PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$2,534.21</u>
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3.105 3	Nonpriority creditor's name and mailing address MICHAEL DILLEY PO Box 506583 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$480.01</u>
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3.105 4	Nonpriority creditor's name and mailing address MICHAEL MASCIO PMB 118 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$6,731.70</u>
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3.105 5	Nonpriority creditor's name and mailing address MICHAEL MORALES PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$605.28</u>
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.105 6	Nonpriority creditor's name and mailing address MICHAEL PABALAN P.O. BOX 10001 PMB 113 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,451.83
3.105 7	Nonpriority creditor's name and mailing address MICHAEL PFEIL PO BOX 505478 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,603.22
3.105 8	Nonpriority creditor's name and mailing address MICHAEL REY VALDEZ P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$541.17
3.105 9	Nonpriority creditor's name and mailing address MICHAEL VILLASPIN PO BOX 10000 PMB 225 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,264.97
3.106 0	Nonpriority creditor's name and mailing address MICHELLE GATBONTON PO BOX 504346 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$343.62
3.106 1	Nonpriority creditor's name and mailing address Micronesia Telecommunications Corp. P.O. Box 500437 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$129,468.86
3.106 2	Nonpriority creditor's name and mailing address MIDORI ADELBAI PO BOX 503365 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$439.40

Debtor **Imperial Pacific International (CNMI), LLC**
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3.106 3	Nonpriority creditor's name and mailing address MIKE GALYUG P.O. BOX 504711 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$79.73
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3.106 4	Nonpriority creditor's name and mailing address Milano Hardware Co. Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,505.55
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3.106 5	Nonpriority creditor's name and mailing address MILDRED IDO PO Box 10001 PMB 400 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$212.88
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3.106 6	Nonpriority creditor's name and mailing address Miller Law Office, LLC PMB 372 PO BOX 10000 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.106 7	Nonpriority creditor's name and mailing address Million Hope Industries Limited Sha Tin On Kwan St #3 Office A, King Win Hong Kong, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$409,608.40
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3.106 8	Nonpriority creditor's name and mailing address MIN-YU LEE PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$974.05
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3.106 9	Nonpriority creditor's name and mailing address Ming Fai Enterprises International Compa 5 Sun Hop Lane 4/F., May Kay Ind. Bldg. uen Mun New Territories Hong Kong, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,707.56
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Debtor **Imperial Pacific International (CNMI), LLC**
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3.107 0	Nonpriority creditor's name and mailing address Ming Guan Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$121.03
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3.107 1	Nonpriority creditor's name and mailing address MING-CHIEH LAI PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.107 2	Nonpriority creditor's name and mailing address MING-LI CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,935.30
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3.107 3	Nonpriority creditor's name and mailing address MING-YU SHIN LK: NO.1, SINCUN RD, XINYI ALY CHENG GONG TOWNSHIP TAITUNG COUNTY Taiwan 96144 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.107 4	Nonpriority creditor's name and mailing address MINGYANG YUAN PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.107 5	Nonpriority creditor's name and mailing address Mira Logistics and Professional Services 49 Ilfracombe Crescent England, Hornchurch RM12 6RQ Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,651.98
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3.107 6	Nonpriority creditor's name and mailing address MizziSoft Pty Ltd Unit 15, 7-9 Mallett Road Tullamarine Victoria 3043 AU Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,668.00
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.107 7	Nonpriority creditor's name and mailing address MMC & Pacific Labs, LLC P.O. Box 5006 CHRB Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,105.00
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3.107 8	Nonpriority creditor's name and mailing address Mobil Oil Marianas Islands Inc. P.O. Box 500367 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,731.58
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3.107 9	Nonpriority creditor's name and mailing address Modern Stationery & Trading Co. Inc. P.O. Box 500799 San Jose Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,209.31
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3.108 0	Nonpriority creditor's name and mailing address Modern Venture Inc. DBA Prince Hotel P.O. Box 506161 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.108 1	Nonpriority creditor's name and mailing address Modern Venture Inc. DBA Prince Hotel PMB 1731 Box 10002 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.108 2	Nonpriority creditor's name and mailing address Modica Pro Pty Ltd 1/131 Glenroy Road Glenroy 3045, Victoria AUSTRALIA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Claims asserted in Modica Pro v. [Debtor]</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,600,000.00
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3.108 3	Nonpriority creditor's name and mailing address MOMREJ BHUIYAN P.O. BOX 503696 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39.16
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.108 4	Nonpriority creditor's name and mailing address MONALIZA TENORIO P.O. Box 1000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$195.03
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3.108 5	Nonpriority creditor's name and mailing address Moon Seagi Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,596.10
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3.108 6	Nonpriority creditor's name and mailing address Morrico Equipment LLC 197 Ypao Rd. Tamuning, GU 96913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.108 7	Nonpriority creditor's name and mailing address MUHARREM BASARAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$816.55
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3.108 8	Nonpriority creditor's name and mailing address MUKREMIN COBANPINARI c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$816.55
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3.108 9	Nonpriority creditor's name and mailing address MUNKH-ERDENE BATMUNKH c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,091.26
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3.109 0	Nonpriority creditor's name and mailing address MUNKH-ERDENE BATTOGTOKH c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.109 1	Nonpriority creditor's name and mailing address MUNKH-OCHIR GANBAT c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.109 2	Nonpriority creditor's name and mailing address MUNKH-OD ERDENE c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.109 3	Nonpriority creditor's name and mailing address MUNKHBAYAR TSOGTBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
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3.109 4	Nonpriority creditor's name and mailing address MUNKHBOLD NARANBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.109 5	Nonpriority creditor's name and mailing address MUNKHJARGAL CHULTEM c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.109 6	Nonpriority creditor's name and mailing address MUNKHSAIKHAN BATMUNKH c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.109 7	Nonpriority creditor's name and mailing address MUNKHSAIKHAN NYAMJAV c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$992.13 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109 8	Nonpriority creditor's name and mailing address MUNKH SOYOMBO ALTANTSETSEG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.109 9	Nonpriority creditor's name and mailing address MUNKHTUR KHUUKHENBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$410.82 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.110 0	Nonpriority creditor's name and mailing address MUNKHTUVSHIN TSERENKHAND c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.110 1	Nonpriority creditor's name and mailing address MUNKHTUYA BATMUNKH c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$992.13 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.110 2	Nonpriority creditor's name and mailing address MUNKHUU DORJSUREN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$992.13 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.110 3	Nonpriority creditor's name and mailing address MUNKHZORIG TSETSEGMAA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.110 4	Nonpriority creditor's name and mailing address MURAT CAPAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.110 5	Nonpriority creditor's name and mailing address MURAT CIFTCI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$191.03
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3.110 6	Nonpriority creditor's name and mailing address MURAT VAROL c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.110 7	Nonpriority creditor's name and mailing address MURAT YASAR c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$236.34
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3.110 8	Nonpriority creditor's name and mailing address MUSTAFA BADEM c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$187.95
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.110 9	Nonpriority creditor's name and mailing address MUSTAFA DOGAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91
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3.111 0	Nonpriority creditor's name and mailing address MUSTAFA ORCUN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$834.99
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3.111 1	Nonpriority creditor's name and mailing address MUSTAFA SAHIK TURAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,490.75
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3.111 2	Nonpriority creditor's name and mailing address MYAGMAR-OCHIR BOLORMAA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.111 3	Nonpriority creditor's name and mailing address MYAGMARNAMSRAI CHOIJILKHUNDEV c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
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3.111 4	Nonpriority creditor's name and mailing address MYLA JOHNSON P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,136.71
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3.111 5	Nonpriority creditor's name and mailing address MYLANIE BASA P.O. Box 5508 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,437.26
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.111 6	Nonpriority creditor's name and mailing address MYLULANG RYAN LITULUMAR PO BOX 503566 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,453.96
3.111 7	Nonpriority creditor's name and mailing address MYRA LYNN PITEG PO BOX 503973 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$120.89
3.111 8	Nonpriority creditor's name and mailing address N15 Architects 6th Floor, Suite 603, P.O. Box 5339 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.111 9	Nonpriority creditor's name and mailing address Nam Shing Hardware Co. 5 Ang Mo Kio Industiral Park 2a #01-15 Ang Mo Kio Tech 2 Singapore 567760 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$50,551.95
3.112 0	Nonpriority creditor's name and mailing address NANZADDORJ DAGVA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
3.112 1	Nonpriority creditor's name and mailing address Nardiello Law Firm, Professional Law Cor 1880 Century Park Eat, Suite 716 Century City, CA 90067 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$56,681.52
3.112 2	Nonpriority creditor's name and mailing address NARMANDAKH AMARSAIKHAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.112 3	Nonpriority creditor's name and mailing address NATHANIEL EUGENIO PO BOX 10000 PMB 638 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$415.46
3.112 4	Nonpriority creditor's name and mailing address NATHANIEL MANANGAN PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,782.71
3.112 5	Nonpriority creditor's name and mailing address NATHANIEL PANGELINAN P.O. BOX 10003 PMB 363 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$816.39
3.112 6	Nonpriority creditor's name and mailing address National Council on Problem Gambling+A16 730 11th Street NW, Suite 601 Washington, DC 20001 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,125.00
3.112 7	Nonpriority creditor's name and mailing address NAZARIO SUMAGPANG P.O. BOX 502549 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$383.02
3.112 8	Nonpriority creditor's name and mailing address NEMIE JR BAIZA P.O. BOX 503341 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$963.12
3.112 9	Nonpriority creditor's name and mailing address NENITA JOVELO PMB 16 BOX 10005 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$161.70

Debtor **Imperial Pacific International (CNMI), LLC**
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3.113 0	Nonpriority creditor's name and mailing address NENITA ROMOLOR P.O. BOX 503269 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$123.57
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3.113 1	Nonpriority creditor's name and mailing address Neodrain Technologies Co., Ltd Bldg 10, No. 300, Desheng Rd Yinzhou Dis Ningbo, Zhejiang Province, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$138.00
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3.113 2	Nonpriority creditor's name and mailing address NERISSA MERCADO PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,723.83
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3.113 3	Nonpriority creditor's name and mailing address New Century Printing Industrial Ltd 3rd Floor, Luen Ming Hing Ind. Building Kowloon, Hong Kong Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.113 4	Nonpriority creditor's name and mailing address New Sky Development Limited Unit B 10/F BLK 1 Tins' Centre No. 3 Hung Cheung Rd Tuen Mun Nt, Hong Kong Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$938.00
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3.113 5	Nonpriority creditor's name and mailing address New West Travel Necessities Co., Ltd Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$375.74
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3.113 6	Nonpriority creditor's name and mailing address NI DELEON GUERRERO P O BOX 505519 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.113 7	Nonpriority creditor's name and mailing address NI YIN PO Box 10003 PMB 701 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$788.14
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3.113 8	Nonpriority creditor's name and mailing address NICOLAS SAN P.O. BOX 502408 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.113 9	Nonpriority creditor's name and mailing address Nihao Power Solutions Co., Limited Hollywood Plaza, Mong Kok, Kowloon Hong Kong, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$360.00
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3.114 0	Nonpriority creditor's name and mailing address NIKKAEL CHOICES AGUSTINES PO BOX 500609 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,260.24
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3.114 1	Nonpriority creditor's name and mailing address No 1 (Suzhou) Automation Equipment Co., Plant No. 1, No. 28, Yinzhu Rd New District, Suzhou, Jiangsu CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$99,581.45
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3.114 2	Nonpriority creditor's name and mailing address No Ka Oi P.O. Box 500768 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,884.00
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3.114 3	Nonpriority creditor's name and mailing address NOEL JIMENEZ PO BOX 504149 CK SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.114 4	Nonpriority creditor's name and mailing address NOEMI CAPULONG PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$274.82
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3.114 5	Nonpriority creditor's name and mailing address NOMIN-ERDENE BATSAIKHAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,956.45
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3.114 6	Nonpriority creditor's name and mailing address NONILON YBONA PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,642.19
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3.114 7	Nonpriority creditor's name and mailing address NOPPHARUT KHANPHONGAM PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,229.37
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3.114 8	Nonpriority creditor's name and mailing address NORIDA MALACA PO Box 505755 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$525.05
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3.114 9	Nonpriority creditor's name and mailing address NURI CIFTCI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$240.22
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3.115 0	Nonpriority creditor's name and mailing address NYAMMAGSAR DASHDORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$908.98
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.115 1	Nonpriority creditor's name and mailing address NYMPHA SHARTS P.O. BOX 506416 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$818.93
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3.115 2	Nonpriority creditor's name and mailing address O'Connor Berman Dotts & Banes P.O. Box 501969 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.115 3	Nonpriority creditor's name and mailing address OCHIRBAT CHIMIDDORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.115 4	Nonpriority creditor's name and mailing address ODONGOO ERDENEBILEG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
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3.115 5	Nonpriority creditor's name and mailing address OKAN ANDIC c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.115 6	Nonpriority creditor's name and mailing address OKTAY ATES c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
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3.115 7	Nonpriority creditor's name and mailing address OLGA MATA P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,543.55
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.115 8	Nonpriority creditor's name and mailing address OLIVIA BATEMAN P.O. BOX 10003 PMB 813 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$196.77
3.115 9	Nonpriority creditor's name and mailing address OLONBAYAR BOLD c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
3.116 0	Nonpriority creditor's name and mailing address OMER ATAR c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$187.95
3.116 1	Nonpriority creditor's name and mailing address OMER DONMEZ c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91
3.116 2	Nonpriority creditor's name and mailing address OMER KARAOG LAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.116 3	Nonpriority creditor's name and mailing address One's Consultancy Limited 86 Minlow Way Aurora L4G 0Y1 Canada Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,759.00
3.116 4	Nonpriority creditor's name and mailing address ONUR CIFTCI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.116 5	Nonpriority creditor's name and mailing address OPHINIA ENIS PO Box 7253 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.70
3.116 6	Nonpriority creditor's name and mailing address ORCESINO ECHALICO P.O. BOX 503500 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$54.58
3.116 7	Nonpriority creditor's name and mailing address Orisec Technology Limited 1 St Crispin Way Haslingden, Lancashire BB4 4PW UK Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$62,144.82
3.116 8	Nonpriority creditor's name and mailing address OSCAR KAPILEO P.O. BOX 7741 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$422.21
3.116 9	Nonpriority creditor's name and mailing address OSMAN GUNES c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91
3.117 0	Nonpriority creditor's name and mailing address OSMAN YENTUR c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91
3.117 1	Nonpriority creditor's name and mailing address OTGONBAATAR BAYANMUNKH c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,081.48

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.117 2	Nonpriority creditor's name and mailing address OTGONBAATAR MUNKHBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
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3.117 3	Nonpriority creditor's name and mailing address OTGONBAYAR BANZRAGCH c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
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3.117 4	Nonpriority creditor's name and mailing address OTGONBAYAR GANBOLD c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
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3.117 5	Nonpriority creditor's name and mailing address OTGONBAYAR ODKHUU c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
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3.117 6	Nonpriority creditor's name and mailing address OYUNBILEG BAVUU c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
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3.117 7	Nonpriority creditor's name and mailing address Ozcan Genc, Hasan Gokce, and Suleymankos c/o Richard Miller, Esq. Danismanlik Ticaret P.O. Box 501969 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$949.31
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.117 8	Nonpriority creditor's name and mailing address P & A Corporation P.O.Box.506003 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$858.66
3.117 9	Nonpriority creditor's name and mailing address Pacific Alliance Inc. PO Box 7191 SVRB Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.118 0	Nonpriority creditor's name and mailing address Pacific Century Inc. P.O. Box 504514 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$68,725.00
3.118 1	Nonpriority creditor's name and mailing address Pacific Eco Laundry Inc. PMB 214 Box 10005 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,339.62
3.118 2	Nonpriority creditor's name and mailing address Pacific International Property Man PO Box 1001 PMB 1166 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.118 3	Nonpriority creditor's name and mailing address Pacific Medical Center PO Box 501908 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.118 4	Nonpriority creditor's name and mailing address Pacific Rim Land Development, LLC 441 Route 3 Dededo, GU 96929 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.118 5	Nonpriority creditor's name and mailing address Pacific Saipan, Inc 2216 Gualo Rai Rd, Garapan SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,128.00
3.118 6	Nonpriority creditor's name and mailing address Pacific Star Wholesale P.O. Box 8183 SVRB Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$848.80
3.118 7	Nonpriority creditor's name and mailing address Pacific Sun LLC dba E-E Spa PO Box 505577 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$220.00
3.118 8	Nonpriority creditor's name and mailing address Pacific Trading Company, LTD P.O. Box 138320 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.118 9	Nonpriority creditor's name and mailing address Pacific Wine & Spirits (Saipan), Inc PMB A-4 BOX 10001 ALAIHAI STREET SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,059.80
3.119 0	Nonpriority creditor's name and mailing address Pacifica Insurance Underwriters, Inc. P.O. Box 500168 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$91,749.09
3.119 1	Nonpriority creditor's name and mailing address Paltronics Macau LTD Avenida de Amizade, n. 1287 6 andar Macau MO Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.119 2	Nonpriority creditor's name and mailing address PANUWAT JINTAMUTTA PMB 284 PPP BOX 10003 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.119 3	Nonpriority creditor's name and mailing address PAOLO GIANGRAVE c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.119 4	Nonpriority creditor's name and mailing address PAOLO TUZZA via Tornabene n. 26 Francofonte 96015 Siracusa (SR) Italy Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$770.37
3.119 5	Nonpriority creditor's name and mailing address PAQUITO DECREPITO JR. PO BOX 10003 PMB 214 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250.94
3.119 6	Nonpriority creditor's name and mailing address Pasqualino Tarascio PO Box 10000 PMB 918 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$881.14
3.119 7	Nonpriority creditor's name and mailing address PATRICK DELOS REYES PO Box 7350 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$387.16
3.119 8	Nonpriority creditor's name and mailing address PATRICK JAMES TUDELA P.O. BOX 502517 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.119 9	Nonpriority creditor's name and mailing address PATRICK LORRAIN ARIZALA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,680.66
3.120 0	Nonpriority creditor's name and mailing address Patterson Enterprises dba Suncare Distri 1122 ARMY DRIVE Barrigada, GU 96913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$111.60
3.120 1	Nonpriority creditor's name and mailing address PAUL ANGELO SANIEL PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.120 2	Nonpriority creditor's name and mailing address PAUL MARTINEZ P.O. BOX 505105 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$167.53
3.120 3	Nonpriority creditor's name and mailing address PAYUPCHAI KONGSANA PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,680.43
3.120 4	Nonpriority creditor's name and mailing address Pearl River Corporation P.O. Box 503052 Chalan Laulau Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$39,538.28
3.120 5	Nonpriority creditor's name and mailing address PEDRO GABRIEL ORTIZ PEREZ PO BOX 505948 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,421.09

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3.120 6	Nonpriority creditor's name and mailing address PEI CHEE CHANG P.O. Box 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,798.67
3.120 7	Nonpriority creditor's name and mailing address PENG WANG PMB 242 BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.120 8	Nonpriority creditor's name and mailing address Peng Wang PO Box 918 PMB 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$967.53
3.120 9	Nonpriority creditor's name and mailing address Pepero Bella Corporation P.O. Box 503205 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$408,635.87
3.121 0	Nonpriority creditor's name and mailing address Perfect Well Tours Ltd 529A Star House, 3 Salisbury Road, TST Kowloon, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.121 1	Nonpriority creditor's name and mailing address Perry International Corporation PMB 608 Box 10003 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.121 2	Nonpriority creditor's name and mailing address Perry International Corporation DBA PMB 588 Box 10012 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.121 3	Nonpriority creditor's name and mailing address PETER FALRUW PO Box 501053 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$198.36
3.121 4	Nonpriority creditor's name and mailing address PETER JOHN MARTIN PO BOX 5420 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$164.34
3.121 5	Nonpriority creditor's name and mailing address PETER JOSEPH GUTIERREZ PO Box 500572 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,067.62
3.121 6	Nonpriority creditor's name and mailing address PETER SERAFIN PO BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$298.90
3.121 7	Nonpriority creditor's name and mailing address PETER TEIGITA PO Box 506549 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$701.19
3.121 8	Nonpriority creditor's name and mailing address Petty Cash - HongKai Dai PO Box 501931 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.121 9	Nonpriority creditor's name and mailing address Phoenix Services Inc PMB A-51 Box 10001 Saipan, MP 96950 Date(s) 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>Consulting Sevices</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$761,305.36

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3.122 0	Nonpriority creditor's name and mailing address PING YUE PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.122 1	Nonpriority creditor's name and mailing address PING-HUNG MA PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,534.28
3.122 2	Nonpriority creditor's name and mailing address PING-TSE CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,142.69
3.122 3	Nonpriority creditor's name and mailing address PININA BOTE PO BOX 503312 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$403.30
3.122 4	Nonpriority creditor's name and mailing address PISANTY NACHU PO BOX 10002 PMB 1802 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$115.98
3.122 5	Nonpriority creditor's name and mailing address Plaintiffs in Genc et al v IPI (CNMI) c/o Banes Horey Berman & Miller, LLC Ste 201, Marianas Bus. Plaza POB 501969 Saipan, MP 96950 Date(s) 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>Wages Claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.122 6	Nonpriority creditor's name and mailing address Plumeria International Corporation PMB 588 Box 10012 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.122 7	Nonpriority creditor's name and mailing address PO-HAO CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,420.23
3.122 8	Nonpriority creditor's name and mailing address POCHOLO CRUZ PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,824.16
3.122 9	Nonpriority creditor's name and mailing address POU NENG LEI P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,689.62
3.123 0	Nonpriority creditor's name and mailing address PRINCE JOE MANZANO PO BOX 10001 PMB 97 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81.75
3.123 1	Nonpriority creditor's name and mailing address PRINCESS GRACE MULLIGAN PO Box 10000 PMB 420 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$418.56
3.123 2	Nonpriority creditor's name and mailing address PRINCESS MALONZO PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$766.28
3.123 3	Nonpriority creditor's name and mailing address Prominent Trading (Dalian) Co., Ltd No. 14-B Liaohexisan Rd Dalian Economic and Technical Developmen 116600 Dailian China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51,262.00

Debtor **Imperial Pacific International (CNMI), LLC**
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3.123 4	Nonpriority creditor's name and mailing address Proper Grand (CNMI) LLC PMB 895 Box 10001 Saipan, MP 96950 Date(s) 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: Funds advanced Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,310,000.00
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3.123 5	Nonpriority creditor's name and mailing address PUREVBAATAR GANTULGA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
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3.123 6	Nonpriority creditor's name and mailing address PUREVDAVGA MUNKH-ERDENE c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
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3.123 7	Nonpriority creditor's name and mailing address Purevdemberel Bat-Ochir P.O. Box 10000 PMB 918 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.123 8	Nonpriority creditor's name and mailing address PUREVNYAM JAVZMAA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
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3.123 9	Nonpriority creditor's name and mailing address Puyang Construction Corporation PMB 181 BOX 10003 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,832.60
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3.124 0	Nonpriority creditor's name and mailing address QI-SHENG LIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,388.18
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.124 1	Nonpriority creditor's name and mailing address QIANG YANG PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.124 2	Nonpriority creditor's name and mailing address QING GONG PMB 706 PPP BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$185.03
3.124 3	Nonpriority creditor's name and mailing address Qingdao Jieshi Chuang International Trad Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,227.74
3.124 4	Nonpriority creditor's name and mailing address QINGJUN GU PMB 241 PPP BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,042.18
3.124 5	Nonpriority creditor's name and mailing address QIUMEI REN PO BOX 501716 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$939.22
3.124 6	Nonpriority creditor's name and mailing address QIUPING WAKI PO BOX 500077 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.124 7	Nonpriority creditor's name and mailing address Quality Water, Inc. Unit 201 SCS Bldg. Beach Road Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,890.00

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.124 8	Nonpriority creditor's name and mailing address RACHEL ANN BANGOT P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18.44
3.124 9	Nonpriority creditor's name and mailing address RACHEL REGONDOLA PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,375.33
3.125 0	Nonpriority creditor's name and mailing address RALPH JASON MANICAD PO BOX 501029 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$590.23
3.125 1	Nonpriority creditor's name and mailing address RALPH SURLA PO BOX 506215 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$91.00
3.125 2	Nonpriority creditor's name and mailing address RAMAZAN ATASOY c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$834.99
3.125 3	Nonpriority creditor's name and mailing address RAMAZAN TEK TEN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$834.99
3.125 4	Nonpriority creditor's name and mailing address RAMON DACOME PO BOX 505575 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,421.71

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.125 5	Nonpriority creditor's name and mailing address RAMON HERRERA JR PO BOX 506570 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,062.63
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3.125 6	Nonpriority creditor's name and mailing address RAMON L DACOME c/o YWA Human Resources Corporation 1268 Gen. Luna Street Ermita Manila Manila, 1000 Philippines Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.125 7	Nonpriority creditor's name and mailing address RAQUEL CUMMAH PO Box 505274 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$261.21
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3.125 8	Nonpriority creditor's name and mailing address RAQUEL JACOB P.O. Box 8252 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$248.72
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3.125 9	Nonpriority creditor's name and mailing address RAYMART MALASAGA PO Box 100003 PMB 1172 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$628.08
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3.126 0	Nonpriority creditor's name and mailing address RAYMOND PETER CABRERA PO Box 502098 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$344.06
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3.126 1	Nonpriority creditor's name and mailing address RC LLC Manpower and Consulting Services P.O. Box 5788 CHRB Saipan, MP 96950 Date(s) 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>Balance of Default Judgment in CNMI Superior Court</u> <u>Case No. 20-0356-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$46,988.16
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.126 2	Nonpriority creditor's name and mailing address Red Chamber Cigar Divan Flat/Rm 405B 4/F Pedder Building 12 Pedder Street Central Hong Kong Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.126 3	Nonpriority creditor's name and mailing address REDIE DELA CRUZ P.O. BOX 5784 CHRB SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.126 4	Nonpriority creditor's name and mailing address Redie Dela Cruz PO Box 918 PMB 10000 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.126 5	Nonpriority creditor's name and mailing address RedRock Software, LLC 10120 W. Flamingo Rd. Ste 4-348 Las Vegas, NV 89147 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,000.00
3.126 6	Nonpriority creditor's name and mailing address Refinitiv Limited 18/F ICBC Tower 3 Garden Road Central Hong Kong, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,026.00
3.126 7	Nonpriority creditor's name and mailing address REGINO CELIS P.O. BOX 500526 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,670.04
3.126 8	Nonpriority creditor's name and mailing address RELINA RIPIS P.O. BOX 5456 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$351.01

Debtor **Imperial Pacific International (CNMI), LLC**
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3.126 9	Nonpriority creditor's name and mailing address REMEDIO MAFNAS PO Box 5081 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$191.88
3.127 0	Nonpriority creditor's name and mailing address REMEGIO GUARDIAN PO Box 504788 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$154.54
3.127 1	Nonpriority creditor's name and mailing address Remy Concord Limited Room 2101-02, No. 148 Electric Road North Point, Hong Kong, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$25,991.97
3.127 2	Nonpriority creditor's name and mailing address RENEE ACOSTA PO BOX 10002 PMB 2502 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.127 3	Nonpriority creditor's name and mailing address RENWICK SOLOMON PO BOX 506412 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$51.32
3.127 4	Nonpriority creditor's name and mailing address RESUL CAKADAS c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.127 5	Nonpriority creditor's name and mailing address REY BUCASAS PO Box 10003 PMB 763 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$326.07

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.127 6	Nonpriority creditor's name and mailing address REYNALDO GUEVARRA PO BOX 505930 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.127 7	Nonpriority creditor's name and mailing address RICARDO BRIEN PO BOX 502213 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$167.87
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3.127 8	Nonpriority creditor's name and mailing address RICHARD ALLAN SANTOS PO Box 503466 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$57.00
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3.127 9	Nonpriority creditor's name and mailing address RICK BANGOT P.O. BOX 506673 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$296.57
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3.128 0	Nonpriority creditor's name and mailing address RIDVAN KURUCU c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
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3.128 1	Nonpriority creditor's name and mailing address Rionda Company Limited PMB 313 Box 10002 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.128 2	Nonpriority creditor's name and mailing address Rionda Company Limited PMB 464 Box 10003 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.128 3	Nonpriority creditor's name and mailing address Ritz Enterprises Inc. dba CCC Mail P.O. Box 10003 PMB 682 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.128 4	Nonpriority creditor's name and mailing address RIZZA JOY MORALES PO BOX 10003 PMB 487 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,483.37
3.128 5	Nonpriority creditor's name and mailing address RODALYN NOMURA PMB 103 BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$553.83
3.128 6	Nonpriority creditor's name and mailing address RODOLFO JR. MANTO P.O. BOX 10003 PMB 783 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,995.76
3.128 7	Nonpriority creditor's name and mailing address ROGER HERNANDEZ P.O. BOX 501011 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$456.85
3.128 8	Nonpriority creditor's name and mailing address ROGER PICH PO BOX 10000 PMB 1007 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.128 9	Nonpriority creditor's name and mailing address ROLANDO DELA CRUZ PO BOX 505468 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$576.37

Debtor **Imperial Pacific International (CNMI), LLC**
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3.129 0	Nonpriority creditor's name and mailing address ROLANDO MACLANG PO Box 503244 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$480.62
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3.129 1	Nonpriority creditor's name and mailing address ROLANDO VICENCIO PO BOX 3983 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,357.34
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3.129 2	Nonpriority creditor's name and mailing address ROLEX TOCA PO BOX 10001 PMB 447 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$368.77
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3.129 3	Nonpriority creditor's name and mailing address ROMAN REYES PO BOX 500413 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$444.48
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3.129 4	Nonpriority creditor's name and mailing address ROMELA CARBONEL P.O. BOX 10000 PMB 433 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$423.98
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3.129 5	Nonpriority creditor's name and mailing address ROMUALDO ALEGRE P.O. BOX 504482 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$212.70
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3.129 6	Nonpriority creditor's name and mailing address RONALD CHISATO PO BOX 8071 SVRB DANDAN SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$957.46
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3.129 7	Nonpriority creditor's name and mailing address RONALD ESMORES P.O. BOX 503211 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$826.43
3.129 8	Nonpriority creditor's name and mailing address Rong Hua Corporation PMB 698 Box 10003 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.129 9	Nonpriority creditor's name and mailing address RONGKUN XIAO P.O. BOX 502081 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.130 0	Nonpriority creditor's name and mailing address RONIKKO JUDE GIANAN PO Box 10005 PMB 1556 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.130 1	Nonpriority creditor's name and mailing address RONNIE GUEVARRA PO BOX 504677 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,468.06
3.130 2	Nonpriority creditor's name and mailing address ROSALINDA PERJE P.O. BOX 505814 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$935.97
3.130 3	Nonpriority creditor's name and mailing address ROSIE ACERA PMB 593 BOX 10003 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30.42

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3.130 4	Nonpriority creditor's name and mailing address RS Components Ltd. 7151 Jack Newell Blvd S Fort Worth, TX 76118 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$530.20
3.130 5	Nonpriority creditor's name and mailing address RTA Shipping Co., Ltd 21st Floor, Unit 02, Allied Commercial B Hong Kong, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$190,012.91
3.130 6	Nonpriority creditor's name and mailing address RUBEN GARDE P.O. BOX 505887 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,048.82
3.130 7	Nonpriority creditor's name and mailing address RUDYLEN MISLANG PO BOX 10003 PMB 79 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,482.81
3.130 8	Nonpriority creditor's name and mailing address RUEBEN OLGERIIL PO BOX 501843 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$770.57
3.130 9	Nonpriority creditor's name and mailing address RUEL SEALEY PO BOX 503417 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,571.24
3.131 0	Nonpriority creditor's name and mailing address RUI JIN TRADING CORP. dba HOLIDAY TOUR PMB 464 Box 10003 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70.00

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3.131 1	Nonpriority creditor's name and mailing address RUMINA LITULUMAR PO BOX 10003 PMB 614 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$542.64
3.131 2	Nonpriority creditor's name and mailing address RUVI COLOBONG P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.44
3.131 3	Nonpriority creditor's name and mailing address RVM Enterprises Inc. 525 Washington Blvd. Suite 910 Jersey City, NJ 07310 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.131 4	Nonpriority creditor's name and mailing address RYAN SALAMANTE P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,186.73
3.131 5	Nonpriority creditor's name and mailing address S.P.E. (Saipan) Inc PO BOX 502696 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$231.40
3.131 6	Nonpriority creditor's name and mailing address S.U.I. Corporation dba LJ Catering PMB 167 Box 10003 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.131 7	Nonpriority creditor's name and mailing address SABAN ASLAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$801.10

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3.131 8	Nonpriority creditor's name and mailing address SABRINA LIMES P.O. BOX 501735 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$96.51
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3.131 9	Nonpriority creditor's name and mailing address Safety 1st Systems CNMI, Inc. P.O. Box 504673 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,560.00
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3.132 0	Nonpriority creditor's name and mailing address Saint Trading Co., Inc. P.O. Box 504330 CK Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,147.00
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3.132 1	Nonpriority creditor's name and mailing address Saipan Dream Corporation P.O. Box 506161 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$300,000.00
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3.132 2	Nonpriority creditor's name and mailing address Saipan Garden Manor, Inc. P.O. Box 10001 PMB 918 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.132 3	Nonpriority creditor's name and mailing address Saipan Ice & Water Company Inc. P.O. Box 501808 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,110.62
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3.132 4	Nonpriority creditor's name and mailing address Saipan Laulau Development, Inc. PMB 1020 P.O. Box 10000 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,204.00
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3.132 5	Nonpriority creditor's name and mailing address Saipan Shrimp, LLC P.O. Box 500487 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.132 6	Nonpriority creditor's name and mailing address Saipan Stevedore Company P.O. Box 500208 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$696.74
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3.132 7	Nonpriority creditor's name and mailing address Saipan Tribune PMB 34 BOX 10001 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$180.00
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3.132 8	Nonpriority creditor's name and mailing address SAKIN POLAT c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91
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3.132 9	Nonpriority creditor's name and mailing address SALVATORE DI MARTINO via Pasquale Scandurra n.4 Siracusa 96100 Siracusa (SR) Italy Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,328.40
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3.133 0	Nonpriority creditor's name and mailing address Salvatore Giarratana PO Box 10000 PMB 918 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$357.32
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3.133 1	Nonpriority creditor's name and mailing address SALVATORE INTAGLIATA c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.133 2	Nonpriority creditor's name and mailing address SALVATORE MODESTO via Piave n. 22 Solarino 96010 Siracusa (SR) Italy Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$858.96
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3.133 3	Nonpriority creditor's name and mailing address Salvatore Schifitto PO Box 10000 PMB 918 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,114.37
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3.133 4	Nonpriority creditor's name and mailing address Sam Corp Imports & Wholesale PO BOX 502429 CK CHALAN KIYA INDUSTRIAL PARK WAREHOUSE 5A SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,322.73
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3.133 5	Nonpriority creditor's name and mailing address SAMANTHA ADERWANGEL PO BOX 504493 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$183.73
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3.133 6	Nonpriority creditor's name and mailing address SAMDANJAMTS PUREVKHUU c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.133 7	Nonpriority creditor's name and mailing address Sanmen Baolong Plastic Co., Ltd Jinhuyang Dev. Zone Gaojian Countryside, Sanmen County Zhejiang 317102, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,285.75
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.133 8	Nonpriority creditor's name and mailing address SANTIAGO CONCEPCION PO Box 500881 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$288.16
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3.133 9	Nonpriority creditor's name and mailing address SARAH LYNN KAPILEO PO Box 7741 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$444.05
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3.134 0	Nonpriority creditor's name and mailing address SARUUL GANBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,109.21
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3.134 1	Nonpriority creditor's name and mailing address SARUUL KHAYAN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.134 2	Nonpriority creditor's name and mailing address SARUULBUYAN MUNKHTUR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
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3.134 3	Nonpriority creditor's name and mailing address Scoggins Law Office, LLC PO Box 501127 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.134 4	Nonpriority creditor's name and mailing address Sea-Lago Inc. PMB 215 PPP Box 10000 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$290.80
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Debtor	Imperial Pacific International (CNMI), LLC <small>Name</small>	Case number (if known)	24-00002
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3.134
5

Nonpriority creditor's name and mailing address
SEBASTIANO MODICA
via Guiseppe Verdi n. 101
96010 Solarino (SR)
Italy
 Date(s) debt was incurred __
 Last 4 digits of account number __

As of the petition filing date, the claim is: *Check all that apply.* **\$4,243.33**

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Accrued Leave**
 Is the claim subject to offset? ☒ No ☐ Yes

3.134
6

Nonpriority creditor's name and mailing address
SEBASTIANO NICOTRA
via Parma n.32
Melilli 96010 Siracusa (SR)
Italy
 Date(s) debt was incurred __
 Last 4 digits of account number __

As of the petition filing date, the claim is: *Check all that apply.* **\$881.14**

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Accrued Leave**
 Is the claim subject to offset? ☒ No ☐ Yes

3.134
7

Nonpriority creditor's name and mailing address
Security Title, Inc.
PO Box 5049
Saipan, MP 96950
 Date(s) debt was incurred __
 Last 4 digits of account number __

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: __
 Is the claim subject to offset? ☒ No ☐ Yes

3.134
8

Nonpriority creditor's name and mailing address
SEN-WEI LAI
PO Box 10003 PMB 84
SAIPAN, MP 96950
 Date(s) debt was incurred __
 Last 4 digits of account number __

As of the petition filing date, the claim is: *Check all that apply.* **\$4,193.48**

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Accrued Leave**
 Is the claim subject to offset? ☒ No ☐ Yes

3.134
9

Nonpriority creditor's name and mailing address
SENG YIK LIM
PO BOX 10000 PMB 676
SAIPAN, MP 96950
 Date(s) debt was incurred __
 Last 4 digits of account number __

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: __
 Is the claim subject to offset? ☒ No ☐ Yes

3.135
0

Nonpriority creditor's name and mailing address
SENL BARUT
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey
 Date(s) debt was incurred __
 Last 4 digits of account number __

As of the petition filing date, the claim is: *Check all that apply.* **\$0.00**

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: __
 Is the claim subject to offset? ☒ No ☐ Yes

3.135
1

Nonpriority creditor's name and mailing address
SERGIO LANCE AQUINO
PO Box 505340
SAIPAN, MP 96950
 Date(s) debt was incurred __
 Last 4 digits of account number __

As of the petition filing date, the claim is: *Check all that apply.* **\$271.22**

☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Accrued Leave**
 Is the claim subject to offset? ☒ No ☐ Yes

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.135 2	Nonpriority creditor's name and mailing address SERJ DAMDINDORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
3.135 3	Nonpriority creditor's name and mailing address SERLIDA FRED RAHMAN PO BOX 10005 PMB 96 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$511.51
3.135 4	Nonpriority creditor's name and mailing address SEZAI KAYA c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$816.55
3.135 5	Nonpriority creditor's name and mailing address SG Gaming Asia Limited Rm B 1/F Edif da CAM, Taipa Macau, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$66,092.00
3.135 6	Nonpriority creditor's name and mailing address SHANGHAI RM 1401, NO.33, LN 535, BAODI RD, BAOSHAN DISTRICT FAJIAN WU Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.135 7	Nonpriority creditor's name and mailing address Shanghai Beamfor Commercial & Trading Co Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,726.09
3.135 8	Nonpriority creditor's name and mailing address Shanghai Byron International Trade Co., Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,327.81

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.136 9	Nonpriority creditor's name and mailing address Shanghai Easywei M & E Equipment Co., Lt Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,558.25
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3.136 0	Nonpriority creditor's name and mailing address Shanghai Guqiang Electric Complement Co. Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$162,805.58
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3.136 1	Nonpriority creditor's name and mailing address Shanghai Jiuzhou International Co., Ltd 1st Fl, Bldg C, Yunlizhi Valley No. 9, Xincun Ave, Xuexiang Garden Bantian St, Longgang District, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$124,006.30
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3.136 2	Nonpriority creditor's name and mailing address Shanghai Junao International Trade Co., Rm B686 No. 659, Maoyuan Rd Fengxian District, Shanghai, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,457.18
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3.136 3	Nonpriority creditor's name and mailing address Shanghai Lancy Industrial Equipment Co., Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$335,983.36
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3.136 4	Nonpriority creditor's name and mailing address Shanghai SINO International Trade Co. Lt RM1403-1407 GUIDE BLDG, CHUNFENG RD 14/F Shenzhen, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,312.44
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3.136 5	Nonpriority creditor's name and mailing address Shanghai Sirun International Trade Co., Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,859.54
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.136 6	Nonpriority creditor's name and mailing address Shanghai Taiyo Kogyo Co., Ltd Rm 910-911, ShengYuanHengHua Build No. 200 WenDing Rd, Shanghai China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
3.136 7	Nonpriority creditor's name and mailing address Shanghai Tan Yao Industrial Co., Ltd Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$125,321.70
3.136 8	Nonpriority creditor's name and mailing address SHAO-FU LIU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,229.47
3.136 9	Nonpriority creditor's name and mailing address SHARJU KC PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,224.62
3.137 0	Nonpriority creditor's name and mailing address SHARMAINE ROSE ALARZAR PO Box 503210 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.70
3.137 1	Nonpriority creditor's name and mailing address SHARON JOANNA PALACIOS PO BOX 5563 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$530.32
3.137 2	Nonpriority creditor's name and mailing address Shawn M. Davis P.O. Box 501611 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.137 3	Nonpriority creditor's name and mailing address Sheau Chyn Tang PO BOX 10000 PMB 918 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,834.14
3.137 4	Nonpriority creditor's name and mailing address SHEAU TANG PMB 1294 PPP BOX 10003 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.137 5	Nonpriority creditor's name and mailing address SHENG-CHI WU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,959.85
3.137 6	Nonpriority creditor's name and mailing address SHENG-CHIEH YANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,276.95
3.137 7	Nonpriority creditor's name and mailing address SHENGLI ZI Pmb 242 Ppp Box 10000 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.137 8	Nonpriority creditor's name and mailing address SHENNET NUESTRO 224 Banaba Cerca Indang Cavite Manila Philippines Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$199.91
3.137 9	Nonpriority creditor's name and mailing address Shenzhen Zhanpengxing Hardware Machinery Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,760.68

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.138 0	Nonpriority creditor's name and mailing address SHERYL SIAPNO PO Box 10000 PMB 565 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.138 1	Nonpriority creditor's name and mailing address Sheu's Brothers Holding Company Ltd. P.O. Box 502997 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$192.00
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3.138 2	Nonpriority creditor's name and mailing address SHIELA BALLESTEROS PMB 346 PO BOX 10003 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$225.09
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3.138 3	Nonpriority creditor's name and mailing address SHIELA REANO P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,995.83
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3.138 4	Nonpriority creditor's name and mailing address SHIH-TSUNG LAI PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,060.75
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3.138 5	Nonpriority creditor's name and mailing address SHILEGBAT GANBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.138 6	Nonpriority creditor's name and mailing address SHIRLEY OLIVOS PMB 436 BOX 10001 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$256.27
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.138 7	Nonpriority creditor's name and mailing address Shixin International Human Resources Co. Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$43,500.65
3.138 8	Nonpriority creditor's name and mailing address Shiyan Qi Jing Industry & Trading Co., L No. 7098, Fuqiao Area, Auto Plaza Bailang, Shiyan, Hubei CHINA Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$762.00
3.138 9	Nonpriority creditor's name and mailing address SHU-MING HSU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$811.80
3.139 0	Nonpriority creditor's name and mailing address SHUEN-DAU LEE PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.139 1	Nonpriority creditor's name and mailing address Shun Lin Zeng PMB 385 Box 10001 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.139 2	Nonpriority creditor's name and mailing address SHUN-TANG LIANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$829.47
3.139 3	Nonpriority creditor's name and mailing address SHUN-TSAI CHANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45

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3.139 4	Nonpriority creditor's name and mailing address SHUNLIANG ZHU P.O. BOX 10003 PMB 768 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,947.70
3.139 5	Nonpriority creditor's name and mailing address SIAW LING YOONG PO Box 10000 PMB 719 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,811.75
3.139 6	Nonpriority creditor's name and mailing address Sicis HK Limited Unit D, 24/F Tai Yau Bldg 181 Johnston Rd Wan Chai, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,239.00
3.139 7	Nonpriority creditor's name and mailing address SIMIN CHEN PO Box 503862 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,467.88
3.139 8	Nonpriority creditor's name and mailing address SIMON FITIAL P.O. BOX 501824 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.139 9	Nonpriority creditor's name and mailing address SIMONA HETIBACK P.O. BOX 504565 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$320.71
3.140 0	Nonpriority creditor's name and mailing address SINDALEEN SHINEACHI PO BOX 501246 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$640.89

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3.140 1	Nonpriority creditor's name and mailing address Sino Champ Development Limited Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$11,595.27 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.140 2	Nonpriority creditor's name and mailing address Sino Essence (CNMI), LLC Olibas Building, 2nd Floor, Office 33 Garapan, SA 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,257,072.30 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Personal Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.140 3	Nonpriority creditor's name and mailing address Sinovel Trading Ltd 17/F, 80 Gloucester Road Wanchai, Hong Kong Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$153,298.80 <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.140 4	Nonpriority creditor's name and mailing address Sitong Corporation PMB 1483 P.O. Box 10002 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.140 5	Nonpriority creditor's name and mailing address SOD-ERDENE NERGUI c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$1,146.20 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.140 6	Nonpriority creditor's name and mailing address SOFIA SARIA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$253.96 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.140 7	Nonpriority creditor's name and mailing address SoftwareOne Hong Kong Limited Unit A, 28/F, TG Place, 10 Shing Yip St Kwun Tong, Hong Kong Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$0.00 <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
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3.140 8	Nonpriority creditor's name and mailing address SONGKUK PAK c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.140 9	Nonpriority creditor's name and mailing address SONGSAK KAEWPRATHUM 140 Moo 7 Bannoaduan,Mueanakae SubDist. Satuek District Buriran Province 31150 Thailand Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$613.15
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3.141 0	Nonpriority creditor's name and mailing address SONGZHEN LIU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.141 1	Nonpriority creditor's name and mailing address SONORA CRUZ PO Box 502153 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$145.46
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3.141 2	Nonpriority creditor's name and mailing address South Pacific Galaxy Corp. P.O. Box 501030 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,140.00
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3.141 3	Nonpriority creditor's name and mailing address South Pacific Lumber Company PO BOX 5812 CHRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.141 4	Nonpriority creditor's name and mailing address Spectrum Saipan Development Corporation Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,990.00
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3.141 5	Nonpriority creditor's name and mailing address Sponge Cushion, Inc 902 Armstrong St Morris, IL 60450 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,229.00
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3.141 6	Nonpriority creditor's name and mailing address Star Marianas Air P.O. Box 500150 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.141 7	Nonpriority creditor's name and mailing address Steelman Partners LLP lameda Dr. Carlos D'Assumpcao No. 336-34 Macao, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$347,500.00
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3.141 8	Nonpriority creditor's name and mailing address Steven P. Pixley, Esq. Client Trust PO Box 501280 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.141 9	Nonpriority creditor's name and mailing address SUKHBAATAR LUVSANDORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
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3.142 0	Nonpriority creditor's name and mailing address SUKHEE TSEVEGDORJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,146.20
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3.142 1	Nonpriority creditor's name and mailing address SULEYMAN KOS c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91
3.142 2	Nonpriority creditor's name and mailing address SUMIYABEES TSERENBANDI c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.142 3	Nonpriority creditor's name and mailing address Sun & Surf Limited P.O Box 5779 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,913.22
3.142 4	Nonpriority creditor's name and mailing address Sunshine Corporation P.O.BOX 503541 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,675.50
3.142 5	Nonpriority creditor's name and mailing address SUNSHINE DELACRUZ PMB 918 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$910.32
3.142 6	Nonpriority creditor's name and mailing address Superhub Limited 12/F Wong Tze Bldg 71 Hoi Yuen Rd, Kwun Tong , Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$201.92
3.142 7	Nonpriority creditor's name and mailing address SUSAN LIEW PO BOX 10003 PMB 807 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.142 8	Nonpriority creditor's name and mailing address SUXIA ZHU P.O. BOX 505182 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$361.95
3.142 9	Nonpriority creditor's name and mailing address Suzhou ESA Electrical technology Co. Ltd No. 1700, Loujiang Rd Suzhou Sip, Suzhou Jiangsu, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$38,443.00
3.143 0	Nonpriority creditor's name and mailing address SYLVAN ATALIG PO BOX 506103 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$211.20
3.143 1	Nonpriority creditor's name and mailing address SYLVESTER TERRY PO BOX 7228 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$695.50
3.143 2	Nonpriority creditor's name and mailing address TA-CHENG FAN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,812.20
3.143 3	Nonpriority creditor's name and mailing address TAI-LIANG CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,408.77
3.143 4	Nonpriority creditor's name and mailing address TakeCare Insurance Company, Inc. PO Box 500118 Saipan, MP 96950 Date(s) 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>Default Judgment</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$219,491.50

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3.143 5	Nonpriority creditor's name and mailing address Tang Sheau Chyn PO Box 10000 PMB 918 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.143 6	Nonpriority creditor's name and mailing address Tang's Corporation c/o Scoggins Law Office P.O. Box 501127 Saipan, MP 96950 Date(s) 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>Balnce of Judgment in Tang's Corp. v. IPI (CNMI) LLC, District Court of NMI Case No. 20-CV-0006</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$166,388.91
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3.143 7	Nonpriority creditor's name and mailing address Tao Xing PMB 122 Box 10000 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,479.29
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3.143 8	Nonpriority creditor's name and mailing address Taotao Marianas Inc. P.O. Box 504339 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$160.00
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3.143 9	Nonpriority creditor's name and mailing address TAT CHOI P.O. BOX 10002 PMB 579 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,165.74
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3.144 0	Nonpriority creditor's name and mailing address TE-CHI LIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$673.51
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3.144 1	Nonpriority creditor's name and mailing address TE-HUNG LEE PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$492.25
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Debtor **Imperial Pacific International (CNMI), LLC**
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3.144 2	Nonpriority creditor's name and mailing address Team Advance Group, Inc. P.O. Box 506234 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$395.00
3.144 3	Nonpriority creditor's name and mailing address Tech Evo 545 Chalan San Antonio Core Pacific Bus Tamuning, GU 96913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$564.51
3.144 4	Nonpriority creditor's name and mailing address TENG-AN LIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,376.70
3.144 5	Nonpriority creditor's name and mailing address TENG-YUAN CHAN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.144 6	Nonpriority creditor's name and mailing address TEODORO RUBEN PO BOX 504811 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$656.41
3.144 7	Nonpriority creditor's name and mailing address TERESA FALRUW P.O. BOX 501053 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$164.56
3.144 8	Nonpriority creditor's name and mailing address TERSON JASON EINA P.O. BOX 505450 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$172.15

Debtor **Imperial Pacific International (CNMI), LLC**
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3.144 9	Nonpriority creditor's name and mailing address TEVFIK B ENGUR c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$710.33
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3.145 0	Nonpriority creditor's name and mailing address The Factory Group Ltd 60 West 57th St, Fl 6, Ste D New York, NY 10019 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,269.90
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3.145 1	Nonpriority creditor's name and mailing address The Home Depot Store 1710, 295 Chalan Pasaheru Tamuning, GU 96913 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.145 2	Nonpriority creditor's name and mailing address THOMAS MUNA PO BOX 501427 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$364.63
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3.145 3	Nonpriority creditor's name and mailing address Thomson Reuters West Payment Center P.O. Box 6292 Carol Stream, IL 60197-6292 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,695.00
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3.145 4	Nonpriority creditor's name and mailing address Tianjin First Moon Co., Ltd Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,863.60
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3.145 5	Nonpriority creditor's name and mailing address TIK KI POON P.O. BOX 10000 PMB 676 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$6,903.51
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.145 6	Nonpriority creditor's name and mailing address Timothy Bellas Trust Account P.O. Box 502845 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$123,557.62
3.145 7	Nonpriority creditor's name and mailing address Timothy Bellas Trust Account P.O. Box 500041 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.145 8	Nonpriority creditor's name and mailing address TING-YUAN HU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,084.85
3.145 9	Nonpriority creditor's name and mailing address TOMMY DELA CRUZ P.O. Box 504864 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$772.83
3.146 0	Nonpriority creditor's name and mailing address TONY NG P.O. BOX 10001 PMB 915 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$481.43
3.146 1	Nonpriority creditor's name and mailing address Total Chemical Resources, Inc. PO Box 20730 GMF Barrigada, GU 96921 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.146 2	Nonpriority creditor's name and mailing address Tradewinds Duct Cleaners 258 LAGUINA CIRCLE Yona, GU 96915-4926 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,520.00

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3.146 3	Nonpriority creditor's name and mailing address Transamerica Corporation PO BOX 501579 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70,000.00
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3.146 4	Nonpriority creditor's name and mailing address TransPacific Insurance Brokers 138 Martyr Street Hagatna, GU 96910 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$190,894.00
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3.146 5	Nonpriority creditor's name and mailing address Treasurer of CNMI P.O. Box 5234 CHRB Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Casino License Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$62,010,280.00
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3.146 6	Nonpriority creditor's name and mailing address TRESY SUDA PO BOX 7540 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$207.90
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3.146 7	Nonpriority creditor's name and mailing address Triple B Forwarders (CNMI), Inc PO Box 501928 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,379.20
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3.146 8	Nonpriority creditor's name and mailing address Triple J Five Star Wholesale Foods, P.O. Box 500487 Saipan, MP 96950 Date(s) 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>Goods provided</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,596.27
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3.146 9	Nonpriority creditor's name and mailing address Triple J Rentals (Micronesia), Inc P.O. Box 500487 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.147 0	Nonpriority creditor's name and mailing address Tropical Gardens Inc. P.O. Box 500041 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,600.00
3.147 1	Nonpriority creditor's name and mailing address TSAI-TZU CHENG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
3.147 2	Nonpriority creditor's name and mailing address TSEND-AYUSH BOLD c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.147 3	Nonpriority creditor's name and mailing address TSEND-AYUSH OTGONSUREN c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
3.147 4	Nonpriority creditor's name and mailing address TSENG-LUNG LEE PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,430.14
3.147 5	Nonpriority creditor's name and mailing address TSERENTOGTOKH JARGAL c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
3.147 6	Nonpriority creditor's name and mailing address TSEVELMAA MIJID c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$92.34

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3.147 7	Nonpriority creditor's name and mailing address TSUNG-LING HUNG No.2 Pingqu Rd. Dacheng Township Changhua City Taiwan 527001 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,891.25
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3.147 8	Nonpriority creditor's name and mailing address TSUNG-LUN TSAI PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
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3.147 9	Nonpriority creditor's name and mailing address TUMENBAYAR TSENDJAV c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.148 0	Nonpriority creditor's name and mailing address TUMENTSOGT BATTSOOJ c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.148 1	Nonpriority creditor's name and mailing address TUMUR YUKA c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,066.08
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3.148 2	Nonpriority creditor's name and mailing address TUNCAY YARBASI c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$834.99
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.148 3	Nonpriority creditor's name and mailing address Tung Tai Company No. 20, Ln 819, Sec. 3 Zhongqing Rd, Daya District Taichung City 428 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$575.95
3.148 4	Nonpriority creditor's name and mailing address TUNG-YI SU No 11-1 S.T.Y., Zhongzhu Rd. Yanchao Dist. Kaohsiung City Taiwan (ROC) 824 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,209.92
3.148 5	Nonpriority creditor's name and mailing address TURGAY CAKAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.148 6	Nonpriority creditor's name and mailing address Two Hong Coporation dba Jang Gun PMB 779 P.O. Box 10005 Kwun Tong, KLN Hong Kong Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.148 7	Nonpriority creditor's name and mailing address Two Hong Coporation dba Jang Gun 12B, Wing Cheung Ind Bldg 109 How Ming S Kwun Tong, KLN Hong Kong Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.148 8	Nonpriority creditor's name and mailing address TYRON JOE ONGELUNGEL PO Box 501734 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.148 9	Nonpriority creditor's name and mailing address TZU-HUNG HSU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,377.83

Debtor **Imperial Pacific International (CNMI), LLC**
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3.149 0	Nonpriority creditor's name and mailing address TZU-JUN LIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.149 1	Nonpriority creditor's name and mailing address TZU-TING WU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
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3.149 2	Nonpriority creditor's name and mailing address U.S. Department of Homeland Security PMB 999 Box 10001 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.149 3	Nonpriority creditor's name and mailing address U.S. Department of Homeland Security P.O. Box 501220 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.149 4	Nonpriority creditor's name and mailing address U.S. Department of Justice, Civil Divisi 450 Golden Gate Ave, Room 7-5395 P.O. Box 36028 San Francisco, CA 94102 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Damages claim</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,460,545.00
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3.149 5	Nonpriority creditor's name and mailing address U.S. Department of Labor, Wage & Hour Di U.S. District Courthouse Bldg. 520 W. Soledad Ave., #101 Hagatna, GU 96910-4950 Date(s) 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>Balance due under Stipulated Judgment [USDOL v. IPI CNMI, LLC , 19-CV-00007]</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$950,000.00
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Debtor **Imperial Pacific International (CNMI), LLC**
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3.149 6	Nonpriority creditor's name and mailing address U.S. Department of the Treasury-Coast PO BOX 5234 CHRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$91,589.67
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3.149 7	Nonpriority creditor's name and mailing address UCHRAL BATJARGAL c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,081.48
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3.149 8	Nonpriority creditor's name and mailing address UCHRAKHUU BATBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.149 9	Nonpriority creditor's name and mailing address ULAMBAYAR GANKHULUG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,081.48
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3.150 0	Nonpriority creditor's name and mailing address United International Corporation P.O. Box 500689 Saipan, MP 96950 Date(s) 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>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.150 1	Nonpriority creditor's name and mailing address UNURBAT UNURTSETSEG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$995.21
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3.150 2	Nonpriority creditor's name and mailing address URANCHIMEG ULZII BAYAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$499.15
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.150 3	Nonpriority creditor's name and mailing address URTBUYAR JARGAL c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.150 4	Nonpriority creditor's name and mailing address USA Fanter Corp. Ltd. PMB 1372 P.O. Box 10003 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Balance of judgments issued in District Court of NMI, Civil No. 1-20-CV-0005 and Civil No. 1-21-CV-0035</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$652,024.07
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3.150 5	Nonpriority creditor's name and mailing address UUGANBAT TUMURBAATAR c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,039.33
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3.150 6	Nonpriority creditor's name and mailing address UUGANBAYAR BOLD c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,103.08
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3.150 7	Nonpriority creditor's name and mailing address UUGANBAYAR GANKHUYAG c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,124.66
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3.150 8	Nonpriority creditor's name and mailing address UZEYIR KARAOGLAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.150 9	Nonpriority creditor's name and mailing address VANESSA CAMACHO P.O. BOX 500504 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$316.22
3.151 0	Nonpriority creditor's name and mailing address VANESSA FE FITIAL P.O. BOX 502196 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,076.50
3.151 1	Nonpriority creditor's name and mailing address VENUS ANGELIC RAGUINE P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$175.50
3.151 2	Nonpriority creditor's name and mailing address VERNANDITAS THOMAS P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,639.57
3.151 3	Nonpriority creditor's name and mailing address VICENTE DELEON GUERRERO PO Box 506425 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.151 4	Nonpriority creditor's name and mailing address VICENTE DUENAS P.O. BOX 501011 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,643.63
3.151 5	Nonpriority creditor's name and mailing address Vicente F. Sablan Jr. PO BOX 10005 Saipan, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$622.35

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3.151 6	Nonpriority creditor's name and mailing address Vicente I. Duenas P.O. Box 505360 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.151 7	Nonpriority creditor's name and mailing address VICENTE NORITA PO Box 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$939.22
3.151 8	Nonpriority creditor's name and mailing address VICTORIA PARAN PO Box 5060 CHRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$159.20
3.151 9	Nonpriority creditor's name and mailing address Vienna Corporation PMB 238 PPP Box 10000 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.152 0	Nonpriority creditor's name and mailing address VINCE AL-BER TERRY PO BOX 7228 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$41.65
3.152 1	Nonpriority creditor's name and mailing address VINCENT KING PO BOX 7979 SVRB SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$484.51
3.152 2	Nonpriority creditor's name and mailing address VINCENT NGESKEBEI P.O. BOX 501237 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40.86

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3.152 3	Nonpriority creditor's name and mailing address VINCENT THOMAS AGULTO PO BOX 503326 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$59.05
3.152 4	Nonpriority creditor's name and mailing address VINSON DELEON GUERRERO PO BOX 501086 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$143.50
3.152 5	Nonpriority creditor's name and mailing address VIPUL KAPOOR PMB 561 PPP BOX 10003 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.152 6	Nonpriority creditor's name and mailing address VLADIMIR FEDEREZ PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,935.32
3.152 7	Nonpriority creditor's name and mailing address Volkan Koymen PO Box 10003 PMB 84 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$81,361.60
3.152 8	Nonpriority creditor's name and mailing address W & Z Corporation P.O. Box 501666 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.152 9	Nonpriority creditor's name and mailing address W.W. Grainger, Inc. 100 Grainger Parkway Lake Forest, IL 60045-5201 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,420.88

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3.153 0	Nonpriority creditor's name and mailing address Wah Fong Tea Company Limited Hong Kong Industrial Bldg Unit C&D 18/F, 444-452 Des Voeux Rd W Sai Ying Pun, Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$252.27
3.153 1	Nonpriority creditor's name and mailing address WAI KEUNG CHAN APT BLK 306 TAMPINES ST 32 #06-06 SINGAPORE 52030 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.153 2	Nonpriority creditor's name and mailing address WAI KIT LEI PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,577.84
3.153 3	Nonpriority creditor's name and mailing address Walrus PumpCo., Ltd No. 164, Zhongxing N. St., Sanchong Dist New Taipei City, Taiwan 241022 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$328.78
3.153 4	Nonpriority creditor's name and mailing address WEE LIM PO BOX 10003 PMB 301 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,981.05
3.153 5	Nonpriority creditor's name and mailing address Wei Li Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$121.03
3.153 6	Nonpriority creditor's name and mailing address WEI TING WANG PO BOX 10000 PMB 301 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,152.56

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3.153 7	Nonpriority creditor's name and mailing address WEI XU P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,086.73
3.153 8	Nonpriority creditor's name and mailing address WEI-CHIH WANG 10F, No. 2, Hang 7th Rd. Wugu Dist. New Taipei City Taiwan (ROC) Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,453.61
3.153 9	Nonpriority creditor's name and mailing address WEI-HONG CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,612.97
3.154 0	Nonpriority creditor's name and mailing address WEI-HSIANG TAI PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,398.45
3.154 1	Nonpriority creditor's name and mailing address WEI-HUNG CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,647.47
3.154 2	Nonpriority creditor's name and mailing address WEI-PING TU NO.18 ZHONGSHAN RD ZHUTIAN TOWNSHIP PINGTUNG COUNTY Taiwan Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.154 3	Nonpriority creditor's name and mailing address WEI-WEN CHENG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.154 4	Nonpriority creditor's name and mailing address Wellent System Consultants Ltd Flat101A-B, 1/F, Lai Cheong Factory Bldg 479 Castle Peak Rd Lai Chi Kok, Kowloon Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$975.96
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3.154 5	Nonpriority creditor's name and mailing address Wellhead international (HK) Limited Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,371.13
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3.154 6	Nonpriority creditor's name and mailing address WEN-CHUAN LIN No. 53, Zhuxing St. Bade Dist. Taoyuan City Taiwan (ROC) 334014 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.154 7	Nonpriority creditor's name and mailing address WEN-HAO HUANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,244.24
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3.154 8	Nonpriority creditor's name and mailing address Wendell M Long Consulting 7130 E River Canyon Rd. Tucson, AZ 85750 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
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3.154 9	Nonpriority creditor's name and mailing address WENG TANG PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$397.85
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3.155 0	Nonpriority creditor's name and mailing address WENQIANG ZOU PMB 737 BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,144.93
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.155 1	Nonpriority creditor's name and mailing address WENSHUN LI P.O. BOX 10002 PMB 511 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,115.32
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3.155 2	Nonpriority creditor's name and mailing address Western Sales Trading Company P.O. Box 500091 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods Provided; Services Rendered Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$788.00
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3.155 3	Nonpriority creditor's name and mailing address Wide Ocean Printing Co. Limited Flat 12-13, 1/F, Hing Lung Building 202-210 Castle Road Kowloon Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods Provided; Services Rendered Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,465.01
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3.155 4	Nonpriority creditor's name and mailing address WILBRENT NORITA PO BOX 503705 CK SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,062.01
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3.155 5	Nonpriority creditor's name and mailing address WILFREDO CELESTE PO Box 503794 SAIPAN, MP 96950 Date(s) 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: Accrued Leave Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,354.06
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3.155 6	Nonpriority creditor's name and mailing address WILFREDO LABADAN PO Box 502927 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.155 7	Nonpriority creditor's name and mailing address Wilfredo Ordosgoiti Isa Dr. Flame Tree 503 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.155 8	Nonpriority creditor's name and mailing address WILLIAM BENSON PO Box 10000 Pmb 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,171.39
3.155 9	Nonpriority creditor's name and mailing address WILLIAM PIKI PO Box 1564 Kolonia Pohnpei, FM 96941 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$547.35
3.156 0	Nonpriority creditor's name and mailing address Willis Hong Kong Limited 18/F Lee Garden One, 33 Hysan Avenue Causeway Bay Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.156 1	Nonpriority creditor's name and mailing address WILMER AUGUIS PO Box 10003 Pmb 141 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,207.29
3.156 2	Nonpriority creditor's name and mailing address WILSON MANIGNO P.O. BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,334.80
3.156 3	Nonpriority creditor's name and mailing address WILSON THIE PMB 657 BOX 10003 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.156 4	Nonpriority creditor's name and mailing address Wincell Insulation Co., Ltd No. 18-28, Tongjiang Rd Taixing, Jiangsu CHINA Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,666.19

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.156 5	Nonpriority creditor's name and mailing address Wing Tai Hong Marine Products Limited 1/F Shing Lee Yuen Bldg 69 - 71 Bonham Strand W Sheung Wan Hong Kong Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$55.76
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3.156 6	Nonpriority creditor's name and mailing address Winzy Corporation PMB 425 P.O. Box 10000 Saipan, MP 96950 Date(s) 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>Balance of Default Judgment in Winzy Corp. v. [Debtor], District Court of NMI 20-CV-0028</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$135,462.55
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3.156 7	Nonpriority creditor's name and mailing address Wireless Ridge Landscaping PO BOX 5006 CHRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,160.00
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3.156 8	Nonpriority creditor's name and mailing address Wonderful Saipan, LLC PMB 575 BOX 10000 SAIPAN, MP 00096-9500 Date(s) 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>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$421,414.56
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3.156 9	Nonpriority creditor's name and mailing address Wong Pai Tailor Co. P.O. Box 501808 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.157 0	Nonpriority creditor's name and mailing address Worldwide Asia Engineering Limited Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,134,401.96
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.157 1	Nonpriority creditor's name and mailing address Worldwide Travel Co. Ltd 132 Dudley Rd Wolverhampton, WV2 3DH, UK Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$324.90
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3.157 2	Nonpriority creditor's name and mailing address WTP Australia Pty Ltd L 26 45-53 CLARENCE STREET SYDNEY New South Wales, 2000 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$46,699.90
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3.157 3	Nonpriority creditor's name and mailing address Pei Tzu Wu PMB 895 Box 10001 Saipan MP 96950 Date(s) debt was incurred <u>23-Aug, September -</u> <u>December 2023</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Loan 1: \$200,000.00</u> <u>Loan 2: \$2,000,000.00</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,200,000.00
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3.157 4	Nonpriority creditor's name and mailing address WUN-JHONG YOU No. 463, Sec. 2, Zhongshan Rd. Shuili City Nantou Taiwan (ROC) 553008 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,131.02
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3.157 5	Nonpriority creditor's name and mailing address Wushin Corporation P.O. Box 500440 Saipan, MP 96950 Date(s) 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>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,557.40
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3.157 6	Nonpriority creditor's name and mailing address X-Ordinary Trading Limited 20/F AIA Tower 25A-301 Avenida Comercial De Macau Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Goods Provided; Services Rendered</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$382.23
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.157 7	Nonpriority creditor's name and mailing address Xerox Corporation P.O. Box 101235 Pasedena, CA 91189-0005 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.157 8	Nonpriority creditor's name and mailing address XI CHEN PMB 118 PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,995.83
3.157 9	Nonpriority creditor's name and mailing address Xiamen Wanli Stone Stock Co., Ltd 8/F, Fortune Bldg 201 North Xiamen, 361012, China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,435.18
3.158 0	Nonpriority creditor's name and mailing address XIANGJUAN STALEY P.O. BOX 501597 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.158 1	Nonpriority creditor's name and mailing address XIAOFEI CHEN BOX 10003 PMB 361 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,724.90
3.158 2	Nonpriority creditor's name and mailing address XIAOHUA XU PO Box 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,648.61
3.158 3	Nonpriority creditor's name and mailing address XIAOHUI SUN ROOM 201, NO.41, BAOGANG VILLAGE, BAOSHAN DIST. SHANGHAI Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.158 4	Nonpriority creditor's name and mailing address XIAOKANG CHEN PO Box 502081 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$961.22
3.158 5	Nonpriority creditor's name and mailing address XIAOLIN LEI P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,243.71
3.158 6	Nonpriority creditor's name and mailing address XIAOLING TAO PO BOX 10003 PMB 1172 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,885.64
3.158 7	Nonpriority creditor's name and mailing address Xiaoling Tao P.O. Box 10000 PMB 918 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.158 8	Nonpriority creditor's name and mailing address XIAOYAN INDALECIO PO Box 501132 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.158 9	Nonpriority creditor's name and mailing address XIJIA HE P.O. BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,530.64
3.159 0	Nonpriority creditor's name and mailing address Xin Jiang Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$121.03

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.159 1	Nonpriority creditor's name and mailing address XIN TONG PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.159 2	Nonpriority creditor's name and mailing address Xinfangsheng Holding Group Co., Ltd Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,182.91
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3.159 3	Nonpriority creditor's name and mailing address XING YU CHEN PO Box 10001 PMB 918 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.159 4	Nonpriority creditor's name and mailing address Xingxi Xiang Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$929.82
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3.159 5	Nonpriority creditor's name and mailing address XINYING LI PMB 495 BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$814.34
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3.159 6	Nonpriority creditor's name and mailing address XIURONG HE P.O. BOX 10003 PMB 681 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$640.89
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3.159 7	Nonpriority creditor's name and mailing address XUAN GUO P.O. BOX 10001 PMB 62 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$517.99
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3.159 8	Nonpriority creditor's name and mailing address YA-CHU YANG PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$130.97
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3.159 9	Nonpriority creditor's name and mailing address YA-CHUN HSIEH PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,700.25
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3.160 0	Nonpriority creditor's name and mailing address YAKUP KOTEK c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$831.91
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3.160 1	Nonpriority creditor's name and mailing address YANEL MELO 6180 SW 42 CT DAVIE, FL 33314 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$392.34
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3.160 2	Nonpriority creditor's name and mailing address YANHONG CASTRO P.O. BOX 503822 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$296.20
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3.160 3	Nonpriority creditor's name and mailing address YANHONG WANG PO BOX 504572 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$614.02
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3.160 4	Nonpriority creditor's name and mailing address YANSONG JACKSON PO Box 10003 PMB 1115 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$486.29
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3.160 5	Nonpriority creditor's name and mailing address Yantze Corporation c/o Scoggins Law Office P.O. Box 501127 Saipan, MP 96950 Date(s) 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>Balnace of Judgment in CNMI Superior Court, Civil No. 21-0014-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$220,187.50
3.160 6	Nonpriority creditor's name and mailing address YAO-HSIEN Hsieh PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.160 7	Nonpriority creditor's name and mailing address Yaong Corporation P.O. Box 505946 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$70,195.60
3.160 8	Nonpriority creditor's name and mailing address Yaoyuan Liu Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$147.18
3.160 9	Nonpriority creditor's name and mailing address YASIN ERGUN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
3.161 0	Nonpriority creditor's name and mailing address YAVUZ KAYNAK c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.161 1	Nonpriority creditor's name and mailing address YEE SING YUEN PO Box 5752 CHRB SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.161 2	Nonpriority creditor's name and mailing address YEN HUNG LIU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.161 3	Nonpriority creditor's name and mailing address YI-CHENG CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,516.25
3.161 4	Nonpriority creditor's name and mailing address YI-CHUAN TSAI PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,158.75
3.161 5	Nonpriority creditor's name and mailing address YI-DE TSENG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,579.25
3.161 6	Nonpriority creditor's name and mailing address YI-LUNG CHUNG 4F, No. 118 Aiyggln 685 Sec 2 Jieshou Rd Bade Dist. Taoyuan City Taiwan (ROC) 334 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,011.56
3.161 7	Nonpriority creditor's name and mailing address YI-PIN CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,084.85
3.161 8	Nonpriority creditor's name and mailing address YIMENG CHEN PO BOX 502836 CK SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,115.32

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3.161 9	Nonpriority creditor's name and mailing address YINAN HU P.O. BOX 10001 PMB 915 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,015.48
3.162 0	Nonpriority creditor's name and mailing address YING-HAO HSIEH PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,958.75
3.162 1	Nonpriority creditor's name and mailing address YINGSHUN SAKISAT P.O. BOX 505132 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$97.42
3.162 2	Nonpriority creditor's name and mailing address YINGWEN MA PMB 517 BOX 10003 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.162 3	Nonpriority creditor's name and mailing address YIWEI LI PO Box 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,073.60
3.162 4	Nonpriority creditor's name and mailing address YOLANDA ADVINCULA PO BOX 10000 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,708.39
3.162 5	Nonpriority creditor's name and mailing address YOLISIE GATDULA PO BOX 10003 PMB 196 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$88.76

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3.162 6	Nonpriority creditor's name and mailing address Yong Feng Corporation Middle Road, Garapan Village SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,400.00
3.162 7	Nonpriority creditor's name and mailing address YONG-TENG OU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,795.32
3.162 8	Nonpriority creditor's name and mailing address YONG-YUAN YANG PMB 560 PO Box 10002 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,883.42
3.162 9	Nonpriority creditor's name and mailing address YONGYU ZHEN P.O. BOX 10000 PMB 199 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$996.68
3.163 0	Nonpriority creditor's name and mailing address YOSHI RAY MAFNAS P.O. BOX 500009 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.163 1	Nonpriority creditor's name and mailing address YOU-HONG LIU PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,755.48
3.163 2	Nonpriority creditor's name and mailing address YOU-REN CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,119.34

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3.163 3	Nonpriority creditor's name and mailing address Younis Art Studio, Inc. P.O. Box 500231 Alaihai Av. Garapan Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$180.00
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3.163 4	Nonpriority creditor's name and mailing address YU GUI PO BOX 504015 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,427.83
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3.163 5	Nonpriority creditor's name and mailing address Yu's LLC c/o Scoggins Law Office Chalan Monsignor Guerrero Saipan, MP 96950 Date(s) 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>Balance of Judgment in CNMI Superior Court, Case No. 21-0177-CV</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,494.07
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3.163 6	Nonpriority creditor's name and mailing address YU-BO WANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,935.30
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3.163 7	Nonpriority creditor's name and mailing address YU-FANG TANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,534.28
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3.163 8	Nonpriority creditor's name and mailing address YU-HENG CHENG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,766.75
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3.163 9	Nonpriority creditor's name and mailing address YU-HSUAN LIN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.164 0	Nonpriority creditor's name and mailing address YU-TA CHEN PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,661.72
3.164 1	Nonpriority creditor's name and mailing address YU-TUNG LI PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,158.75
3.164 2	Nonpriority creditor's name and mailing address YUAN-LI JUANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$757.22
3.164 3	Nonpriority creditor's name and mailing address YUAN-RONG TSAI PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$604.88
3.164 4	Nonpriority creditor's name and mailing address YUANYING SPENCER PO Box 10000 PMB 426 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$131.80
3.164 5	Nonpriority creditor's name and mailing address Yuanzhicheng Home Textile Co., Ltd No. 62, Da Nan Rd, Yuexiu District Guangzhou, Guangdong Province China Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$101,977.00
3.164 6	Nonpriority creditor's name and mailing address YUCEL BABACANOGLU c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$825.75

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.164 7	Nonpriority creditor's name and mailing address YUCHUAN YANG P.O. BOX 505459 SAIPAN, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.164 8	Nonpriority creditor's name and mailing address Yufeng Steel International Co., Ltd No 22-23, Block 16, Lanshi (Internation) Metal Trade Centre, China Foshan 528000 Guangdong Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$820.00
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3.164 9	Nonpriority creditor's name and mailing address Yun Miyoung Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,338.68
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3.165 0	Nonpriority creditor's name and mailing address YUN-HUNG CHANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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3.165 1	Nonpriority creditor's name and mailing address Yung Ho Human Resources Management Consu No.673-1, Sec.4 Taiwan Blvd., Xitun Taichung City Taiwan 407 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$24,703.60
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3.165 2	Nonpriority creditor's name and mailing address YUNG-CHI SHIH PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$866.39
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3.165 3	Nonpriority creditor's name and mailing address YUNG-HUNG WANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,342.03
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.165 4	Nonpriority creditor's name and mailing address YUNUS EMRE YAZGOREN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$485.97
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3.165 5	Nonpriority creditor's name and mailing address YUPING GUO PO BOX 504715 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,663.91
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3.165 6	Nonpriority creditor's name and mailing address Yuping Guo P.O. Box 10000 PMB 918 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,623.60
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3.165 7	Nonpriority creditor's name and mailing address YUSUF ASLAN c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$184.87
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3.165 8	Nonpriority creditor's name and mailing address YVETTE MARIE CASTANEDA PO BOX 10000 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$490.47
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3.165 9	Nonpriority creditor's name and mailing address YWA Human Resources Corporation 1268 Gen. Luna Street Ermita Manila Manila, 1000 Philippines Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,164.66
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3.166 0	Nonpriority creditor's name and mailing address YY Co., Ltd. dba: Pacific Quick Print PMB 420 Box 10001 Saipan, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.166 1	Nonpriority creditor's name and mailing address Z Y Corporation PMB 22 BOX 10003 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$632.05
3.166 2	Nonpriority creditor's name and mailing address ZAGDSUREN DORJDAGVA c/o Junson Construction F11, MPM Complex 1st Khoroo13th Koroolol Sukhbaatar Dist. Ulaanbaatar Mongolia Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$992.13
3.166 3	Nonpriority creditor's name and mailing address ZALDY CUTANDA PO BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,589.45
3.166 4	Nonpriority creditor's name and mailing address ZARIAH CISNERO PO Box 504312 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90.70
3.166 5	Nonpriority creditor's name and mailing address ZENAIDA CUERDO PO BOX 503561 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.166 6	Nonpriority creditor's name and mailing address ZHANQIANG ZHANG PMB 242 PPP BOX 10000 SAIPAN, MP 96950 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.166 7	Nonpriority creditor's name and mailing address Zhaoqing Fengxiang Food Machinery Co Room No.1-2 Lang Qing Xuan, Jingtai China P.C.5260 CN Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.166 8	Nonpriority creditor's name and mailing address ZHAOSHUAN WANG PO BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$481.43
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3.166 9	Nonpriority creditor's name and mailing address Zhejiang Chint Electrics Co., Ltd No. 1, Chint Rd, Chint Industrial Zone North Baixiang, Yueqing Zhejiang, 325603, China Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16,193.40
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3.167 0	Nonpriority creditor's name and mailing address Zhejiang PECC Co. Limited 6-909, Xixi Centre, 136 Shuanglong St Jiangcun Jiedao, Xihu District Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$955.00
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3.167 1	Nonpriority creditor's name and mailing address Zhengzhou Shenlong Pump Industry Co., Lt West Section Guanggao Hwy Xingyan, 450101 CHINA Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$18,514.09
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3.167 2	Nonpriority creditor's name and mailing address Zhens Corporation DBA Free Town Whol P.O. Box 506021 Saipan, MP 96950 Date(s) debt was incurred __ Last 4 digits of account number __	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: __ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,638.20
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3.167 3	Nonpriority creditor's name and mailing address ZHI YUAN XIA P.O. BOX 10001 PMB 918 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,995.83
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3.167 4	Nonpriority creditor's name and mailing address ZHI-JIE YANG PO Box 10003 PMB 84 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,472.14
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Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002**

3.167 5	Nonpriority creditor's name and mailing address ZHIGUO YANG P.O. BOX 10002 PMB 2051 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$977.58
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3.167 6	Nonpriority creditor's name and mailing address ZHIYONG LIU P.O. BOX 503992 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,291.42
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3.167 7	Nonpriority creditor's name and mailing address ZIYI LI PO BOX 10000 PMB 242 SAIPAN, MP 96950 Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$739.74
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3.167 8	Nonpriority creditor's name and mailing address ZOLBAYAR MAKHBAL c/o IDS Mimarlik Muhendislik Tonetim Danismanlik Ticaret Limited Sirketi Menekse-2 Sk. No: 31/10 Kizilay Turkey Date(s) 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>Accrued Leave</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$499.15
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3.167 9	Nonpriority creditor's name and mailing address Zou Wenqiang P.O. Box 10000 PMB 918 Saipan, MP 96950 Date(s) debt was incurred _ Last 4 digits of account number _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
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Part 3: List Others to Be Notified About Unsecured Claims

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

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

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Alejandro Gamab P.O Box 10000 PMB 918 Saipan, MP 96950	Line <u>3.20</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	Antonio Taras PO Box 10000 PMB 918 Saipan, MP 96950	Line <u>3.69</u> <input type="checkbox"/> Not listed. Explain _____	—

Debtor **Imperial Pacific International (CNMI), LLC**

Name

Case number (if known) **24-00002**

	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
4.3	Art Man Corporation PMB 122 Box 10000 SAIPAN, MP 96950	Line 3.85 <input type="checkbox"/> Not listed. Explain _____	—
4.4	CARMELO COLOMASI c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd Glenroy 3045, Victoria Australia	Line 3.185 <input type="checkbox"/> Not listed. Explain _____	—
4.5	Choump Luangphinit PO Box 10000 PMB 918 SAIPAN, MP 96950	Line 3.250 <input type="checkbox"/> Not listed. Explain _____	—
4.6	DA BAO CORPORATION P.O. Box 503968 Saipan, MP 96950	Line 3.1635 <input type="checkbox"/> Not listed. Explain _____	—
4.7	Deyvee Jeen C. Celis PO Box 10001 PMB 915 Saipan, MP 96950	Line 3.343 <input type="checkbox"/> Not listed. Explain _____	—
4.8	Dongfang Trading Corporation PO BOX 504602 SAIPAN, MP 96950	Line 3.363 <input type="checkbox"/> Not listed. Explain _____	—
4.9	Emanuele Piccione PO Box 10000 PMB 918 Saipan, MP 96950	Line 3.408 <input type="checkbox"/> Not listed. Explain _____	—
4.10	Henan Ma PMB 918 Box 10000 Saipan, MP 96950	Line 3.590 <input type="checkbox"/> Not listed. Explain _____	—
4.11	Juan B. Cepeda San Vicente Saipan, MP 96950	Line 3.795 <input type="checkbox"/> Not listed. Explain _____	—
4.12	Kenny M. Diaz PMB 918 Box 10000 Saipan, MP 96950	Line 3.842 <input type="checkbox"/> Not listed. Explain _____	—
4.13	Redie Dela Cruz PO Box 918 PMB 10000 Saipan, MP 96950	Line 3.1263 <input type="checkbox"/> Not listed. Explain _____	—
4.14	Rosalinda L. Perje PMB 918 Box 10000 Saipan, MP 96950	Line 3.1302 <input type="checkbox"/> Not listed. Explain _____	—

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

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

5a. Total claims from Part 1

Total of claim amounts	
5a.	\$ 4,100,996.75

Debtor **Imperial Pacific International (CNMI), LLC**
NameCase number (if known) **24-00002****5b. Total claims from Part 2**5b. + \$ **262,554,275.91****5c. Total of Parts 1 and 2**

Lines 5a + 5b = 5c.

5c. \$ **266,655,272.66**

Fill in this information to identify the case:Debtor name **Imperial Pacific International (CNMI), LLC**United States Bankruptcy Court for the: **COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**Case number (if known) **24-00002**☐ 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

Lease Agreement (LA 15-002S) by and between the Department of Public Lands, as lessor, and [the Debtor] as lessee, dated April 29, 2015 [for Tract No. 21049-R2, Lot Numbers 104 D 08, 104 D 11R/W, 104 D 12, and 104 D 04. April 2040

State the term remaining

List the contract number of any government contract

**CNMI Department of Public Lands
P.O. Box 500380
Saipan, MP 96950**

Fill in this information to identify the case:Debtor name **Imperial Pacific International (CNMI), LLC**United States Bankruptcy Court for the: **COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**Case number (if known) **24-00002**☐ 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 **Imperial Pacific Intl Holdings Ltd.**
Suites 7001-02, 70/F
Two Intl Finance Centre, No.8 Finance St
Central, Hong Kong

Cui Lijie

☐ D _____
☒ E/F **3.922**
☐ G _____

2.2 **Imperial Pacific Intl Holdings Ltd.**
Suites 7001-02, 70/F
Two Intl Finance Centre, No.8 Finance St
Central, Hong Kong

King Gain Ltd

☐ D _____
☒ E/F **3.862**
☐ G _____

2.3 **Imperial Pacific Intl Holdings Ltd.**
Suites 7001-02, 70/F
Two Intl Finance Centre, No.8 Finance St
Central, Hong Kong

Sun Donghai

☐ D _____
☒ E/F **3.367**
☐ G _____

Fill in this information to identify the case:Debtor name **Imperial Pacific International (CNMI), LLC**United States Bankruptcy Court for the: **COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS**Case number (if known) **24-00002**☐ 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****Sources of revenue**
Check all that apply**Gross revenue**
(before deductions and exclusions)**2. Non-business revenue**

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

☒ None.**Description of sources of revenue****Gross revenue from each source**
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$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.)

☐ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**
*Check all that apply*3.1. **Law Office of Michael Chen****2/9/24****\$50,075.00**☐ Secured debt
☐ Unsecured loan repayments
☐ Suppliers or vendors
☐ Services
☒ Other **Attorneys Fees**

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.2. Law Office of Stephen Nutting	1/22/2024: \$3,00.00 (Attorneys Fees) 2/14/2024: \$23,200.00 (Juror Trial Fee) 2/23/2024: \$16,043.50 (Attorneys Fees) 3/8/2024: \$1,000.00 (Summons Fee)	\$40,243.50	<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>Fees</u>
3.3. LBT Appraisal P.O. Box 7593 SVRB Saipan, MP 96950	2/9/2024	\$12,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Appraisal</u>
3.4. U.S. Department of Labor, Wage & Hour Di U.S. District Courthouse Bldg. 520 W. Soledad Ave., #101 Hagatna, GU 96910-4950	3/12/24	\$150,010.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input checked="" type="checkbox"/> Other <u>Judgment</u>
3.5. Eternal Bright Consultants LTD Rm 1305-07, 13F, New East Ocean Centre 9 Science Museum Rd Tsimshatsui East, Kowloon, Hong Kong	2/9/24	\$19,264.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____
3.6. Ocean Bee LLC P.O. Box 500783 Saipan, MP 96950	1/22/24	\$15,000.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____

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

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$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
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Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Cui Lijie Suites 7001, 7002, & 7014-7016, 70th Fl Two Intl. Finance Centre, 8 Finance St Central, Hong Kong Owner of Imperial Pacific Intl Holdings		\$0.00	See SOFA #30
4.2. How Yo Chi PO Box 10001 PMB 915 Saipan, MP 96950 Manager		\$0.00	See SOFA #30

5. Repossessions, foreclosures, and returns

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

☒ None

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

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

☒ None

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

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

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Donnie Vince Seman Fejeran v. AM Group, LLC, Debtor, and Dr Safety 21-0100-CV	Civil	Superior Crt of Northern Mariana Islands Guma' Hustisia 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. Ecolab (Guam) LLC v. Debtor 21-0130-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.3. Hemine Ipwan Islam dba Ipwan Security Service v. Debtor 21-0179-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.4.	Law Office of Michael W. Dotts, LLC dba Dotts Law Office, vs. Debtor 21-0277-CV	Breach of Contract	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.5.	Modica Pro v. Debtor 22-0060-CV	Contract	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.6.	Donald R Browne v. Debtor 22-0062-CV	Civil	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.7.	Fujitech v. Debtor 22-0171-CV	Contract	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.8.	CCC v. Debtor 22-0238-CV	Administrative Appeal	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.9.	BigBang Entertainment v. Debtor 23-0057	Civil	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10	Hughes Hubbard & Reed LLP v. Debtor 23-0289-CV	Contract	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11	Hemine Ipwan Islam dba Ipwan Security Service v. Debtor 23-0403-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.12	USDOL v. Debtor and IPIH, Ltd 19-CV-00007	Civil	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.13	Joshua Gray v. Debtor 19-CV-00008	Civil	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input checked="" type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14	Pacific Rim Land Development v. Debtor 19-CV-00016	Contract	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.15	USA Fanter v. Debtor 20-CV-00003	Contract	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.16	USA Fanter v. Debtor 20-CV-00005	Civil	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.17	Tang's Corp. v. Debtor 20-CV-00006	Contract	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.18	Winzy Corp. v. Debtor 20-CV-00028	Contract	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.19	OZCAN GENC, HASAN GOKCE, and SULEYMANKOS v. Debtor 20-CV-00031	Civil	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.20	Alfredo Cabael dba Fritz Pacific v. Debtor 20-CV-00035	Civil	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.21	Take Care Insurance 21-CV-00020	Civil	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.22	South Pacific Lumber Corporation Whang v. Debtor 21-CV-00027	Civil	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.23 .	Kan Pacific Saipan, Ltd. v. Debtor 21-CV-00034	Contract	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.24 .	USA Fanter v. Debtor Staging & Equipment Rental 21-CV-00035	Contract	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.25 .	Artman Environment Corp. v. Debtor 21-CV-00038	Collection	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.26 .	OZCAN GENC, HASAN GOKCE, and SULEYMANKOS v. Debtor 22-CV-00002	Civil	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.27 .	Abonita v. Debtor 22-CV-00018	Civil	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.28 .	BigBang Entertainment v. Debtor 23-CV-00008	Civil	District Court Northern Mariana Islands P.O. Box 500687 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded
7.29 .	Debtor v. Xilei An 23-0209-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.30 .	Debtor v. Son Kuong Chan 23-0210-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.31 .	Debtor v. Jie Chang 23-0211-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.32 .	Debtor v. Wun Seng Chang 23-0212-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.33 .	Debtor v. Shiyu Fan 23-0213-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.34 .	Debtor v. Meng Kit Cheang 23-0214-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.35 .	Debtor v. Chiew Lin Cheng 23-0215-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.36 .	Debtor v. Shiu Tim Choy 23-0216-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.37 .	Debtor v. Wenhui Dai 23-0217-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.38 .	Debtor v. Jin Fang 23-0218-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.39 .	Debtor v. Ming Fu 23-0219-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.40 .	Debtor v. Ting Gao 23-0220-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.41 .	Debtor v. Yuansheng Guo 23-0221-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.42 .	Debtor v. Jooho Gwak 23-0222-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.43 .	Debtor v. Vaikheong Lai 23-0223-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.44 .	Debtor v. Kam Seng Ho 23-0224-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.45 .	Debtor v. Ka Wai Lam 23-0225-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.46 .	Debtor v. Bill Sang Lee 23-0226-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.47 .	Debtor v. Kuok Seng Leong 23-0228-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.48 .	Debtor v. Kunhang Li 23-0229-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.49 .	Debtor v. Shoujian Li 23-0230-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.50 .	Debtor v. Shu Li 23-0231-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.51 .	Debtor v. Bing Liu 23-0232-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.52 .	Debtor v. Chang Liu 23-0233-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.53 .	Debtor v. Hu Liu 23-0234-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.54 .	Debtor v. Qi Liu 23-0235-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.55 .	Debtor v. Xueyong Liu 23-0236-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.56 .	Debtor v. Jie Lin 23-0237-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.57 .	Debtor v. Yi Liu 23-0238-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.58 .	Debtor v. Yang Lin 23-0239-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.59 .	Debtor v. Yidong Lu 23-0241-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.60 .	Debtor v. Huaqiu Mai 23-0242-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.61 .	Debtor v. Kam Pui Ng 23-0244-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.62 .	Debtor v. Hongbo Rong 23-0245-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.63 .	Debtor v. Jian Shi 23-0246-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.64 .	Debtor v. Yongjian Shi 23-0247-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.65	Debtor v. Ye Song 23-0248-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.66	Debtor v. Yongcheng Song 23-0249-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.67	Debtor v. Tat Shan Suen 23-0250-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.68	Debtor v. Hua Tan 23-0251-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.69	Debtor v. Ming Liu Wang 23-0252-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.70	Debtor v. Wai Cheng Victor Tou 23-0253-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.71	Debtor v. Simeng Wang 23-0254-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.72	Debtor v. Zhicai Wang 23-0255-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.73	Debtor v. Junkang Wei 23-0257-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.74	Debtor v. Mou Wen 23-0258-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.75	Debtor v. Hing Wong 23-0259-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.76	Debtor v. Hong Gay Patrick Jonathan 23-0260-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.77	Debtor v. Pok Wong 23-0261-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.78	Debtor v. Chunguang Wu 23-0262-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.79	Debtor v. Min Xu 23-0263-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.80	Debtor v. Dayuan Yang 23-0264-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

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	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.81	Debtor v. Shengyong Ye 23-0265-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.82	Debtor v. Fanzhi Zeng 23-0266-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.83	Debtor v. CE Zhang 23-0267-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.84	Debtor v. Dawei Zhang 23-0268-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.85	Debtor v. Jianwei Zhang 23-0269-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.86	Debtor v. Kunpeng Zhang 23-0271-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.87	Debtor v. Ayun Zhao 23-0272-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.88	Debtor v. Biqi Zhao 23-0273-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.89	Debtor v. Jianzhong Zhao 23-0274-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.90	Debtor v. Yang, Yinbing & Fenyong Zheng 23-0275-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.91	Debtor v. Libin Zheng 23-0276-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.92	Debtor v. Hailin Zhou 23-0277-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.93	Debtor v. Feng Zhou 23-0278-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.94	Debtor v. Wei Zhou 23-0279-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.95	Debtor v. Jian Zong 23-0280-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.96	Debtor v. Weiguo Li 23-0282-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.97 .	Debtor v. Fugui Liu 23-0283-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.98 .	Debtor v. Hehuang Liu 23-0284-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.99 .	Debtor v. Rongshou Wei 23-0290-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10 0.	Debtor v. Yajun Xi 23-0291-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10 1.	Debtor v. Xinhong Xie 23-0292-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10 2.	Debtor v. Qiang Xin 23-0293-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10 3.	Debtor v. Chaowen Yang 23-0294-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10 4.	Debtor v. Guisen Yu 23-0295-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.10 5.	Debtor v. Qiang Zhang 23-0296-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10 6.	Debtor v. Yucheng Zhang 23-0297-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10 7.	Debtor v. Louhong Zhou 23-0298-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10 8.	Debtor v. Jianbiao Cai 23-0299-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.10 9.	Debtor v. Yongjun Cai 23-0300-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11 0.	Debtor v. Chenfeng Cheng 23-0301-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11 1.	Debtor v. Yudong Dai 23-0302-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11 2.	Debtor v. Xinping Gao 23-0303-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.11 3.	Debtor v. Joinqiu Gong 23-0304-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11 4.	Debtor v. Gang Li 23-0305-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11 5.	Debtor v. Guancai Liu 23-0306-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11 6.	Debtor v. Song Liu 23-0307-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11 7.	Debtor v. Wei Liu 23-0309-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11 8.	Debtor v. Fuqiang Sun 23-0310-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.11 9.	Debtor v. Linguo Jin 23-0312-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.12 0.	Debtor v. Youcai Tan 23-0313-CV	Class Action	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.12 1.	Debtor v. Fengshang Wang 23-0314-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.12 2.	Debtor v. Xiaohong Wang 23-0315-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.12 3.	Debtor v. Jianping Zhang 23-0316-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.12 4.	Debtor v. Xinju Wan 23-0324-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.12 5.	Debtor v. Mingsong Wang 23-0325-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.12 6.	Debtor v. Shuhai Wang 23-0326-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.12 7.	Debtor v. Hongjiang Wei 23-0327-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.12 8.	Debtor v. Yuan-Xing Cai 23-0330-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.12 9.	Debtor v. Shaoguo Cao 23-0331-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13 0.	Debtor v. Hou Choi Chan 23-0332-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13 1.	Debtor v. Chak Sing Chan 23-0333-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13 2.	Debtor v. I Long Chao 23-0334-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13 3.	Debtor v. Lijun Chen 23-0335-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13 4.	Debtor v. Dewei Chen 23-0336-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13 5.	Debtor v. Xiaochun Chi 23-0337-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13 6.	Debtor v. Leung Yiu Chiu 23-0338-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.13 7.	Debtor v. Song Free Chong 23-0339-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13 8.	Debtor v. Wenlong Cui 23-0340-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.13 9.	Debtor v. Xiaobing Dai 23-0341-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14 0.	Debtor v. Baicheng Deng 23-0342-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14 1.	Debtor v. Chao Deng 23-0343-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14 2.	Debtor v. Jiang Deng 23-0344-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14 3.	Debtor v. Yaosong Ding 23-0345-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14 4.	Debtor v. Yihua Dong 23-0346-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

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	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.14 5.	Debtor v. Xiding Han 23-0347-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14 6.	Debtor v. Jian Han 23-0348-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14 7.	Debtor v. Jingang Hu 23-0349-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14 8.	Debtor v. Bo Hu 23-0350-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.14 9.	Debtor v. Biao Ji 23-0351-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15 0.	Debtor v. Man Kwan 23-0352-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15 1.	Debtor v. Chak Fai Lam 23-0353-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15 2.	Debtor v. Hei Wing Lau 23-0355-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.15 3.	Debtor v. Siu Ching Leung 23-0356-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15 4.	Debtor v. Qiufeng Li 23-0358-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15 5.	Debtor v. Zaiwang Li 23-0359-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15 6.	Debtor v. Huaguo Li 23-0360-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15 7.	Debtor v. Lirong Liu 23-0361-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15 8.	Debtor v. Feng Liu 23-0362-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.15 9.	Debtor v. Fuyong Long 23-0364-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.16 0.	Debtor v. Dehua Lu 23-0365-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.16 1.	Debtor v. Leung Way Ray Lui 23-0367-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.16 2.	Debtor v. Quansheng Min 23-0368-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.16 3.	Debtor v. Zhengfei Ni 23-0369-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.16 4.	Debtor v. Haipeng Qu 23-0372-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.16 5.	Debtor v. Zhen Xiang Sun 23-0373-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.16 6.	Debtor v. Patrick Sun 23-0374-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.16 7.	Debtor v. Shaoqun Tan 23-0375-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.16 8.	Debtor v. Siu To Tong 23-0376-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.16 9.	Debtor v. Heidi Chuhan Tseng 23-0377-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17 0.	Debtor v. Hok Ming Tseung 23-0378-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17 1.	Debtor v. Huiping Wan 23-0379-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17 2.	Debtor v. Jinfei Wang 23-0380-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17 3.	Debtor v. Yaohui Wang 23-0381-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17 4.	Debtor v. Huanchen Wang 23-0382-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17 5.	Debtor v. Cheng Wang 23-0383-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17 6.	Debtor v. Bingzhong Wu 23-0384-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.17 7.	Debtor v. Wenge Xiao 23-0385-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17 8.	Debtor v. Xueping Xu 23-0386-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.17 9.	Debtor v. Liyan Yan 23-0387-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.18 0.	Debtor v. Yude Yan 23-0388-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.18 1.	Debtor v. Zhiqiang Yang 23-0389-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.18 2.	Debtor v. Xiao Juan Yang 23-0390-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.18 3.	Debtor v. Yanbing Yang 23-0391-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.18 4.	Debtor v. Xuejian Ye 23-0392-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.18 5.	Debtor v. Yu Yin 23-0393-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.18 6.	Debtor v. Jinlong Zhang 23-0394-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.18 7.	Debtor v. Wuqing Zhao 23-0395-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.18 8.	Debtor v. Feiyun Zheng 23-0396-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.18 9.	Debtor v. Peng Zhou 23-0397-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.19 0.	Debtor v. Longwang Zhuo 23-0398-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.19 1.	Debtor v. Jian Chen 24-0009-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.19 2.	Debtor v. Chun Tak Cheng 24-0010-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.19 3.	Debtor v. Man Kwai Cheung 24-0011-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.19 4.	Debtor v. Xue Chuan Gao 24-0012-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.19 5.	Debtor v. Lilin Guo 24-0013-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.19 6.	Debtor v. Yuk Ng 24-0014-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.19 7.	Debtor v. Sixin Qin 24-0015-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.19 8.	Debtor v. Yau Chiu Sit 24-0016-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.19 9.	Debtor v. Qunting Xu 24-0017-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.20 0.	Debtor v. Longfei Yang 24-0018-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.20 1.	Debtor v. Shengming Yu 24-0019-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.20 2.	Debtor v. Xuejiang Yu 24-0020-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.20 3.	Debtor v. Lei Zhu 24-0021-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.20 4.	Debtor v. Anyi Zuo 24-0022-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.20 5.	Debtor v. Tongwen Chen 24-0062-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.20 6.	Debtor v. Wai Lun Chik 24-0063-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.20 7.	Debtor v. Shaoguo Du 24-0064-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.20 8.	Debtor v. Yongjun Feng 24-0065-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.20 9.	Debtor v. Sheng Gao 24-0066-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.21 0.	Debtor v. Dingyu Hu 24-0067-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.21 1.	Debtor v. Dan Ge 24-0068-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.21 2.	Debtor v. Tingrong Hu 24-0069-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.21 3.	Debtor v. Guangneng Jiang 24-0070-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.21 4.	Debtor v. Xintao Li 24-0072-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.21 5.	Debtor v. Kaiwen Lin 24-0073-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.21 6.	Debtor v. Erguo Liu 24-0074-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.21 7.	Debtor v. Yingjie Liu 24-0075-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.21 8.	Debtor v. Xiaolong Lu 24-0076-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.21 9.	Debtor v. Jing Meng 24-0077-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.22 0.	Debtor v. Koon Wah Nang 24-0078-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.22 1.	Debtor v. Jinlin Peng 24-0079-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.22 2.	Debtor v. Bingqu Ruan 24-0080-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.22 3.	Debtor v. Yaofei Shi 24-0081-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.22 4.	Debtor v. Liangqing Tang 24-0082-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.22 5.	Debtor v. Chun Tong 24-0083-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.22 6.	Debtor v. Pak Wing Tseung 24-0084-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.22 7.	Debtor v. Ho Feng Jim Tsim 24-0085-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.22 8.	Debtor v. Weixian Wang 24-0086-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.22 9.	Debtor v. Shifang Wu 24-0087-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.23 0.	Debtor v. Zhongming Wu 24-0088-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.23 1.	Debtor v. Lilin Yin 24-0089-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.23 2.	Debtor v. Chunhua Zhao 24-0090-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.23 3.	Debtor v. Chengcai Zhou 24-0091-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.23 4.	Debtor v. Jinlong Zhu 24-0092-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.23 5.	Debtor v. Meng Kit Cheang (Collective) 24-0214-CV	Collection	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.23 6.	Debtor v Chan Chi Hung HCA 75/2018	Collection	Hong Kong High Court 38 Queensway Admiralty, Hong Kong	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.23 7.	Pacific Changhong Corporation v Debtor 24-0104-CV	Civil	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.23 8.	Joshua Gray v. Debtor 23-15956	Appeal of 1:19-cv-00008	9th Circuit Court of Appeals	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.23 9.	Dong Fang Trading dba Yuan Xing Garden v. Debtor 20-0213-CV	Contract	Superior Crt of Northern Mariana Islands Guma' Hustisia, 765 Tekking St., Susupe P.O. Box 502165 Saipan, MP 96950	<input checked="" 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.

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**☐ None

Custodian's name and Address	Describe the property	Value
USA Fanter Corp. Ltd. PMB 1372 P.O. Box 10003 Saipan, MP 96950	Debtor's Gaming Equipment; Debtor's Personal Property	Unknown
	Case title	Court name and address
	U.S.A. Fanter Corp. Ltd. v. Debtor	U.S. District Court, D. NMI
	Case number	P.O. Box 500687
	1:20-cv-00003	Saipan, MP 96950
	Date of order or assignment	
	10/26/2021	
Custodian's name and Address	Describe the property	Value
Joshua Gray c/o Law Office of Bruce Berline, LLC P.O. Box 5682 CHRB Saipan, MP 96950	Debtor's personal property	Unknown
	Case title	Court name and address
	Joshua Gray v. [Debtor]	U.S.D.C., D. N.M.I.
	Case number	P.O. Box 500687
	1:19-cv-00018	Saipan, MP 96950
	Date of order or assignment	
	10/23/2023	

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
Hyundai Accent - Reported Stolen	<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 (Schedule A/B: Assets – Real and Personal Property).</p>	Spring, 2023	Unknown

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 **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Choi & Ito 700 Bishop Street, Suite 1107 Honolulu, HI 96813	Attorney Fees	12/31/2023	\$100,000.00
	Email or website address cchoi@hibklaw.com			
	Who made the payment, if not debtor?			
11.2.	McDonald Law Office		1/2/2024: \$35,000.00 3/13/2024: \$20,000	\$55,000.00
	Email or website address			
	Who made the payment, if not debtor?			

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

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

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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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?

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

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

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☒ Yes. State the nature of the information collected and retained.

Name, Birthdate, Passport, Address

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

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?

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?

MGM Warehouse
Lililol Place, Chalan Piao
Saipan, MP 96950How Yo Chi
PO Box 10001 PMB 915
Saipan, MP 96950Construction materials,
steels, 4' containers, officer
equipment

- ☐ No
- ☒ Yes

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Tanapag Warehouse Siilo Place, Tanapag Saipan, MP 96950	How Yo Chi PO Box 10001 PMB 915 Saipan, MP 96950	Company cars, laundry equipment, construction materials	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Ericco Warehouse Santa Remedio Drive, Tanapag Saipan, MP 96950	How Yo Chi PO Box 10001 PMB 915 Saipan, MP 96950	Construction Materials	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Chalan Laulau Warehouse Pale Coomans Place Saipan, MP 96950	How Yo Chi PO Box 10001 PMB 915 Saipan, MP 96950	Restaurant equipment, construction materials, officer equipment	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

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

☒ None

Part 12: Details About Environment Information

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

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

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

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

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

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

- ☒ No.
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	----------------------------------	--------------------	----------------

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

- ☒ No.
☐ Yes. Provide details below.

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

- ☒ No.
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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Part 13: Details About the Debtor's Business or Connections to Any Business

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002****25. Other businesses in which the debtor has or has had an interest**

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

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
		Dates business existed
25.1. Imperial Pacific Properties, LLC P.O. Box 5194 CHRB Saipan, MP 96950	Real property holding	EIN: From-To 2014 to present
25.2. Grand Marianas (CNMI) Investments LLP	Real property holding	EIN: From-To 2015 to present

26. Books, records, and financial statements

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

☐ None

Name and address	Date of service From-To
26a.1. How Yo Chi PO Box 10001 PMB 915 Saipan, MP 96950	2023 through present
26a.2. Frances C Mafnas PMB 918 P.O. Box 10000 Saipan, MP 96950	2022

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. How Yo Chi PO Box 10001 PMB 915 Saipan, MP 96950	

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

☒ None

Name and address

27. Inventories

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

☒ No

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

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

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

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
How Yo Chi	PO Box 10001 PMB 915 Saipan, MP 96950	Manager	0% Membership interest
Name	Address	Position and nature of any interest	% of interest, if any
Best Sunshine Int'l Ltd.	P.O. Box 957 Offshore Incorporations Ctre, Road Town Tortola BVI	Member	100% membership interest

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
Dong Ting Zheng	No. 6, Zagang Street Dongli District, Harbin CHINA	Former Manager No membership interest in the Debtor	2019 to September 2023

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

Debtor **Imperial Pacific International (CNMI), LLC**Case number (if known) **24-00002**

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1		5/19/2023 \$20,000.00 7/6/2023 \$5,000.00 7/18/2023 \$10,000.00 8/18/2023 \$20,000.00 9/6/2023 \$20,000.00 9/18/2023 \$20,000.00 10/13/2023 \$4,000.00 10/17/2023 \$8,000.00 10/25/2023 \$5,000.00 11/9/2023 \$10,000.00 11/20/2023 \$2,500.00 12/6/2023 \$10,000.00 1/2/2024 \$5,000.00 1/3/2024 \$5,000.00 1/18/2024 \$10,000.00 1/23/2024 \$10,000.00 2/8/2024 \$10,000.00 3/4/2024 \$10,000.00	Expense Reimbursement
Cui Lijie Suites 7001, 7002, & 7014-7016, 70th Fl Two Intl. Finance Centre, 8 Finance St Central, Hong Kong	\$184,500.00		
Relationship to debtor Owner of Imperial Pacific Int'l Holdings			
30.2			Salary (October 2023 - Petition date): \$16,943.64 Expense Reimbursements: \$196,529.88
How Yo Chi PO Box 10001 PMB 915 Saipan, MP 96950	\$213,473.52	Various	
Relationship to debtor Manager			

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

Debtor Imperial Pacific International (CNMI), LLCCase number (if known) 24-00002

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

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 May 23, 2024/s/ Howyo Chi

Signature of individual signing on behalf of the debtor

Howyo Chi

Printed name

Position or relationship to debtor ManagerAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
- ☐ Yes

**United States Bankruptcy Court
Commonwealth of the Northern Mariana Islands**

In re	<u>Imperial Pacific International (CNMI), LLC</u>	Case No.	<u>24-00002</u>
	Debtor(s)	Chapter	<u>11</u>

VERIFICATION OF AMENDED CREDITOR MATRIX

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

Date: **5/23/2024**

/s/ Howyo Chi
Howyo Chi/Manager
Signer/Title

99 Cents Supermart, Incorporated
PO BOX 502651
SAIPAN, MP 96950

AARON GILFIGIR
PO BOX 7759 SVRB
SAIPAN, MP 96950

ABDULBAKI YASAR
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

ABELARDO SACRAMENTO
PO BOX 502970
SAIPAN, MP 96950

ABRAHAM IGISAIAR
P.O. BOX 501824
SAIPAN, MP 96950

ABSON CUNANAN
PO BOX 501106
SAIPAN, MP 96950

Actimize Limited
15/F, International Trade Tower
348 Kwun Tong Road, Kowloon
HONG KONG

Action Plus Co. Limited
5/F Shun Kwong Commercial Building
Sheung Wan
HONG KONG

Addison Global Interiors, Inc
15007 Willis Rd
Cadlwell, MP 83607

Adoracion Castro
P.O. Box 503431
Saipan, MP 96950

AHMET KIZMAZ
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

AHMET KUCUKHURMAN
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar Mongolia

AHMET SENLI
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay TURKEY

AHMET SIMSEK
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

AHMET YESIL
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

AIMIN ZHOU
BOX 10003 PMB 1188
SAIPAN, MP 96950

AIVEE RONA JULIAN
PO BOX 10000 PMB 225
SAIPAN, MP 96950

ALAN ELNAS
PO BOX 500132
SAIPAN, MP 96950

ALBERT SANTOS
P.O. BOX 10000 PMB 321
SAIPAN, MP 96950

ALEJANDRO GAMAB
PO BOX 10003
PMB 276
SAIPAN, MP 96950

Alejandro Gamab
P.O Box 10000 PMB 918
Saipan, MP 96950

ALEXANDER ORTA
PO BOX 10000
PMB 918
SAIPAN, MP 96950

ALEXANDER PALACIOS
PO BOX 500372
SAIPAN, MP 96950

ALEXANDRA SIDORENKO
PO BOX 10000 PMB 918
SAIPAN, MP 96950

ALFRED FERNANDEZ
PO BOX 500169
SAIPAN, MP 96950

Alfred Karcher SE & Co. KG
P.O. Box 160
71349 Winnenden Garmany

ALFREDO ACOSTA JR
PO BOX 503909
SAIPAN, MP 96950

Alfredo J. Cabael d/b/a Fritz Pacific
PO Box 505053
Saipan, MP 96950

ALFREDO SANTOS
PO BOX 10005 PMB 303
SAIPAN, MP 96950

ALI AKBAS
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

ALI AYOGLU
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

ALI CAKIR
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

ALI GUNES
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

ALI GUNAY
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

ALICIA BISNAR
P.O. BOX 501904
SAIPAN, MP 96950

All Parts Inc
PO BOX 504096
SAIPAN, MP 96950

All Rosy Limited

Allan Elnas
PO Box 500132
Saipan, MP 96950

ALLAN ENGRACIA
PO BOX 10005 PMB 74
SAIPAN, MP 96950

ALPER ERGENE
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

ALTANBAGANA DASHDONDOG
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar Mongolia

Altangerel Bat-Ochir
PO Box 918 PMB 10000
Saipan, MP 96950

ALTANGEREL UUGANBAYAR
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar Mongolia

ALVIN TAITANO
PO BOX 500097
SAIPAN, MP 96950

AM Group, LLC
PMB 397 Box 100001
Saipan, MP 96950

AMARDUUREN TSERENPIL
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar Mongolia

AMARJARGAL DORJJUGDER
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar Mongolia

AMARJARGAL SUKHBAATAR
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar Mongolia

American Express (Bk & Insolvency)
Dept 4060, 1 John Street
Brighton, East Sussex BN88 1NH

American Federal "ZJC" Group Ltd. Compan
PO Box 722
SAIPAN, MP 96950

American K & W Corporation dba Happ
PMB 978 P.O. Box 10001
Saipan, MP 96950

American Sinopan LLC
P.O. Box 10003, PMB 722
Saipan, MP 96950

ANA LIZA VIOLA
PO Box 504401
SAIPAN, MP 96950

ANDERSON RAMON
PO BOX 503891
SAIPAN, MP 96950

ANDREA MENESES
PO Box 506574
SAIPAN, MP 96950

ANDREW ALDAN
P.O. BOX 505272
SAIPAN, MP 96950

Andurance China Co., Limited
Rm H3, 6F, No 688-690, Carmina Factory
Bldg, Qingshan Rd, Cheung Sha Wan
Kowloon, Hong Kong

Angel Playing Cards USA, Inc
4300 Flossmoor St
Las Vegas, NV 89115

ANGELLA DIMALANTA
PO Box 500103
SAIPAN, MP 96950

ANGELO BAUTISTA
PMB 628 PO BOX 10000
SAIPAN, MP 96950

ANGELO SCALORA
c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd
Glenroy 3045, Victoria
Australia

Anhui Heli Industrial Vehicle Imp. & Exp
15 Wangjiang West Rd
Shushan District Hefei, 230022, China

ANIBAL COLON RUIZ
PO BOX 505478
SAIPAN, MP 96650

ANKHBAYAR BATBAYAN
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar Mongolia

ANKHBAYAR JARGALSAIKHAN
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar MONGOLIA

ANNIE LEE
PO BOX 10000 PMB 676
SAIPAN, MP 96950

ANTHONY CAMACHO, JR.
c/o Imperial Pacific International (CNMI)
PMB 895 Box 10001
Saipan, MP 96950

ANTHONY JOHN MENDIOLA
PO BOX 503035
SAIPAN, MP 96950

ANTHONY MICHAEL ACOSTA
PO BOX 500572
SAIPAN, MP 96950

ANTONINO GUZZARDI
via Udine n. 23
Francofonte 96015 Siracusa (SR)
ITALY

ANTONIO TARAS
c/o Modica Pro Pty Ltd. 1/131 Glenroy Rd
Glenroy 3045, Victoria
Australia

Antonio Taras
PO Box 10000 PMB 918
Saipan, MP 96950

ANTONIO TARASCIO
via Francesco Petrarca n.32
Solarino 96010 Siracusa (SR)
ITALY

ANZAHL DIMALALUAN
PO BOX 10000 PMB 918
SAIPAN, MP 96950

AON Insurance Micronesia (Saipan) I
P.O. Box 502177
Saipan, MP 96950

APPLE PEARL CUENGCO
PO BOX 500146
SAIPAN, MP 96950

Aqua Resort Club Saipan
P.O. Box 500009
Saipan, MP 96950

ARANJINDEMBEREL ENKH-AMGALAN
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar MONGOLIA

ARIEL REYES
PO BOX 10000 PMB 918
SAIPAN, MP 96950

ARIUNBOLD ENKHTAIVAN
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar MONGOLIA

ARIUNBOLD MANAL
c/o IDS Mimarlik Muhendislik Tonetim
Danismanlik Ticaret Limited Sirketi
Menekse-2 Sk. No: 31/10 Kizilay Turkey

ARIUNBOLD TUMURBAATAR
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar MONGOLIA

ARMANDO PATAPAT
PO Box 10003 PMB 84
SAIPAN, MP 96950

Armatech Corporation
P.O. Box 504388
Saipan, MP 96950

ARMIDA ESPECTACION
PO BOX 505188
SAIPAN, MP 96950

ARNEL GRUSPE
PO BOX 506516
SAIPAN, MP 96950

Art Man Corporation
PMB 122 Box 10000
SAIPAN, MP 96950

Artman Environment Corporation
c/o Thompson Law, LLC
PMB 917 Box 10001
Saipan, MP 96950

Asia Pacific Hotels, Inc
P.O. Box 501029
Saipan, MP 96950

Atkins Kroll (Saipan) Inc.
P.O. Box 500267
Saipan, MP 96950

ATTA Illumination Technology Project Ind

AUDREY JANE TAITANO
P.O. BOX 501533
SAIPAN, MP 96950

AUDREY JEAN CASTRO
P.O. BOX 502507
SAIPAN, MP 96950

AUGUSTIN HOCOG JR.
PO Box 10000 Pmb 918
SAIPAN, MP 96950

AURORA PARIAL
PO BOX 505954
SAIPAN, MP 96950

Auto Marine, Inc.
PMB 483 P.O. Box 10003
Saipan, MP 96950

AVILYNN BABAUTA
PO BOX 503904
SAIPAN, MP 96950

AYLIN CARREON
PO Box 10000 PMB 918
SAIPAN, MP 96950

B & L Corporation
PO Box 10001 PMB 11
Saipan, MP 96950

BAASAN PUREVDAGVA
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar Mongolia

BAASANJARGAL URTNASAN
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar Mongolia

BAASANKHUU IDERCHULUUN
c/o Junson Construction F11, MPM Complex
1st Khorool3th Koroolol Sukhbaatar Dist.
Ulaanbaatar Mongolia

BAATARKHUU DAMIRAN
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