

**IN THE UNITED STATES BANKRUPTCY COURT
FOR THE WESTERN DISTRICT OF WISCONSIN**

In re:	§	Chapter 11
	§	
CAPITOL LAKES, INC., ¹	§	Case No. 16-10158
	§	
Debtor.	§	Hon. Robert D. Martin

**GLOBAL NOTES, METHODOLOGY, AND SPECIFIC
DISCLOSURES REGARDING THE DEBTOR'S SCHEDULES OF
ASSETS AND LIABILITIES AND STATEMENT OF FINANCIAL AFFAIRS**

Introduction

Capitol Lakes, Inc., the above-captioned debtor and debtor in possession (the “Debtor”), with the assistance of its advisors, has filed its Schedules of Assets and Liabilities (the “Schedules”) and Statement of Financial Affairs (the “Statement,” and together with the Schedules, the “Schedules and Statement”) with the United States Bankruptcy Court for the Western District of Wisconsin (the “Bankruptcy Court”), pursuant to section 521 of title 11 of the United States Code, 11 U.S.C. §§ 101–1532 (the “Bankruptcy Code”), Rule 1007 of the Federal Rules of Bankruptcy Procedure, and Rules 1007-1-2 of the Local Rules of Bankruptcy Practice and Procedure of the United States Bankruptcy Court for the Western District of Wisconsin.

These Global Notes, Methodology, and Specific Disclosures Regarding the Debtor’s Schedules of Assets and Liabilities and Statement of Financial Affairs (the “Global Notes”) pertain to, are incorporated by reference in, and should be referred to, considered, and reviewed in connection with any review of the Schedules and Statement.

The Schedules and Statement do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles in the United States (“GAAP”), nor are they intended to be fully reconciled with the financial statements of the Debtor. Additionally, the Schedules and Statement contain unaudited information that is subject to further review, potential adjustment, and reflect the Debtor’s commercially reasonable efforts to report the assets and liabilities of the Debtor.

The Debtor and its agents, attorneys, and financial advisors do not guarantee or warrant the accuracy or completeness of the data that is provided herein or in the Schedules and Statement and shall not be liable for any loss or injury arising out of or caused in whole or in part by the acts, errors, or omissions, whether negligent or otherwise, in procuring, compiling,

¹ The debtor in this chapter 11 case, along with the last four (4) digits of its taxpayer identification number, is: Capitol Lakes, Inc. (2320). The mailing address of the debtor, solely for purposes of notices and communications, is: 333 W. Main Street, Madison, WI 53703.

collecting, interpreting, reporting, communicating or delivering the information contained herein and in the Schedules and Statement. While commercially reasonable efforts have been made to provide accurate and complete information herein and in the Schedules and Statement, inadvertent errors or omissions may exist. The Debtor reserves all rights to amend, supplement, or otherwise modify the Schedules and Statement as is necessary or appropriate. In no event shall the Debtor or its agents, attorneys and financial advisors be liable to any third party for any direct, indirect, incidental, consequential, or special damages (including, but not limited to, damages arising from the disallowance of a potential claim against the Debtor or damages to business reputation, lost business or lost profits), whether foreseeable or not and however caused, even if the Debtor or its agents, attorneys, and financial advisors are advised of the possibility of such damages.

Given, among other things, the uncertainty surrounding the valuation of certain assets and the valuation and nature of certain liabilities, to the extent that a Debtor shows more assets than liabilities, it is not an admission that such Debtor was solvent as of the Petition Date (as defined herein) or at any time prior to the Petition Date. Likewise, to the extent that a Debtor shows more liabilities than assets, it is not an admission that such Debtor was insolvent as of the Petition Date or any time prior to the Petition Date.

Mr. Tim Conroy, the Debtor's Executive Director, has signed the Schedules and the Statement. Mr. Conroy is an authorized signatory for the Debtor. In reviewing and signing the Schedules and Statement, Mr. Conroy necessarily has relied upon the efforts, statements, and representations of various personnel employed by the Debtor and its advisors as well as certain employees of Pacific Retirement Services, Inc. ("PRS"). Mr. Conroy has not (and could not have) personally verified the accuracy of each statement and representation contained in the Schedules and Statement, including statements and representations concerning amounts owed to creditors, classification of such amounts, and creditor addresses.

Global Notes and Overview of Methodology

1. **Reservation of Rights.** Reasonable efforts have been made to prepare and file complete and accurate Schedules and Statement; however, inadvertent errors or omissions may exist. The Debtor reserves all rights to (i) amend or supplement the Schedules and Statement from time to time, in all respects, as may be necessary or appropriate, including, without limitation, the right to amend the Schedules and Statement with respect to any claim ("Claim") and its description or designation; (ii) dispute or otherwise assert offsets or defenses to any Claim reflected in the Schedules and Statement as to amount, liability, priority, status or classification; (iii) subsequently designate any Claim as "disputed," "contingent," or "unliquidated"; or (iv) object to the extent, validity, enforceability, priority or avoidability of any Claim. Any failure to designate a Claim in the Schedules and Statement as "disputed," "contingent," or "unliquidated" does not constitute an admission by the Debtor that such Claim or amount is not "disputed," "contingent," or "unliquidated." Listing a Claim does not constitute an admission of liability by the Debtor. Furthermore, nothing contained in the Schedules and Statement shall constitute a waiver of rights with respect to the Debtor's chapter 11 case, including, without limitation, issues involving Claims, defenses, equitable subordination, and/or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code and any other relevant non-bankruptcy laws to recover assets or avoid transfers. Any specific reservation or

rights contained elsewhere in the Global Notes does not limit in any respect the general reservation of rights contained in this paragraph.

2. **Description of Case and “As Of” Information Date.** On January 20, 2016 (the “Petition Date”), the Debtor filed a voluntary petition for relief under chapter 11 of the Bankruptcy Code. The Debtor is operating its business and managing its properties as a debtor in possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code.

The asset information provided herein represents the assets of the Debtor as of the close of business on December 31, 2015, except as otherwise noted. The liability information provided herein represents the liabilities of the Debtor as of the close of business on the Petition Date, except as otherwise noted.

3. **Net Book Value of Assets.** Unless otherwise indicated, the Debtor’s Schedules and Statement reflect net book values as of December 31, 2015. The book values of certain assets may materially differ from fair market values. Book values of assets prepared in accordance with GAAP generally do not reflect the current performance of the assets and may differ materially from the actual value and/or performance of the underlying assets.

4. **Recharacterization.** Notwithstanding the Debtor’s commercially reasonable efforts to properly characterize, classify, categorize, or designate certain Claims, assets, executory contracts, unexpired leases, and other items reported in the Schedules and Statement, the Debtor may nevertheless have improperly characterized, classified, categorized, designated, or omitted certain items due to the complexity and size of the Debtor’s business. Accordingly, the Debtor reserves all of its rights to re-characterize, reclassify, recategorize, redesignate, add, or delete items reported in the Schedules and Statement at a later time as is necessary or appropriate as additional information becomes available, including, without limitation, whether contracts or leases listed herein were deemed executory or unexpired as of the Petition Date and remain executory and unexpired postpetition. Disclosure of information in the Schedules, Statement, or one or more exhibits or attachments to the Schedules or Statement, even if incorrectly placed, shall be deemed to be disclosed in the correct location in the Schedules, Statement, exhibits, or attachments.

5. **Liabilities.** The Debtor has sought to allocate liabilities between the prepetition and postpetition periods based on the information and research conducted in connection with the preparation of the Schedules and Statement. As additional information becomes available and further research is conducted, the allocation of liabilities between the prepetition and postpetition periods may change.

6. **Excluded Assets and Liabilities.** The Debtor has excluded certain categories of assets, tax accruals, and liabilities from the Schedules and Statement, including, without limitation, accrued taxes, accrued salaries, employee benefit accruals, and accrued accounts payable. The Debtor also has excluded rejection damage Claims of counterparties to executory contracts and unexpired leases that may or may not be rejected, to the extent such damage Claims exist. In addition, certain immaterial assets and liabilities may have been excluded.

The Bankruptcy Court has authorized the Debtor to pay, in its discretion, certain outstanding pre-Petition Date Claims post-petition. Prepetition liabilities that have been or may be paid post-petition under existing authorizations or any authorization that may be approved by the Bankruptcy Court after the date hereof may have been excluded from the Schedules and Statement.

7. **Insiders.** For purposes of the Schedules and Statement, the Debtor defined “insiders” pursuant to section 101(31) of the Bankruptcy Code. Persons listed as “insiders” have been included for informational purposes only and by including them in the Schedules and Statement, shall not constitute an admission that those persons are insiders for purposes of section 101(31) of the Bankruptcy Code or otherwise under applicable law. Moreover, the Debtor does not take any position with respect to: (i) any insider’s influence over the control of the Debtor; (ii) the management responsibilities or functions of any such insider; (iii) the decision making or corporate authority of any such insider; or (iv) whether the Debtor or any such insider could successfully argue that he, she, or it is not an “insider” under applicable law or with respect to any theories of liability or for any other purpose.

8. **Intellectual Property Rights.** Exclusion of certain intellectual property shall not be construed as an admission that such intellectual property rights do not exist, have been abandoned, terminated, assigned, expired by its terms, or otherwise transferred pursuant to a sale, acquisition, or other transaction.

9. **Executory Contracts.** Although the Debtor made diligent attempts to include all executory contracts and leases as executory and unexpired within the scope of section 365 of the Bankruptcy Code, in certain instances, the Debtor may have inadvertently failed to do so due to the complexity and size of the Debtor’s business. Accordingly, the Debtor reserves all of its rights with respect to the inclusion or exclusion of executory contracts and unexpired leases, as well as the named parties of any and all executory contracts and unexpired leases.

10. **Classifications.** Listing (i) a Claim on Schedule D as “secured,” (ii) a Claim on Schedule E/F as “priority,” (iii) a Claim on Schedule E/F as “unsecured,” or (iv) a contract on Schedule G as “executory” or “unexpired,” does not constitute an admission by the Debtor of the legal rights of the claimant or a waiver of the Debtor’s rights to re-characterize or reclassify such Claims or contracts or to setoff of such Claims.

11. **Claims Description.** Schedules D and E/F permit the Debtor to designate a Claim as “disputed,” “contingent,” and/or “unliquidated.” Any failure to designate a Claim on Debtor’s Schedules and Statement as “disputed,” “contingent,” or “unliquidated” does not constitute an admission by that Debtor that such amount is not “disputed,” “contingent,” or “unliquidated,” or that such Claim is not subject to objection. Moreover, listing a Claim does not constitute an admission of liability by the Debtor. Finally, listing a Claim that has been or may be paid post-petition does not negate the effect of the payment of such Claim, or entitle the holder of any such Claim to double payment on account of such Claim.

12. **Causes of Action.** Despite its commercially reasonable efforts to identify all known assets, the Debtor may not have listed all of its causes of action or potential causes of action against third-parties as assets in the Schedules and Statement, including, without

limitation, causes of actions arising under the provisions of chapter 5 of the Bankruptcy Code and any other relevant non-bankruptcy laws to recover assets or avoid transfers. The Debtor reserves all of its rights with respect to any cause of action (including avoidance actions), controversy, right of setoff, cross claim, counterclaim, or recoupment and any claim on contracts or for breaches of duties imposed by law or in equity, demand, right, action, lien, indemnity, guaranty, suit, obligation, liability, damage, judgment, account, defense, power, privilege, license, and franchise of any kind or character whatsoever, known, unknown, fixed or contingent, matured or unmatured, suspected or unsuspected, liquidated or unliquidated, disputed or undisputed, secured or unsecured, assertable directly or derivatively, whether arising before, on, or after the Petition Date, in contract or in tort, in law or in equity, or pursuant to any other theory of law (collectively, “Causes of Action”) it may have, and neither these Global Notes nor the Schedules and Statement shall be deemed a waiver of any claims or Causes of Action or in any way prejudice or impair the assertion of such claims or Causes of Action.

13. **Summary of Significant Reporting Policies.** The following is a summary of significant reporting policies:

- **Undetermined Amounts.** The description of an amount as “unknown,” “TBD” or “undetermined” is not intended to reflect upon the materiality of such amount.
- **Totals.** All totals that are included in the Schedules and Statement represent totals of all known amounts. To the extent there are unknown or undetermined amounts, the actual total may be different than the listed total.
- **Paid Claims.** The Debtor was authorized to pay certain outstanding prepetition Claims pursuant to various orders entered by the Bankruptcy Court. Accordingly, certain outstanding liabilities may have been reduced or satisfied by post-petition payments made on account of prepetition liabilities. To the extent the Debtor paid any of the Claims listed in the Schedules and Statement pursuant to any orders entered by the Bankruptcy Court, the Debtor reserves all of its rights to amend or supplement the Schedules and Statement or take other action as is necessary or appropriate to avoid over-payment of or duplicate payments for any such liabilities.
- **Liens.** Property and equipment listed in the Schedules and Statement are presented without consideration of any liens that may attach (or have attached) to such property and equipment.

14. **Currency.** Unless otherwise indicated, all amounts are reflected in U.S. dollars.

15. **Affiliate Payables and Receivables.** Affiliate payables and receivables between the Debtor and PRS, its sole member, and PRS affiliates are set forth on Schedule E/F or Schedule A/B.77, as applicable. Affiliate payables and receivables reflect net book values as of December 31, 2015.

16. **Setoffs.** The Debtor incurs certain offsets and other similar rights during the ordinary course of business. Offsets in the ordinary course can result from various items, including, without limitation, pricing discrepancies, returns, refunds, rebates, warranties, debit memos, contract allowances, credits, and other disputes between the Debtor and its suppliers or customers. These offsets and other similar rights are consistent with the ordinary course of business in the Debtor's industry and are not tracked separately. Therefore, although such offsets and other similar rights may have been accounted for when certain amounts were included in the Schedules and Statement, offsets are not independently accounted for, and as such, are or may be excluded from the Schedules and Statement.

17. **Employee and Resident Names and Addresses.** Employee and resident names as well as their addresses have been redacted from entries listed throughout the Schedules and Statement, where applicable, in order to protect those individuals' privacy.

Specific Disclosures with Respect to the Debtor's Schedules

Schedule A/B. The Debtor is a party to a significant number of executory contracts and unexpired leases. Therefore, in an effort to avoid duplication, the Debtor has provided a list of such executory contracts and unexpired leases on Schedule G only.

Schedule A/B.3. The bank account balances listed are as of the Petition Date. Details with respect to the Debtor's cash management system are provided in the Cash Management Motion.

Schedule A/B.6. The Bankruptcy Court, pursuant to the *Amended Interim Order (I) Prohibiting Utility Providers From Altering, Refusing, or Discontinuing Service, (II) Deeming the Utility Providers Adequately Assured Of Future Performance, and (III) Establishing Procedures For Determining Requests for Additional Adequate Assurance*, entered on February 3, 2016 [Docket No. 81], has authorized the Debtor to provide adequate assurance of payment for future utility services. Such deposits are not listed on Schedule A/B.6, which was prepared as of the Petition Date.

Schedule A/B.74. In the ordinary course of its businesses, the Debtor may have accrued, or may subsequently accrue, certain rights to counter claims, cross-claims, setoffs, refunds, or potential warranty claims against its suppliers. Because such claims are unknown to the Debtor and not quantifiable as of the Petition Date, they are not listed on Schedule A/B.74.

Schedule D. The Debtor has not included parties that may believe its Claims are secured through setoff rights or inchoate statutory lien rights. Although there are multiple parties that hold a portion of the debt included in the Debtor's prepetition secured bond debt, only the master trustee has been listed for purposes of Schedule D. The amounts outstanding under the Debtor's prepetition secured bonds reflect approximate amounts as of the Petition Date.

Schedule E/F. The claims of individual creditors for, among other things, goods, products, services, or taxes are listed as the amounts entered on the Debtor's books and records and may not reflect credits, allowances, or other adjustments due from such creditors to the Debtor.

Schedule E/F does not include certain deferred charges, deferred liabilities, accruals, or general reserves. Such amounts are, however, reflected on the Debtor's books and records as required in

accordance with GAAP. Such accruals are general estimates of liabilities and do not represent specific Claims as of the Petition Date. The Debtor has made every effort to include as contingent, unliquidated, or disputed the Claim of any vendor not included on the Debtor's open accounts payable that is associated with an account that has an accrual or receipt not invoiced.

Schedule G. Although the Debtor's existing books, records, and financial systems have been relied upon to identify and schedule executory contracts and reasonable commercial efforts have been made to ensure the accuracy of Schedule G, inadvertent errors, omissions, or over-inclusions may have occurred. Certain information, such as the contact information of the counter-party, may not be included where such information could not be obtained using the Debtor's reasonable commercial efforts. Listing a contract or agreement on Schedule G does not constitute an admission that such contract or agreement is an executory contract or unexpired lease or that such contract or agreement was in effect on the Petition Date or is valid or enforceable. The Debtor hereby reserves all of its rights to dispute the validity, status, or enforceability, or characterization of any contract, agreement, or lease set forth on Schedule G and to amend or supplement Schedule G as necessary. Certain of the leases and contracts listed on Schedule G may contain certain renewal options, guarantees of payment, indemnifications, options to purchase, rights of first refusal, and other miscellaneous rights. Such rights, powers, duties, and obligations are not set forth separately on Schedule G.

Certain of the contracts and agreements listed on Schedule G may consist of several parts, including but not limited to purchase orders, amendments, restatements, waivers, letters, and other documents that may not be listed on Schedule G or that may be listed as a single entry. The Debtor expressly reserves its rights to challenge whether such related materials constitute an executory contract, a single contract or agreement or, multiple, severable, or separate contracts.

The contracts, agreements, and leases listed on Schedule G may have expired or may have been modified, amended, or supplemented from time to time by various amendments, restatements, waivers, estoppel certificates, letters, memoranda, and other documents, instruments, and agreements that may not be listed therein despite the Debtor's use of reasonable efforts to identify such documents. Further, unless otherwise specified on Schedule G, each executory contract or unexpired lease listed therein shall be deemed to include all exhibits, schedules, riders, modifications, declarations, amendments, supplements, attachments, restatements, or other agreements made directly or indirectly by any agreement, instrument, or other document that in any manner affects such executory contract or unexpired lease, without respect to whether such agreement, instrument, or other document is listed therein. In some cases, the same supplier or provider appears multiple times on Schedule G. This multiple listing is intended to reflect distinct agreements between the applicable Debtor and such counterparty.

In addition, the Debtor may have entered into various other types of agreements in the ordinary course of its businesses, such as subordination, nondisturbance, and attornment agreements, supplemental agreements, settlement agreements, amendments/letter agreements, title agreements and confidentiality agreements. Such documents may not be set forth on Schedule G. Further, the Debtor reserves all of its rights to alter or amend the Schedules to the extent that additional information regarding the Debtor obligor to such executory contracts becomes available. Certain of the executory agreements may not have been memorialized and could be subject to dispute, including the defense of the statute of frauds. Executory agreements that are

oral in nature have not been included on Schedule G.

Omission of a contract or agreement from Schedule G does not constitute an admission that such omitted contract or agreement is not an executory contract or unexpired lease. The Debtor's rights under the Bankruptcy Code with respect to any such omitted contract or agreement is not impaired by the omission.

Specific Disclosures with Respect to the Debtor's Statement

Statements 1 and 2. The revenue listed in Statements 1 and 2 is listed through December 31, 2015.

Statement 3. In Statement 3, disbursements made on account of multiple invoices may be reflected as a single payment. All disbursements listed in Statement 3 are made through the Debtor's cash management system. Certain *de minimis* petty cash disbursements are not tracked by the Debtor and, therefore, are not listed in Statement 3.

Statement 7. Information provided in Statement 7 includes only those legal disputes and administrative proceedings that are formally recognized by an administrative, judicial, or other adjudicative forum. Any information contained in Statement 7 shall not be a binding representation of the Debtor's liabilities with respect to any of the suits and proceedings identified therein.

Statement 26a. The Debtor has listed those individuals and/or firms that have been identified as having the primary responsibility to maintain or that have supervised the keeping of the Debtor's books and records. Notwithstanding this listing, additional parties not listed may have had access to the Debtor's books and records.

Fill in this information to identify the case:

Debtor name Capitol Lakes, Inc.United States Bankruptcy Court for the Western District of Wisconsin
(State)Case number (if known): 16-10158 (RDM)☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)1a. **Real property:**Copy line 88 from *Schedule A/B*\$ 40,251,221.191b. **Total personal property:**Copy line 91A from *Schedule A/B*\$ 15,231,192.05
+ undetermined amounts1c. **Total of all property:**Copy line 92 from *Schedule A/B*\$ 55,482,413.24
+ undetermined amounts

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*\$ 52,178,599.87
+ undetermined amounts3. **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 6a of *Schedule E/F*\$ 0.00
+ undetermined amounts3b. **Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F*+ \$ 44,722,513.65
+ undetermined amounts4. **Total liabilities**

Lines 2 + 3a + 3b

\$ 96,901,113.52
+ undetermined amounts

Fill in this information to identify the case:

Debtor name Capitol Lakes, Inc.

United States Bankruptcy Court for the: Western District of Wisconsin
(State)

Case number (if known): 16-10158 (RDM)

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

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

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

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

Part 1: Cash and cash equivalents

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

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

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

- 2. Cash on hand** \$ 2,064.87
- 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. <u>See attached rider</u> | | | \$ <u>9,856,178.13</u> |
| 3.2. _____ | | | \$ _____ |
- 4. Other cash equivalents** (Identify all)
- 4.1. None \$ 0.00
- 4.2. _____ \$ _____
- 5. Total of Part 1** \$ 9,858,243.00
- Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

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

Current value of debtor's interest

- 7. Deposits, including security deposits and utility deposits**
- | Description, including name of holder of deposit | |
|--------------------------------------------------|---------------------|
| 7.1. <u>See attached rider</u> | \$ <u>53,055.64</u> |
| 7.2. _____ | \$ _____ |

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

Description, including name of holder of prepayment

8.1. See attached rider \$ 542,440.62

8.2. _____ \$ _____

9. Total of Part 2.

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

\$ 595,496.26

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

☐ No. Go to Part 4.

☒ Yes. Fill in the information below.

Current value of debtor's interest

11. Accounts receivable

11a. 90 days old or less: 1,399,313.12 - 0.00 = → \$ 1,399,313.12
face amount doubtful or uncollectible accounts

11b. Over 90 days old: 843,490.65 - 232,260.63 = → \$ 611,230.02
face amount doubtful or uncollectible accounts

12. Total of Part 3

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

\$ 2,010,543.14

Part 4: Investments

13. Does the debtor own any investments?

☒ No. Go to Part 5.

☐ Yes. Fill in the information below.

Valuation method used for current value

Current value of debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1. None _____ \$ 0.00

14.2. _____ \$ _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

15.1. None _____ % _____ \$ 0.00

15.2. _____ % _____ \$ _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1. None _____ \$ 0.00

16.2. _____ \$ _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$ 0.00

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Part 5: Inventory, excluding agriculture assets

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

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

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
None	MM / DD / YYYY	\$		\$ 0.00
20. Work in progress				
None	MM / DD / YYYY	\$		\$ 0.00
21. Finished goods, including goods held for resale				
None	MM / DD / YYYY	\$		\$ 0.00
22. Other inventory or supplies				
See attached rider	MM / DD / YYYY	\$ 51,909.77		\$ 51,909.77
23. Total of Part 5				\$ 51,909.77
Add lines 19 through 22. Copy the total to line 84.				

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

- ☐ No
☒ Yes

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

- ☒ No
☐ Yes. Book value Valuation method Current value

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

- ☒ No
☐ Yes

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

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

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

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
29. Farm animals Examples: Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			

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33. **Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ 0.00

34. **Is the debtor a member of an agricultural cooperative?**

- ☐ No
- ☐ Yes. Is any of the debtor's property stored at the cooperative?
- ☐ No
- ☐ Yes

35. **Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**

- ☐ No
- ☐ Yes. Book value \$ _____ Valuation method _____ Current value \$ _____

36. **Is a depreciation schedule available for any of the property listed in Part 6?**

- ☐ No
- ☐ Yes

37. **Has any of the property listed in Part 6 been appraised by a professional within the last year?**

- ☐ No
- ☐ Yes

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 See attached rider	\$ 390,378.21		\$ 390,378.21
40. Office fixtures None	\$		\$ 0.00
41. Office equipment, including all computer equipment and communication systems equipment and software See attached rider	\$ 1,305,553.06		\$ 1,305,553.06
42. Collectibles <i>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</i>			
42.1 None	\$		\$ 0.00
42.2	\$		\$
42.3	\$		\$

43. **Total of Part 7.**

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

\$ 1,695,931.27

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

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

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 <u>See attached rider</u>	\$ <u>50,099.96</u>		\$ <u>50,099.96</u>
47.2 _____	\$ _____		\$ _____
47.3 _____	\$ _____		\$ _____
47.4 _____	\$ _____		\$ _____

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

48.1 <u>None</u>	\$ _____		\$ <u>0.00</u>
48.2 _____	\$ _____		\$ _____

49. Aircraft and accessories

49.1 <u>None</u>	\$ _____		\$ <u>0.00</u>
49.2 _____	\$ _____		\$ _____

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

<u>None</u>	\$ _____		\$ <u>0.00</u>
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51. Total of Part 8.

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

\$ 50,099.96

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

- ☐ No
☒ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

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 See attached rider		\$		\$ 40,251,221.19
55.2		\$		\$
55.3		\$		\$
55.4		\$		\$
55.5		\$		\$
55.6		\$		\$

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.

\$ 40,251,221.19

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 See attached rider	\$		\$ Undetermined
61. Internet domain names and websites capitolakes.org	\$		\$ Undetermined
62. Licenses, franchises, and royalties None	\$		\$ 0.00
63. Customer lists, mailing lists, or other compilations Customer List	\$		\$ Undetermined
64. Other intangibles, or intellectual property None	\$		\$ 0.00
65. Goodwill None	\$		\$ 0.00

66. Total of Part 10.

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

\$ 0.00
+ undetermined amounts

Case number (if known) 16-10158 (RDM)

- ## Part 11: All other assets

- ☒ No
- ☐ Yes

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Part 12: Summary

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

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ <u>9,858,243.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ <u>595,496.26</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ <u>2,010,543.14</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ <u>0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ <u>51,909.77</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ <u>0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ <u>1,695,931.27</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ <u>50,099.96</u>	
88. Real property. <i>Copy line 56, Part 9.</i>	→	\$ <u>40,251,221.19</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ <u>0.00</u> + undetermined amounts	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ <u>968,968.65</u> + undetermined amounts	
91. Total. Add lines 80 through 90 for each column. 91a.	\$ <u>15,231,192.05</u> + undetermined amounts	+ 91b. \$ <u>40,251,221.19</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.		\$ <u>55,482,413.24</u> + undetermined amounts

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 1, Question 3: Checking, savings, money market, or financial brokerage accounts

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
US BANK	Operating Account	7700	\$100,000.00
US BANK	Government Receivables Account	6223	\$330,187.17
US BANK	Payroll Account	7718	\$0.00
US BANK	Business Savings Sweep Account	7840	\$1,463,844.03
US BANK	Resident Patient Trust Account	6006	\$23,233.16
US BANK	Resident Trust Account	6565	\$33,502.58
UBS FINANCIAL INVESTMENTS INC.	ACCESS - CL - London Co	4891	\$318,235.23
UBS FINANCIAL INVESTMENTS INC.	ACCESS - CL - PIMCO TR A	4973	\$385,365.12
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - Holding	4980	\$1,335.96
UBS FINANCIAL INVESTMENTS INC.	ACCESS - CL - CL - Columbia	4990	\$299,880.11
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - Liq Alt	4991	\$400,191.57
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - PIMCO LD	4992	\$512,670.90
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - WF MCV	6710	\$82,027.58
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - Hart MCG	6711	\$82,615.67
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - PIMCO AA	6712	\$331,351.61
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - Cambiar	6727	\$36,846.62
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - RS SCG	6736	\$39,246.10
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - DodgeCox	6738	\$176,955.71
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - Dreyfus	6739	\$342,730.98
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - Ivy Intl	6740	\$202,317.29
UBS FINANCIAL INVESTMENTS INC.	UBSIC All-Inclusive Fee - CL - Oppenheim	6741	\$60,492.19
US BANK	Resident Waitlist Account	9578	\$421,000.00
US BANK	Series 2008B Debt Service Reserve Fund	1004	\$2,089,906.54
US BANK	Project Series 2008A Debt Service Reserve	0004	\$1,291,375.81
US BANK	Series 2008C Debt Service Reserve Fund	2004	\$433,180.53
US BANK	WHEFA Demand Rev. Bond Series 2002 Pool Bond Fund	8103	\$374,181.69
US BANK	Series 2008B Bond Fund	1000	\$19,880.29

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 1, Question 3: Checking, savings, money market, or financial brokerage accounts

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
US BANK	Series 2008C Bond Fund	2000	\$3,623.68
US BANK	Project Series 2008A Bond Fund	0000	\$0.01
US BANK	Project Series 2008A General Account	0001	\$0.00
US BANK	Project Series 2008A LOC Debt Service	0003	\$0.00
US BANK	Series 2008B General Account	1001	\$0.00
US BANK	Series 2008B LOC Debt Service	1003	\$0.00
US BANK	Series 2008C General Account	2001	\$0.00
US BANK	Series 2008C LOC Debt Service	2003	\$0.00
US BANK	WHEFA Demand Revenue Bond Series 2002 Pool LOC	8102	\$0.00
US BANK	Meriter Retirement Systems 2008 MTI Account	3000	\$0.00
		TOTAL	\$9,856,178.13

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 2, Question 7: Deposits, including security deposits and utility deposits

Description	Name of holder of deposit	Current value of debtor's interest
Workers' Compensation Deposit	PROPEL INSURANCE - WORKERS' COMPENSATION	\$49,810.62
ADP FLEX Deposit	ADP BENEFIT SERVICES - FLEX PREPAID	\$3,245.02
	TOTAL	\$53,055.64

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 2, Question 8: Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description	Name of holder of prepayment	Current value of debtor's interest
Prepaid Miscellaneous	SENTINEL	\$2,199.31
Prepaid Bond & Letter of Credit Fees	KBC - QUARTERLY LOC FEES	\$84,818.60
Prepaid Bond & Letter of Credit Fees	SANTANDER - QUARTERLY LOC FEES	\$108,552.23
Prepaid Bond & Letter of Credit Fees	2008A SERIES TRUST FEES	\$1,125.00
Prepaid Bond & Letter of Credit Fees	2008B SERIES TRUST FEES	\$1,125.00
Prepaid Bond & Letter of Credit Fees	2008C SERIES TRUST FEES	\$1,125.00
Prepaid Bond & Letter of Credit Fees	2002A SERIES TRUST FEES	\$500.00
Prepaid Bond & Letter of Credit Fees	CHATHAM HEDGING ADVISORS, LLC	\$2,625.00
Prepaid Bond & Letter of Credit Fees	MOODY'S ANNUAL LOC FEES	\$2,359.83
Prepaid Bond & Letter of Credit Fees	KBC ANNUAL AGENCY LOC FEES	\$5,000.00
Prepaid Bond & Letter of Credit Fees	MOODY'S PROFESSIONAL SERVICE FEES (ANNUAL FEE)	\$600.00
Prepaid Bond & Letter of Credit Fees	MOODY'S PROFESSIONAL SERVICE FEES (LOC EXTENSION)	\$1,250.00
Prepaid Bond & Letter of Credit Fees	KBC - LOC EXTENSION FEES	\$8,495.85
Prepaid Bond & Letter of Credit Fees	SANTANDER BANK AMMENDMENT FEES	\$8,493.46
Prepaid Bond & Letter of Credit Fees	US BANK LETTER OF CREDIT RENEWAL	\$55,911.10
Prepaid Bond & Letter of Credit Fees	FITCH RATINGS	\$30,000.00
Prepaid Insurance	PROPEL INSURANCE - COMMERCIAL AUTO	\$982.17
Prepaid Insurance	PROPEL INSURANCE - PROPERTY	\$52,919.15
Prepaid Insurance	PROPEL INSURANCE - DIRECTOR & OFFICERS LIAB & EXCESS SIDE A	\$25,567.44
Prepaid Insurance	PROPEL INSURANCE - SURETY BOND WISCONSIN UNEMPLOYMENT	\$18,224.04
Prepaid Miscellaneous	MEAL METRICS (FORMERLY MOMENTUM DIETARY SOLUTIONS)	\$1,650.00
Prepaid Miscellaneous	ABILITY	\$2,804.19
Prepaid Miscellaneous	LEADINGAGE (WAHSA DUES)	\$7,110.52
Prepaid Miscellaneous	CITY OF MADISON - LICENSE FEES (POOL, FOOD/DRINK)	\$1,099.59
Prepaid Miscellaneous	CARF - CCAC - ANNUAL MAINTENANCE FEE	\$2,164.05
Prepaid Miscellaneous	CITY OF MADISON R.E. TAXES ON MAIN ST. PARKING RAMP	\$26,436.41
Prepaid Miscellaneous	ADVANCED AOD LIC FEES	\$3,816.33
Prepaid Miscellaneous	MICROSOFT LICENSING - CORE APPLICATION LICENSING	\$2,128.02
Prepaid Miscellaneous	MICROSOFT LICENSING - CAL TRUE UP	\$13,420.10
Prepaid Miscellaneous	MICROSOFT LICENSING - WINDOWS LICENSES/MAINTENANCE	\$7,343.89
Prepaid Miscellaneous	PROPHIX SOFTWARE	\$840.00
Prepaid Miscellaneous	RELIAS LEARNING	\$4,052.63
Prepaid Miscellaneous	A.V. POWELL & ASSOCIATES	\$1,291.67
Prepaid Miscellaneous	CURASPAN HEALTH GROUP	\$2,700.00
Prepaid Miscellaneous	UW - EAU CLAIRE FOUNDATION	\$3,166.67

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 2, Question 8: Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description	Name of holder of prepayment	Current value of debtor's interest
Prepaid Miscellaneous	PSOL - FIRE ALARM TESTING	\$6,005.58
Prepaid Miscellaneous	NATIONAL RESEARCH CORPORATION	\$1,950.80
Prepaid Miscellaneous	INFINITE ANALYTICS	\$257.20
Prepaid Miscellaneous	WISCONSIN ALUMNI ASSOCIATION	\$19,999.98
Prepaid Miscellaneous	AVALERE	\$9,916.66
Prepaid Miscellaneous	MAIN STREET PARKING CONDO OWNERS ASSOCIATION	\$4,974.98
Prepaid Miscellaneous	CHARTER COMMUNICATIONS	\$7,438.17
	TOTAL	\$542,440.62

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 5, Question 22: Other inventory or supplies

General description	Date of the last physical inventory	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Inventory - Health Care Supplies	12/31/2015	\$18,905.67	Net Book Value	\$18,905.67
Inventory - Kitchen / Dining Supplies	12/31/2015	\$23,966.15	Net Book Value	\$23,966.15
Inventory - Operating	12/31/2015	\$9,037.95	Net Book Value	\$9,037.95
			TOTAL	\$51,909.77

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - P0710001 - 8-3 Finishing Window Treatments	\$436.00	\$436.00	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chair Professional Char Blue	\$5.41	\$5.41	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chair Wicker-Family Lounge	\$12.56	\$12.56	\$0.00	Net Book Value	\$0.00
Furnishings - Maingate - Chair, Delfi Armless 4 Leg	\$2,247.01	\$1,547.91	\$699.10	Net Book Value	\$699.10
Furnishings - SNF - Chair, Ergon	\$1,503.39	\$951.15	\$552.24	Net Book Value	\$552.24
Furnishings - Heights - Chairs Arm Stack	\$877.75	\$877.75	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chairs Bola Conference W/Arms	\$1,269.45	\$1,269.45	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chairs Bola Conference W/Arms	\$634.72	\$634.72	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Chairs Burgundy W/Navy Stripe	\$37.00	\$37.00	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Chairs For Main Dining Room	\$521.23	\$521.23	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Chairs Guest-Corridor Project	\$2,101.28	\$2,101.28	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Chairs In The Lobby	\$4,283.47	\$2,927.02	\$1,356.45	Net Book Value	\$1,356.45
Furnishings - SNF - Chairs Office W/Arms Knee Tilt	\$232.88	\$232.88	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chairs Operational Blueberry	\$108.73	\$108.73	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chairs Operational Mauve	\$72.50	\$72.50	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chairs Shower Royal W/Padded S	\$101.29	\$101.29	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chairs W/Arms	\$38.04	\$38.04	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chairs Wing Back Lobby Area	\$48.22	\$48.22	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Chairs Wing-Corridor Project	\$2,329.43	\$2,329.43	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chests 4 Drawer Armoire	\$1,229.97	\$1,229.97	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - SNF - Chests Bedside 3 Drawer	\$1,157.98	\$1,157.98	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Common-Artwork	\$1,126.51	\$776.01	\$350.50	Net Book Value	\$350.50
Furnishings - Heights - Common-Curtains	\$608.76	\$608.76	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Common-Ff&E	\$3,599.37	\$1,716.63	\$1,882.75	Net Book Value	\$1,882.75
Furnishings - Heights - Common-Furniture	\$9,642.75	\$6,642.76	\$2,999.99	Net Book Value	\$2,999.99
Furnishings - Wellness - Commons-Aquatic Center	\$29,028.75	\$29,028.75	\$0.00	Net Book Value	\$0.00
Furnishings - Wellness - Commons-Artwork	\$262.51	\$180.81	\$81.70	Net Book Value	\$81.70
Furnishings - Wellness - Commons-Artwork	\$1,659.76	\$1,143.36	\$516.40	Net Book Value	\$516.40
Furnishings - Wellness - Commons-Curtains	\$141.99	\$141.99	\$0.00	Net Book Value	\$0.00
Furnishings - Wellness - Commons-Curtains	\$897.00	\$897.00	\$0.00	Net Book Value	\$0.00
Furnishings - Wellness - Commons-Ff&E	\$839.31	\$400.28	\$439.03	Net Book Value	\$439.03
Furnishings - Wellness - Commons-Ff&E	\$5,303.17	\$2,529.21	\$2,773.96	Net Book Value	\$2,773.96
Furnishings - Wellness - Commons-Furniture	\$2,247.75	\$1,548.45	\$699.30	Net Book Value	\$699.30
Furnishings - Wellness - Commons-Furniture	\$14,207.24	\$9,787.24	\$4,420.00	Net Book Value	\$4,420.00
Furnishings - HC - Conference Table	\$560.11	\$483.09	\$77.02	Net Book Value	\$77.02
Furnishings - SNF - Corner Table Family Lounge	\$9.85	\$9.85	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Corner Unit Left Return	\$102.89	\$102.89	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Corner Unit Right Return	\$102.89	\$102.89	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Corner Units Left Return	\$603.19	\$603.19	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Corner Units Right Returns	\$603.19	\$603.19	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Corner Units W/Clamp Keyboard	\$954.01	\$954.01	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Corridor Mirrors Biltmore	\$358.80	\$358.80	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Corridor Mirrors Classic	\$204.75	\$204.75	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - Heights - Corridor Mirrors English Oval	\$140.40	\$140.40	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Corridor Mirrors Twisted Rope	\$214.50	\$214.50	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Corridor Sofa Tables Cherry	\$796.24	\$796.24	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Corridor Sofa Tables Oak	\$682.50	\$682.50	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Credenza 60 X 24	\$184.79	\$184.79	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Credenza Storage W/Locks,Caste	\$367.10	\$367.10	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Credenzas W/Kneespace 20 X 72	\$362.28	\$362.28	\$0.00	Net Book Value	\$0.00
Furnishings - Wellness - Cushions And Covers	\$1,096.87	\$1,096.87	\$0.00	Net Book Value	\$0.00
Furnishings - Marketing - Deposit - Furnishings For Model Apt	\$2,500.00	\$541.70	\$1,958.30	Net Book Value	\$1,958.30
Furnishings - Maingate - Desk - Jane De Broux	\$710.85	\$338.99	\$371.87	Net Book Value	\$371.87
Furnishings - Maingate - Desk - Sales Office	\$871.93	\$415.87	\$456.07	Net Book Value	\$456.07
Furnishings - Terraces - Desk 30 X 66 Double Pedestal	\$188.17	\$188.17	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Desk 66 X 30 W/Return Sec Offi	\$122.05	\$122.05	\$0.00	Net Book Value	\$0.00
Furnishings - HC Admin - Desk And Chairs (3)	\$4,902.98	\$4,167.58	\$735.41	Net Book Value	\$735.41
Furnishings - Heights - Desk Chairs	\$178.48	\$178.48	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Desk Dbl Pedestal W/2 Files	\$178.74	\$178.74	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Desks Dbl Pedestal 30 X 60	\$857.19	\$798.74	\$58.46	Net Book Value	\$58.46
Furnishings - Terraces - Desks Dbls Pedestal 72 X 24	\$750.76	\$699.57	\$51.19	Net Book Value	\$51.19
Furnishings - Dining - Dining Entrance Benches & Chairs	\$2,516.80	\$880.90	\$1,635.90	Net Book Value	\$1,635.90
Furnishings - Dining - Dining Entrance Benches & Chairs	\$2,516.80	\$880.90	\$1,635.90	Net Book Value	\$1,635.90

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - H307 - Draperies 58" X 100"	\$949.00	\$949.00	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Dresser Sideboard Ivy Terrace	\$112.53	\$112.53	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Dresser Sideboard Sage Terrace	\$112.53	\$112.53	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Dresser/Sideboard Willow Terra	\$112.53	\$112.53	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Dressers 3 Drawer Americana200	\$219.49	\$219.49	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Dressers 4 Drawer Americana200	\$330.49	\$330.49	\$0.00	Net Book Value	\$0.00
Furnishings - Facility - Dry-Erase Board	\$1,168.40	\$1,022.35	\$146.06	Net Book Value	\$146.06
Furnishings - Heights - Elevators (Heights)- Carpet	\$510.00	\$378.25	\$131.75	Net Book Value	\$131.75
Furnishings - Heights - End Tables W/Drawers	\$229.48	\$229.48	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Entertainment Center Oak	\$670.65	\$670.65	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Entertainment Center Shaker Ve	\$224.89	\$224.89	\$0.00	Net Book Value	\$0.00
Furnishings - Maingate - Fabric For Assets 111-115	\$723.53	\$498.41	\$225.12	Net Book Value	\$225.12
Furnishings - Heights - File	\$259.20	\$178.56	\$80.64	Net Book Value	\$80.64
Furnishings - Terraces - File Lateral 24 X 36 2 Drawer	\$122.12	\$122.12	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Files Lateral W/Vertical Trays	\$452.40	\$452.40	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Floor Lamps 59In W/Shades	\$936.31	\$936.31	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Flower Boxes Elogated W/Liner	\$972.00	\$972.00	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Flower Boxes Octigon W/Liners	\$1,394.99	\$1,394.99	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Foam Cushion Replacement	\$447.76	\$447.76	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - Heights Entrance & Admin - Furnishings	\$29,698.68	\$13,364.44	\$16,334.25	Net Book Value	\$16,334.25
Furnishings - Heights - Furnishings For Model Apartmen	\$16,964.67	\$16,964.67	\$0.00	Net Book Value	\$0.00
Furnishings - Marketing - Furnishings For Model Apt	\$2,711.42	\$632.66	\$2,078.76	Net Book Value	\$2,078.76
Furnishings - Marketing - Furnishings For Model Apt	\$75.93	\$16.50	\$59.43	Net Book Value	\$59.43
Furnishings - Marketing - Furnishings For Model Apt	\$2,814.60	\$422.19	\$2,392.41	Net Book Value	\$2,392.41
Furnishings - Marketing - Furnishings For Model Apt	\$880.00	\$190.70	\$689.30	Net Book Value	\$689.30
Furnishings - SNF - Furniture	\$64,882.44	\$35,286.92	\$29,595.52	Net Book Value	\$29,595.52
Furnishings - Heights - Furniture	\$7,014.84	\$4,437.96	\$2,576.88	Net Book Value	\$2,576.88
Furnishings - Model Apt - Furniture	\$2,782.90	\$2,365.45	\$417.46	Net Book Value	\$417.46
Furnishings - Model Apt - Furniture	\$56,365.61	\$47,910.79	\$8,454.82	Net Book Value	\$8,454.82
Furnishings - HC - Furniture	\$3,774.56	\$2,516.37	\$1,258.19	Net Book Value	\$1,258.19
Furnishings - Furniture	\$3,018.52	\$1,962.05	\$1,056.48	Net Book Value	\$1,056.48
Furnishings - HC - Furniture	\$15,379.26	\$9,740.18	\$5,639.08	Net Book Value	\$5,639.08
Furnishings - HC - Furniture - Reclining Chair	\$1,980.00	\$891.00	\$1,089.00	Net Book Value	\$1,089.00
Furnishings - HC - Furniture - Reclining Chair	\$1,980.00	\$847.00	\$1,133.00	Net Book Value	\$1,133.00
Furnishings - Heights - Furniture For Office	\$440.23	\$440.23	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Furniture Ground Floor Area	\$2,749.29	\$2,749.29	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Furniture Installation	\$6,968.16	\$2,712.50	\$4,255.66	Net Book Value	\$4,255.66
Furnishings - SNF - Furniture Office Remodel	\$1,507.96	\$1,507.96	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Hall Chests Neighborhood Commo	\$173.90	\$173.90	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - SNF - Hand Truck Hydraulic-Equipment	\$19.90	\$19.90	\$0.00	Net Book Value	\$0.00
Furnishings - HC - Hc Reno	\$3,690.54	\$1,660.76	\$2,029.78	Net Book Value	\$2,029.78
Furnishings - HC - Hc Reno	\$11,500.56	\$4,983.62	\$6,516.94	Net Book Value	\$6,516.94
Furnishings - HC - Hc Reno	\$1,212.08	\$525.23	\$686.86	Net Book Value	\$686.86
Furnishings - HC - Hc Reno	\$8,443.16	\$3,517.99	\$4,925.17	Net Book Value	\$4,925.17
Furnishings - HC - Hc Room Updates - Chairs (10)	\$4,079.49	\$543.93	\$3,535.57	Net Book Value	\$3,535.57
Furnishings - HC - Hc103B, Hc107, Hc131 - Flooring	\$2,025.00	\$2,025.00	\$0.00	Net Book Value	\$0.00
Furnishings - Parks - Heights 1506 - Wood Installed	\$2,100.00	\$1,557.50	\$542.50	Net Book Value	\$542.50
Furnishings - Heights - Heights Circle - Carpet	\$3,900.00	\$2,892.50	\$1,007.50	Net Book Value	\$1,007.50
Furnishings - various - Interior Landscaping	\$2,811.58	\$984.06	\$1,827.52	Net Book Value	\$1,827.52
Furnishings - various - Interior Landscaping	\$2,811.58	\$984.06	\$1,827.52	Net Book Value	\$1,827.52
Furnishings - Heights - Interior Signage	\$5,000.54	\$5,000.54	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Lift Genie	\$2,668.05	\$2,668.05	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Lobby Display Case	\$6,410.96	\$2,880.28	\$3,530.68	Net Book Value	\$3,530.68
Furnishings - Heights - Lounge Chair Employee Breakroom	\$136.38	\$136.38	\$0.00	Net Book Value	\$0.00
Furnishings - Maingate - Lounge Chair Mesa	\$4,633.20	\$3,191.76	\$1,441.44	Net Book Value	\$1,441.44
Furnishings - Heights - Loveseat 63In W/Chair	\$747.11	\$747.11	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Loveseat Employee Breakroom	\$147.18	\$147.18	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Loveseat Lobby Area	\$20.32	\$20.32	\$0.00	Net Book Value	\$0.00
Furnishings - Maingate - Loveseat Mesa	\$518.11	\$482.78	\$35.33	Net Book Value	\$35.33
Furnishings - Terraces - Loveseat Sage Terrace	\$14.17	\$14.17	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Loveseat Wicker Ivy Terrace	\$12.76	\$12.76	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - Terraces - Loveseat Wicker W/Cushions Sag	\$12.76	\$12.76	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Loveseat Wicker W/Cushions Wil	\$12.76	\$12.76	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Loveseat Wicker-Family Lounge	\$21.85	\$21.85	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Loveseat Willow Terrace	\$14.17	\$14.17	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Loveseats Ivy Terrace	\$28.36	\$28.36	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Loveseats Neighborhood Commons	\$34.72	\$34.72	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Magwheels For Brode Chair	\$386.10	\$386.10	\$0.00	Net Book Value	\$0.00
Furnishings - HC - Mattress	\$3,287.88	\$2,835.81	\$452.07	Net Book Value	\$452.07
Furnishings - SNF - Mattress Accumax	\$750.00	\$750.00	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Mattresses, Top Guard 300 Seri	\$14,298.91	\$13,323.98	\$974.93	Net Book Value	\$974.93
Furnishings - SNF - Med Records Modular Office Fur	\$76.87	\$76.87	\$0.00	Net Book Value	\$0.00
Furnishings - MG204 - Mg 204 - Carpet	\$2,475.00	\$2,475.00	\$0.00	Net Book Value	\$0.00
Furnishings - Wellness - Modular Furniture	\$1,127.02	\$537.54	\$589.48	Net Book Value	\$589.48
Furnishings - Heights - Music Therapy Equipment	\$55.56	\$55.56	\$0.00	Net Book Value	\$0.00
Furnishings - Furnishings - Npv - Furnishings	\$-2,101.00	\$-2,101.00	\$0.00	Net Book Value	\$0.00
Furnishings - Furnishings - Npv - Furnishings	\$-4,687.00	\$-4,687.00	\$0.00	Net Book Value	\$0.00
Furnishings - Business Office - Office Furniture	\$6,640.36	\$1,549.39	\$5,090.97	Net Book Value	\$5,090.97
Furnishings - Admin - Office Furniture	\$4,924.61	\$1,149.11	\$3,775.50	Net Book Value	\$3,775.50
Furnishings - SNF - Office Installation	\$594.99	\$594.99	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Office Modular Furniture	\$3,288.68	\$3,288.68	\$0.00	Net Book Value	\$0.00
Furnishings - Maingate - Oval End Table, Hekman	\$250.48	\$172.52	\$77.97	Net Book Value	\$77.97
Furnishings - SNF - Overbed Table	\$2,104.03	\$1,449.41	\$654.63	Net Book Value	\$654.63

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - SNF - Overbed Tables Model 630 W/Van	\$37.99	\$37.99	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Overbed Tables W/Vanity & Mirr	\$284.07	\$284.07	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Overbed Tables W/Vanity @ Mirr	\$94.22	\$94.22	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Overhead Hutches W/Doors	\$331.79	\$331.79	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Painting Lee Weiss Spring Fog	\$2,565.00	\$1,395.00	\$1,170.00	Net Book Value	\$1,170.00
Furnishings - Grand Hall - Paintings	\$5,020.00	\$2,008.03	\$3,011.97	Net Book Value	\$3,011.97
Furnishings - Terraces - Patio Furniture	\$4,053.96	\$3,777.56	\$276.41	Net Book Value	\$276.41
Furnishings - HC - Patio Furniture	\$5,744.00	\$3,925.06	\$1,818.94	Net Book Value	\$1,818.94
Furnishings - Patio Furniture	\$2,535.60	\$802.94	\$1,732.66	Net Book Value	\$1,732.66
Furnishings - Maingate - Piano	\$39,808.42	\$18,985.56	\$20,822.86	Net Book Value	\$20,822.86
Furnishings - SNF - Piano Baldwin Studio W/Bench-C	\$636.43	\$636.43	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Piano Yamaha Grand Pol Ebony	\$8,420.88	\$8,420.88	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Piano, Baby Grand Hallet	\$7,066.39	\$3,000.80	\$4,065.59	Net Book Value	\$4,065.59
Furnishings - SNF - Recliner 18In	\$40.50	\$40.50	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Recliner Sage Terrace	\$15.16	\$15.16	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Recliner Willow Terrace	\$157.69	\$157.69	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Recover Cubicle Panels	\$369.58	\$369.58	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Recycling Center 4 Section	\$282.02	\$282.02	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Reupholster Furniture	\$4,352.71	\$2,367.24	\$1,985.47	Net Book Value	\$1,985.47
Furnishings - SNF - Reupholster Lift Chairs	\$1,173.51	\$1,173.51	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Rogerson Apt Furnishings	\$14,603.14	\$14,603.14	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - HC - Room Remodel Overbed Lights (10)	\$-1,951.99	\$-1,594.10	\$-357.89	Net Book Value	\$-357.89
Furnishings - Heights - Safe Fire 20 X 14 X 18	\$8.34	\$8.34	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Shelves, Casters, Posts	\$182.06	\$182.06	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Side Chairs Lobby Area	\$18.20	\$18.20	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Sign, Exterior	\$4,103.48	\$4,103.48	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Sleeper Love Seat	\$124.64	\$124.64	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Sleeper Sofa	\$128.03	\$128.03	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Snowblower Toro 7Hp W/Electric	\$41.95	\$41.95	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Sofa Grade li Family Lounge	\$23.86	\$23.86	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Sofa Leather-Admin Office	\$49.87	\$49.87	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Sofa Lobby Area	\$23.71	\$23.71	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Sofa Neighborhood Commons	\$13.99	\$13.99	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Sofa Sleeper Queen Size	\$142.18	\$142.18	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Sofa Stripe 72In	\$26.25	\$26.25	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Sofa W/Extra Firm Cushion	\$51.70	\$51.70	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Stainless Steel Sheet Wall Hun	\$430.63	\$430.63	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Steam Kettle 40 Qt Tda-1 Groen	\$305.62	\$305.62	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Steam Kettle Installtion	\$76.72	\$76.72	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Steamer 6 Pan	\$1,485.46	\$1,485.46	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Steamer Convection Countertop	\$3,378.75	\$3,378.75	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Storage Units Overhead 60In W/	\$672.75	\$672.75	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - Terraces - Storage Units Overhead 72In Ne	\$274.31	\$274.31	\$0.00	Net Book Value	\$0.00
Furnishings - Maingate - Table Club Flex	\$2,376.00	\$1,636.80	\$739.20	Net Book Value	\$739.20
Furnishings - Terraces - Table Conference Neighborhood	\$353.80	\$353.80	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Table Conference W/4 Chairs	\$14.86	\$14.86	\$0.00	Net Book Value	\$0.00
Furnishings - Maingate - Table Console Flex	\$358.21	\$246.76	\$111.45	Net Book Value	\$111.45
Furnishings - Heights - Table Lamps	\$98.74	\$98.74	\$0.00	Net Book Value	\$0.00
Furnishings - Maingate - Table, Cott Gard 22Rnd	\$371.28	\$255.75	\$115.53	Net Book Value	\$115.53
Furnishings - Heights - Table, Oval Glass Top	\$96.74	\$66.65	\$30.09	Net Book Value	\$30.09
Furnishings - Terraces - Tables Cafe 36In Diameter	\$308.04	\$308.04	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Tables Dining	\$1,240.52	\$1,240.52	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Tables Duralite 30 X 96	\$364.10	\$364.10	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Tables Folding 30X96 Black	\$330.72	\$330.72	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Tables Folding 36X96 Neighborh	\$698.56	\$698.56	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Tables Folding Neighborhood Co	\$354.26	\$354.26	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Tables For Dining Room 42 In S	\$50.94	\$50.94	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Tables For Main Dining Room	\$220.32	\$220.32	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Tables Gray W.White Edges Fami	\$61.93	\$61.93	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Tables Space W/Adj Height Base	\$651.13	\$651.13	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Ultracare 770 Beds	\$5,787.72	\$3,661.64	\$2,126.08	Net Book Value	\$2,126.08
Furnishings - Maingate - Vctv Media Center	\$1,318.77	\$1,318.77	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - Heights - Vctv Media Center	\$4,337.67	\$4,337.67	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Visual Board Cabinets W/Projec	\$322.90	\$322.90	\$0.00	Net Book Value	\$0.00
Furnishings - Terraces - Wardrobe Cabinets 36In Wide 2	\$1,491.12	\$1,491.12	\$0.00	Net Book Value	\$0.00
Furnishings - HC - Window Binds	\$1,740.37	\$812.17	\$928.20	Net Book Value	\$928.20
Furnishings - Wellness - Window Coverings	\$1,259.99	\$1,259.99	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Window Treatments	\$536.25	\$536.25	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Window Washing Equipment-Davit	\$1,332.49	\$1,332.49	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Workstation Modular-Reception	\$45.19	\$45.19	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Workstation Pathways	\$542.97	\$542.97	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Workstations For Office Area	\$281.24	\$281.24	\$0.00	Net Book Value	\$0.00
Furnishings - Furnishings - Npv - Furnishings	\$-974.50	\$-974.50	\$0.00	Net Book Value	\$0.00
Furnishings - Furnishings - Npv - Furnishings	\$-12,926.00	\$-12,926.00	\$0.00	Net Book Value	\$0.00
Furnishings - H204 - 8-3 Finishing Window Treatments	\$2,596.72	\$389.52	\$2,207.21	Net Book Value	\$2,207.21
Furnishings - Willow/Sage - 8-3 Finishing Window Treatments	\$2,079.90	\$138.67	\$1,941.24	Net Book Value	\$1,941.24
Furnishings - Willow/Sage - 8-7 Furniture	\$18,870.36	\$1,258.03	\$17,612.33	Net Book Value	\$17,612.33
Furnishings - Business Office - Business Office Furniture	\$2,751.29	\$275.12	\$2,476.18	Net Book Value	\$2,476.18
Furnishings - Npv - Furnishings	\$-17,424.00	\$-17,424.00	\$0.00	Net Book Value	\$0.00
Furnishings - Npv - Furnishings	\$-24,646.00	\$-24,646.00	\$0.00	Net Book Value	\$0.00
Furnishings - H1014A - 8-3 Finishing Window Treatments	\$465.00	\$465.00	\$0.00	Net Book Value	\$0.00
Furnishings - R07FAL10 (H Floors 9-11) - 8-3 Finishing Window Treatments	\$842.00	\$841.97	\$0.03	Net Book Value	\$0.03

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - MG107 - 107-Window Treatments	\$488.76	\$488.76	\$0.00	Net Book Value	\$0.00
Furnishings - Parks - 1-1 Appliances Not Specified	\$75,290.10	\$55,840.16	\$19,449.94	Net Book Value	\$19,449.94
Furnishings - Parks - 1-7 Appliances Stove	\$35,934.00	\$26,651.05	\$9,282.95	Net Book Value	\$9,282.95
Furnishings - HR - 2 - 4-Dr. Lateral Fireproof File Cabinets	\$5,629.90	\$2,877.54	\$2,752.36	Net Book Value	\$2,752.36
Furnishings - Heights - 2 Beds	\$581.92	\$400.90	\$181.02	Net Book Value	\$181.02
Furnishings - R07DINE2 - 205-1 Interiors Ff&E	\$16,539.41	\$4,686.18	\$11,853.24	Net Book Value	\$11,853.24
Furnishings - Parks - 2-4 Building/Carpentry Cabinetry/Counters - Kitchen/Laundry	\$61,805.51	\$30,559.40	\$31,246.11	Net Book Value	\$31,246.11
Furnishings - HC - 2-5 Building/Carpentry Cabinetry/Counters - Bath/Bedroom	\$9,062.79	\$4,481.08	\$4,581.71	Net Book Value	\$4,581.71
Furnishings - Parks - 2-6 Building/Carpentry Doors/Screen Doors	\$10,146.15	\$7,525.10	\$2,621.06	Net Book Value	\$2,621.06
Furnishings - Maingate - 2-Conference Tables W/ 4 Chair	\$4,472.40	\$2,829.45	\$1,642.95	Net Book Value	\$1,642.95
Furnishings - SNF - 2Nd FI-Plants	\$2,210.01	\$2,210.01	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - 2Nd FI-Window Treatments	\$2,817.75	\$2,817.75	\$0.00	Net Book Value	\$0.00
Furnishings - Wellness - 3-Step Portable Chair	\$934.64	\$934.64	\$0.00	Net Book Value	\$0.00
Furnishings - HC - 4-4 Electrical Alarm System	\$77,900.00	\$57,775.84	\$20,124.16	Net Book Value	\$20,124.16
Furnishings - Parks - 4-4 Electrical Alarm System	\$38,036.13	\$28,210.11	\$9,826.02	Net Book Value	\$9,826.02
Furnishings - HC - 8-1 Finishing Not Specified	\$5,000.00	\$2,472.20	\$2,527.80	Net Book Value	\$2,527.80
Furnishings - R07DINE2 - 8-1 Finishing Not Specified	\$1,310.00	\$247.45	\$1,062.55	Net Book Value	\$1,062.55
Furnishings - R07FL5&6 - 8-1 Finishing Not Specified	\$471.37	\$89.04	\$382.34	Net Book Value	\$382.34
Furnishings - Heights 3rd/4th Floor - 8-1 Finishing Not Specified	\$2,352.00	\$182.97	\$2,169.03	Net Book Value	\$2,169.03
Furnishings - R07DINE2 - 8-2 Finishing Wallpaper	\$4,500.00	\$2,550.00	\$1,950.00	Net Book Value	\$1,950.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - HC - 8-3 Finishing Window Treatments	\$15,405.00	\$15,405.00	\$0.00	Net Book Value	\$0.00
Furnishings - R07FL7&8 - 8-3 Finishing Window Treatments	\$4,000.00	\$3,066.69	\$933.31	Net Book Value	\$933.31
Furnishings - R07FL7&8 - 8-3 Finishing Window Treatments	\$3,800.00	\$2,913.31	\$886.69	Net Book Value	\$886.69
Furnishings - R07FL5&6 - 8-3 Finishing Window Treatments	\$1,584.00	\$897.60	\$686.40	Net Book Value	\$686.40
Furnishings - R07FL5&6 - 8-3 Finishing Window Treatments	\$7,800.00	\$4,420.00	\$3,380.00	Net Book Value	\$3,380.00
Furnishings - MG210 - 8-3 Finishing Window Treatments	\$987.00	\$263.20	\$723.80	Net Book Value	\$723.80
Furnishings - MG410 - 8-3 Finishing Window Treatments	\$1,193.00	\$318.13	\$874.87	Net Book Value	\$874.87
Furnishings - Heights 3rd/4th Floor - 8-3 Finishing Window Treatments	\$8,742.50	\$2,039.94	\$6,702.57	Net Book Value	\$6,702.57
Furnishings - MG304 - 8-3 Finishing Window Treatments	\$547.50	\$118.68	\$428.83	Net Book Value	\$428.83
Furnishings - T16 - 8-3 Finishing Window Treatments	\$238.13	\$23.82	\$214.31	Net Book Value	\$214.31
Furnishings - FAL09 - 8-4 Finishing Mirrors	\$1,839.00	\$1,839.00	\$0.00	Net Book Value	\$0.00
Furnishings - R07DINE2 - 8-4 Finishing Mirrors	\$1,800.00	\$1,020.00	\$780.00	Net Book Value	\$780.00
Furnishings - FAL09 - 8-7 Furniture	\$8,402.07	\$8,402.07	\$0.00	Net Book Value	\$0.00
Furnishings - MG101D - 8-7 Furniture	\$11,797.62	\$11,207.75	\$589.88	Net Book Value	\$589.88
Furnishings - MG101D - 8-7 Furniture	\$11,797.62	\$11,207.75	\$589.88	Net Book Value	\$589.88
Furnishings - R07FAL10 (H Floors 9-11) - 8-7 Furniture	\$10,150.00	\$10,150.00	\$0.00	Net Book Value	\$0.00
Furnishings - R07DINE2 - 8-7 Furniture	\$47,623.17	\$26,986.46	\$20,636.71	Net Book Value	\$20,636.71
Furnishings - SNF - Activity Office	\$8,103.89	\$3,262.60	\$4,841.30	Net Book Value	\$4,841.30
Furnishings - HC - Adapta Electric Treatment Table	\$2,003.38	\$1,702.89	\$300.50	Net Book Value	\$300.50
Furnishings - SNF - Altar For Chapel Addtl	\$833.06	\$833.06	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - SNF - Alter For Chapel	\$249.99	\$249.99	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Aquarium W/Acc	\$287.49	\$287.49	\$0.00	Net Book Value	\$0.00
Furnishings - Maingate - Arm Chair Quatro	\$1,058.40	\$729.12	\$329.28	Net Book Value	\$329.28
Furnishings - Maingate - Arm Chairs, Autumn	\$2,867.40	\$1,975.32	\$892.08	Net Book Value	\$892.08
Furnishings - Maingate - Armchair, Devon	\$927.50	\$638.91	\$288.59	Net Book Value	\$288.59
Furnishings - HC - Armchairs (20)	\$4,847.82	\$1,211.99	\$3,635.83	Net Book Value	\$3,635.83
Furnishings - Heights - Armoire Wite Ent	\$339.98	\$339.98	\$0.00	Net Book Value	\$0.00
Furnishings - Various - Art	\$1,855.00	\$711.11	\$1,143.89	Net Book Value	\$1,143.89
Furnishings - Heights Entrance & Admin - Art	\$3,168.56	\$1,425.86	\$1,742.70	Net Book Value	\$1,742.70
Furnishings - Maingate - Artwork	\$1,694.58	\$1,072.06	\$622.52	Net Book Value	\$622.52
Furnishings - Heights - Artwork	\$1,900.00	\$1,033.31	\$866.69	Net Book Value	\$866.69
Furnishings - HC - Artwork	\$4,130.00	\$3,716.99	\$413.01	Net Book Value	\$413.01
Furnishings - SNF - Bed Hi Low Electric W/Acc	\$334.21	\$334.21	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Beds Ez Care 2100 W/Cranks,Sid	\$1,982.25	\$1,982.25	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Beds-Ez Care 2100 Brown W/Acc	\$2,380.68	\$2,380.68	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Bedside Chests 3 Drawer	\$1,618.11	\$1,223.42	\$394.70	Net Book Value	\$394.70
Furnishings - SNF - Bedside Chests 4 Drawer	\$2,777.07	\$2,099.71	\$677.36	Net Book Value	\$677.36
Furnishings - SNF - Bench Teak 4Ft W/Clifton Armch	\$162.51	\$162.51	\$0.00	Net Book Value	\$0.00
Furnishings - Apt Reno Lower 11 - Blinds	\$607.00	\$607.00	\$0.00	Net Book Value	\$0.00
Furnishings - HC - Blinds	\$1,210.93	\$988.92	\$222.01	Net Book Value	\$222.01
Furnishings - Terraces - Bookcases Neighborhood Commons	\$253.96	\$253.96	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Bowl Guard Kit For Hobart Mixe	\$1,204.09	\$1,204.09	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - Heights - Broom Angle Sidewalk 68In	\$1,751.01	\$1,751.01	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Cabinets-Sorting,Storage,Suppl	\$94.90	\$94.90	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Cafe Tables	\$2,816.05	\$1,939.98	\$876.07	Net Book Value	\$876.07
Furnishings - Capitol Lakes Entrance Signage	\$4,710.00	\$1,570.00	\$3,140.00	Net Book Value	\$3,140.00
Furnishings - Heights 3rd/4th Floor - Carpet / Flooring	\$4,640.00	\$1,082.63	\$3,557.37	Net Book Value	\$3,557.37
Furnishings - Heights 3rd/4th Floor - Carpet / Flooring	\$4,640.00	\$1,082.63	\$3,557.37	Net Book Value	\$3,557.37
Furnishings - SNF - Cart Transfer	\$112.20	\$112.20	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Cart Wire Linen W/Solid Bottom	\$12.85	\$12.85	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Carts Lakeside Utility	\$97.36	\$97.36	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Carts Primary Care W/Acc	\$1,860.07	\$1,860.07	\$0.00	Net Book Value	\$0.00
Furnishings - Heights - Carts Wait W/Drop Leaf Shelf G	\$186.22	\$186.22	\$0.00	Net Book Value	\$0.00
Furnishings - Maingate - Chair - Jane De Broux	\$305.99	\$210.80	\$95.19	Net Book Value	\$95.19
Furnishings - SNF - Chair Executive Brookside	\$211.86	\$211.86	\$0.00	Net Book Value	\$0.00
Furnishings - SNF - Chair Professional Char Blue	\$5.06	\$5.06	\$0.00	Net Book Value	\$0.00
Furnishings - H1502A - 8-3 Finishing Window Treatments	\$1,990.00	\$1,990.00	\$0.00	Net Book Value	\$0.00
Furnishings - ADDSR - Heights Summer Reno Series - 8-3 Finishing Window Treatments	\$960.00	\$960.00	\$0.00	Net Book Value	\$0.00
Furnishings - MG308A - 8-3 Finishing Window Treatments	\$1,580.00	\$1,580.00	\$0.00	Net Book Value	\$0.00
Furnishings - ADDSR - Heights Summer Reno Series - 8-3 Finishing Window Treatments	\$1,457.00	\$1,457.00	\$0.00	Net Book Value	\$0.00
Furnishings - ADDSR - Heights Summer Reno Series - 8-3 Finishing Window Treatments	\$604.00	\$604.00	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 39: Office furniture

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Furnishings - H404A - 8-3 Finishing Window Treatments	\$822.00	\$822.00	\$0.00	Net Book Value	\$0.00
Furnishings - MG405A - 8-3 Finishing Window Treatments	\$1,367.00	\$1,367.00	\$0.00	Net Book Value	\$0.00
Furnishings - P0710001 - 8-3 Finishing Window Treatments	\$3,580.00	\$3,580.00	\$0.00	Net Book Value	\$0.00
				TOTAL	\$390,378.21

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Computer Equipment - Facility - Compaq 6000 Pc	\$739.18	\$739.18	\$0.00	Net Book Value	\$0.00
Computer Equipment - Facility - Compaq 6000 Pc	\$739.18	\$739.18	\$0.00	Net Book Value	\$0.00
Computer Equipment - Facility - Compaq 6000 Pc Workstation	\$1,065.55	\$1,065.55	\$0.00	Net Book Value	\$0.00
Computer Equipment - Facility - Compaq 6000 Pc Workstation	\$1,091.43	\$1,091.43	\$0.00	Net Book Value	\$0.00
Computer Equipment - Facility - Compaq 6000 Pc Workstations (5)	\$5,421.35	\$5,421.35	\$0.00	Net Book Value	\$0.00
Computer Equipment - Facility - Computer And Western Digital Hard Drive	\$618.00	\$618.00	\$0.00	Net Book Value	\$0.00
Computer Equipment - Facility - Computers	\$1,146.00	\$1,146.00	\$0.00	Net Book Value	\$0.00
Computer Equipment - Computers - (53) Dc5800 Bus Pcs (735.00 Each)	\$38,955.00	\$38,955.00	\$0.00	Net Book Value	\$0.00
Computer Equipment - Facility - Hp 6930P Notebook Computers (3)	\$3,152.70	\$1,497.52	\$1,655.18	Net Book Value	\$1,655.18
Computer Equipment - Facility - Hp Laserjet Printer	\$606.00	\$606.00	\$0.00	Net Book Value	\$0.00
Computer Equipment - Facility - Hp Procurve - Server	\$4,753.67	\$2,257.98	\$2,495.69	Net Book Value	\$2,495.69
Computer Equipment - Facility - Hp Procurve - Server	\$1,684.89	\$800.32	\$884.57	Net Book Value	\$884.57
Computer Equipment - Facility - Hp Procurve - Server	\$12,531.50	\$5,952.47	\$6,579.03	Net Book Value	\$6,579.03
Computer Equipment - Facility - Laserjet P3015Dn Printers (2)	\$791.25	\$791.25	\$0.00	Net Book Value	\$0.00
Computer Equipment - Laserjet Printer	\$801.00	\$801.00	\$0.00	Net Book Value	\$0.00
Computer Equipment - Laserjet Printer	\$845.06	\$845.06	\$0.00	Net Book Value	\$0.00
Computer Equipment - HC - Net Botz Room Monitor	\$1,464.71	\$1,464.71	\$0.00	Net Book Value	\$0.00
Computer Equipment - Facility - Security - Es Board Assembly	\$1,320.58	\$649.26	\$671.33	Net Book Value	\$671.33

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Computer Equipment - Facility - Watchguard Xtm 505 Vpn/Firewall	\$1,748.00	\$1,747.97	\$0.03	Net Book Value	\$0.03
Computer Equipment - Various - Pos System	\$4,716.80	\$3,734.14	\$982.67	Net Book Value	\$982.67
Computer Equipment - Various - Software Upgrade	\$9,716.67	\$8,097.23	\$1,619.44	Net Book Value	\$1,619.44
Computer Equipment - Various - Software Upgrade	\$8,146.67	\$6,788.91	\$1,357.76	Net Book Value	\$1,357.76
Computer Equipment - P07WIFI - Wireless Internet	\$7,774.00	\$5,312.28	\$2,461.72	Net Book Value	\$2,461.72
Computers - Related - Computer	\$3,599.75	\$2,699.78	\$899.97	Net Book Value	\$899.97
Computers - Related - HC - Healthcare Implementation	\$1,918.52	\$1,279.00	\$639.52	Net Book Value	\$639.52
Computers - Related - Pioneer Pos	\$24,320.95	\$13,511.63	\$10,809.33	Net Book Value	\$10,809.33
Computers - Related - Pioneer Stealth Touch	\$1,865.00	\$1,087.95	\$777.05	Net Book Value	\$777.05
Computers - Related - HC - Touch Screen Project	\$214.90	\$71.63	\$143.28	Net Book Value	\$143.28
Computers - Related - Security - Wanderguard System For Terraces	\$27,671.18	\$8,762.56	\$18,908.62	Net Book Value	\$18,908.62
Equipment - Admin - 1% First Year Fees-Software Lic Agree.	\$60,000.00	\$60,000.00	\$0.00	Net Book Value	\$0.00
Equipment - HC - 1-1 Appliances Not Specified	\$30,750.89	\$22,806.92	\$7,943.97	Net Book Value	\$7,943.97
Equipment - H1014A - 1-1 Appliances Not Specified	\$1,798.00	\$1,333.51	\$464.49	Net Book Value	\$464.49
Equipment - ADDSR - Heights Summer Reno Series - 1-1 Appliances Not Specified	\$13,095.00	\$8,402.64	\$4,692.37	Net Book Value	\$4,692.37
Equipment - ADDSR - Heights Summer Reno Series - 1-1 Appliances Not Specified	\$4,493.00	\$2,883.01	\$1,610.00	Net Book Value	\$1,610.00
Equipment - H1106A - 1-1 Appliances Not Specified	\$853.00	\$547.35	\$305.66	Net Book Value	\$305.66
Equipment - H404A - 1-1 Appliances Not Specified	\$2,107.00	\$1,352.00	\$755.01	Net Book Value	\$755.01
Equipment - H615A - 1-1 Appliances Not Specified	\$1,258.00	\$807.21	\$450.79	Net Book Value	\$450.79

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - FAL09 - 1-1 Appliances Not Specified	\$33,391.12	\$18,643.37	\$14,747.75	Net Book Value	\$14,747.75
Equipment - FAL10 - 1-1 Appliances Not Specified	\$22,000.00	\$12,283.32	\$9,716.68	Net Book Value	\$9,716.68
Equipment - R07FAL10 (H Floors 9-11) - 1-1 Appliances Not Specified	\$7,794.00	\$4,091.85	\$3,702.15	Net Book Value	\$3,702.15
Equipment - R07FAL10 (H Floors 9-11) - 1-1 Appliances Not Specified	\$1,608.00	\$844.20	\$763.80	Net Book Value	\$763.80
Equipment - R07FAL10 (H Floors 9-11) - 1-1 Appliances Not Specified	\$3,576.00	\$1,877.40	\$1,698.60	Net Book Value	\$1,698.60
Equipment - R07FL7&8 - 1-1 Appliances Not Specified	\$23,000.00	\$8,816.69	\$14,183.31	Net Book Value	\$14,183.31
Equipment - R07FL7&8 - 1-1 Appliances Not Specified	\$3,000.00	\$1,150.00	\$1,850.00	Net Book Value	\$1,850.00
Equipment - R07FL7&8 - 1-1 Appliances Not Specified	\$20,000.00	\$7,666.69	\$12,333.31	Net Book Value	\$12,333.31
Equipment - R07FL7&8 - 1-1 Appliances Not Specified	\$8,752.00	\$3,354.91	\$5,397.09	Net Book Value	\$5,397.09
Equipment - R07FL7&8 - 1-1 Appliances Not Specified	\$26,428.00	\$10,130.71	\$16,297.29	Net Book Value	\$16,297.29
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$9,158.13	\$3,434.30	\$5,723.83	Net Book Value	\$5,723.83
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$-153.66	\$-57.63	\$-96.03	Net Book Value	\$-96.03
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$9,631.58	\$3,611.83	\$6,019.75	Net Book Value	\$6,019.75
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$2,917.99	\$1,094.27	\$1,823.72	Net Book Value	\$1,823.72
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$932.81	\$349.78	\$583.03	Net Book Value	\$583.03
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$600.00	\$225.00	\$375.00	Net Book Value	\$375.00
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$827.72	\$310.40	\$517.32	Net Book Value	\$517.32
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$-2,461.51	\$-923.05	\$-1,538.46	Net Book Value	\$-1,538.46

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$1,101.22	\$412.97	\$688.25	Net Book Value	\$688.25
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$920.77	\$345.28	\$575.49	Net Book Value	\$575.49
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$2,725.50	\$1,022.05	\$1,703.45	Net Book Value	\$1,703.45
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$933.92	\$350.20	\$583.72	Net Book Value	\$583.72
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$-1,358.94	\$-509.56	\$-849.38	Net Book Value	\$-849.38
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$169.84	\$63.71	\$106.14	Net Book Value	\$106.14
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$468.39	\$175.63	\$292.76	Net Book Value	\$292.76
Equipment - R07TDHR - 1-1 Appliances Not Specified	\$488.98	\$183.35	\$305.64	Net Book Value	\$305.64
Equipment - R07DINE2 - 1-1 Appliances Not Specified	\$100,862.76	\$28,577.77	\$72,284.99	Net Book Value	\$72,284.99
Equipment - R07FL5&6 - 1-1 Appliances Not Specified	\$93,978.80	\$26,627.35	\$67,351.45	Net Book Value	\$67,351.45
Equipment - R07FL5&6 - 1-1 Appliances Not Specified	\$2,920.00	\$827.31	\$2,092.69	Net Book Value	\$2,092.69
Equipment - R07DINE2 - 1-1 Appliances Not Specified	\$5,334.05	\$1,511.32	\$3,822.73	Net Book Value	\$3,822.73
Equipment - MG506 - 1-1 Appliances Not Specified	\$885.95	\$199.31	\$686.64	Net Book Value	\$686.64
Equipment - MG506 - 1-1 Appliances Not Specified	\$88.00	\$19.76	\$68.24	Net Book Value	\$68.24
Equipment - MG403 - 1-1 Appliances Not Specified	\$3,357.90	\$727.52	\$2,630.38	Net Book Value	\$2,630.38
Equipment - Heights Entrance & Admin - 1-1 Appliances Not Specified	\$1,594.97	\$358.86	\$1,236.12	Net Book Value	\$1,236.12
Equipment - H1006 - 1-1 Appliances Not Specified	\$1,174.00	\$156.53	\$1,017.47	Net Book Value	\$1,017.47
Equipment - MG207 - 1-1 Appliances Not Specified	\$1,566.64	\$208.89	\$1,357.76	Net Book Value	\$1,357.76
Equipment - H1102 - 1-1 Appliances Not Specified	\$1,250.00	\$166.67	\$1,083.33	Net Book Value	\$1,083.33

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Terraces - 1-1 Appliances Not Specified	\$380.00	\$50.67	\$329.33	Net Book Value	\$329.33
Equipment - Heights 3rd/4th Floor - 1-1 Appliances Not Specified	\$98,887.00	\$11,536.84	\$87,350.17	Net Book Value	\$87,350.17
Equipment - MG110 - 1-1 Appliances Not Specified	\$981.00	\$49.07	\$931.94	Net Book Value	\$931.94
Equipment - H1014A - 1-2 Appliances Refrigerator	\$3,517.57	\$2,608.88	\$908.69	Net Book Value	\$908.69
Equipment - H1106A - 1-2 Appliances Refrigerator	\$1.00	\$0.65	\$0.36	Net Book Value	\$0.36
Equipment - H1106A - 1-2 Appliances Refrigerator	\$238.00	\$152.71	\$85.29	Net Book Value	\$85.29
Equipment - H615A - 1-2 Appliances Refrigerator	\$440.00	\$282.34	\$157.66	Net Book Value	\$157.66
Equipment - R07FAL10 (H Floors 9-11) - 1-2 Appliances Refrigerator	\$1,175.00	\$616.86	\$558.15	Net Book Value	\$558.15
Equipment - Heights Entrance & Admin - 1-2 Appliances Refrigerator	\$432.98	\$97.45	\$335.54	Net Book Value	\$335.54
Equipment - Terraces - 1-2 Appliances Refrigerator	\$259.00	\$34.54	\$224.47	Net Book Value	\$224.47
Equipment - MG501 - 1-2 Appliances Refrigerator	\$1,479.00	\$160.28	\$1,318.73	Net Book Value	\$1,318.73
Equipment - T115 - 1-2 Appliances Refrigerator	\$446.46	\$26.04	\$420.42	Net Book Value	\$420.42
Equipment - T16 - 1-2 Appliances Refrigerator	\$446.45	\$22.32	\$424.13	Net Book Value	\$424.13
Equipment - H1014A - 1-3 Appliances Dishwasher	\$340.00	\$252.16	\$87.84	Net Book Value	\$87.84
Equipment - H1106A - 1-3 Appliances Dishwasher	\$340.00	\$218.16	\$121.84	Net Book Value	\$121.84
Equipment - MG108 - 1-3 Appliances Dishwasher	\$311.00	\$41.47	\$269.54	Net Book Value	\$269.54
Equipment - MG211 - 1-3 Appliances Dishwasher	\$380.00	\$50.67	\$329.33	Net Book Value	\$329.33
Equipment - Terraces - 1-4 Appliances Stove	\$1,710.00	\$228.00	\$1,482.00	Net Book Value	\$1,482.00
Equipment - H1014A - 1-5 Appliances Microwave	\$242.00	\$179.49	\$62.51	Net Book Value	\$62.51
Equipment - MG304 - 1-5 Appliances Microwave	\$188.00	\$20.40	\$167.60	Net Book Value	\$167.60
Equipment - Facility - 15"" Sensor S Vacuum (3)	\$1,628.17	\$949.80	\$678.38	Net Book Value	\$678.38
Equipment - R07FL5&6 - 1-6 Appliances Stove Hood / Fan	\$105.92	\$29.99	\$75.93	Net Book Value	\$75.93

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Terraces - 17' Convert.Freezer, White	\$525.00	\$389.39	\$135.62	Net Book Value	\$135.62
Equipment - R07FL7&8 - 1-9 Security Camera'S	\$4,497.74	\$1,724.11	\$2,773.63	Net Book Value	\$2,773.63
Equipment - P0710001 - 1-999 Appliances Misc. Exp. - Cords, Etc.	\$6,420.70	\$4,655.06	\$1,765.64	Net Book Value	\$1,765.64
Equipment - P0710001 - 1-999 Appliances Misc. Exp. - Cords, Etc.	\$6,420.70	\$4,655.06	\$1,765.64	Net Book Value	\$1,765.64
Equipment - R07TDHR - 1-999 Appliances Misc. Exp. - Cords, Etc.	\$472.00	\$176.98	\$295.02	Net Book Value	\$295.02
Equipment - R07DINE2 - 1-999 Appliances Misc. Exp. - Cords, Etc.	\$8,218.45	\$2,328.59	\$5,889.86	Net Book Value	\$5,889.86
Equipment - R07DINE2 - 1-999 Appliances Misc. Exp. - Cords, Etc.	\$700.00	\$198.31	\$501.69	Net Book Value	\$501.69
Equipment - R07FL5&6 - 1-999 Appliances Misc. Exp. - Cords, Etc.	\$1,232.00	\$349.09	\$882.91	Net Book Value	\$882.91
Equipment - R07DINE2 - 1-999 Appliances Misc. Exp. - Cords, Etc.	\$700.00	\$198.31	\$501.69	Net Book Value	\$501.69
Equipment - SNF - 2Nd FI-Appliances	\$9,385.15	\$7,863.23	\$1,521.92	Net Book Value	\$1,521.92
Equipment - SNF - 2Nd FI-Appliances	\$15,890.88	\$13,313.96	\$2,576.92	Net Book Value	\$2,576.92
Equipment - SNF - 2Nd FI-Drop In Food Unit	\$8,023.96	\$6,722.82	\$1,301.15	Net Book Value	\$1,301.15
Equipment - SNF - 2Nd FI-Undercounter Dishwasher	\$6,595.24	\$5,525.75	\$1,069.49	Net Book Value	\$1,069.49
Equipment - SECUR - 305-6 Security Cameras / Command Center	\$20,895.50	\$14,452.73	\$6,442.77	Net Book Value	\$6,442.77
Equipment - SECUR - 305-6 Security Cameras / Command Center	\$20,895.00	\$14,452.42	\$6,442.59	Net Book Value	\$6,442.59
Equipment - SECUR - 305-6 Security Cameras / Command Center	\$214.50	\$148.38	\$66.12	Net Book Value	\$66.12
Equipment - SECUR - 305-6 Security Cameras / Command Center	\$24,377.00	\$16,860.75	\$7,516.26	Net Book Value	\$7,516.26
Equipment - SECUR - 305-6 Security Cameras / Command Center	\$6,808.50	\$4,709.23	\$2,099.27	Net Book Value	\$2,099.27

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - SECUR - 305-6 Security Cameras / Command Center	\$1,940.00	\$1,341.86	\$598.14	Net Book Value	\$598.14
Equipment - HC - 4 - Ultracare Beds, Siderails, Frames	\$7,157.70	\$4,573.03	\$2,584.67	Net Book Value	\$2,584.67
Equipment - Heights - 4" Outlet Gate Valves & 4" Check Valves For Booster Pump	\$4,735.00	\$2,762.10	\$1,972.91	Net Book Value	\$1,972.91
Equipment - SNF - 42 In Plasma Tv With Dvd	\$2,170.76	\$2,170.76	\$0.00	Net Book Value	\$0.00
Equipment - Parks - 6-4 Plumbing Fire-Sprinkler System	\$11,453.87	\$4,247.44	\$7,206.43	Net Book Value	\$7,206.43
Equipment - FS - 9 Radios For Facility Svcs	\$3,771.00	\$3,771.00	\$0.00	Net Book Value	\$0.00
Equipment - H1014A - 9-1 Hvac Not Specified	\$5,465.00	\$2,251.77	\$3,213.23	Net Book Value	\$3,213.23
Equipment - Parks - 9-1 Hvac Not Specified	\$102,824.18	\$50,840.89	\$51,983.29	Net Book Value	\$51,983.29
Equipment - Parks - 9-2 Hvac Heat Pump	\$5,169.91	\$3,834.34	\$1,335.57	Net Book Value	\$1,335.57
Equipment - H1014A - 9-3 Hvac Air Conditioner	\$614.00	\$252.98	\$361.02	Net Book Value	\$361.02
Equipment - Facility - Access System	\$39,692.14	\$16,538.36	\$23,153.79	Net Book Value	\$23,153.79
Equipment - SNF - Action Lift Chairs	\$1,478.16	\$1,478.16	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Action Lift Chairs	\$1,518.96	\$1,518.96	\$0.00	Net Book Value	\$0.00
Equipment - HC - Ada Door From Health Center To Garden Plaza	\$1,706.50	\$1,123.44	\$583.06	Net Book Value	\$583.06
Equipment - Terraces - Air Conditioner Units - Emergency Backups	\$588.00	\$323.40	\$264.60	Net Book Value	\$264.60
Equipment - Dining - Anvamer Grill Sandwich Press	\$1,456.00	\$1,104.12	\$351.88	Net Book Value	\$351.88
Equipment - Appliance	\$2,155.90	\$556.96	\$1,598.94	Net Book Value	\$1,598.94
Equipment - Apt 704 - Appliance	\$1,809.92	\$467.55	\$1,342.37	Net Book Value	\$1,342.37
Equipment - Terraces - Appliances - Convection Oven	\$4,300.02	\$2,938.34	\$1,361.68	Net Book Value	\$1,361.68
Equipment - MG101 - Appliances - Refridgerator	\$2,675.00	\$936.25	\$1,738.76	Net Book Value	\$1,738.76
Equipment - MG308 - Appliances - Refridgerator	\$1,158.00	\$772.00	\$386.00	Net Book Value	\$386.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - SNF - Aquaclean 18Flx Extractor	\$1,946.83	\$1,946.83	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Aquamax Cleaner	\$1,364.06	\$1,364.06	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Aquatic Transmitter	\$341.99	\$341.99	\$0.00	Net Book Value	\$0.00
Equipment - Grand Hall - Audio/Video System & Installation	\$20,000.00	\$2,666.65	\$17,333.35	Net Book Value	\$17,333.35
Equipment - Heights - Aurora Booster Pump	\$3,652.55	\$2,039.38	\$1,613.18	Net Book Value	\$1,613.18
Equipment - Salon - Beauty Salon Eq - 2 Styling Chairs, 2 Dryers & Chairs, 2 Mats	\$1,100.00	\$733.35	\$366.65	Net Book Value	\$366.65
Equipment - SNF - Bed Low 80In Length W/Acc	\$8.64	\$8.64	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Bed Package Ultracare W/Panels	\$2,109.45	\$1,594.95	\$514.50	Net Book Value	\$514.50
Equipment - SNF - Bed Sensor Alarms	\$148.68	\$148.68	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Bed Ultra Care Low	\$654.97	\$654.97	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Bed Ultracare 80In	\$826.55	\$770.20	\$56.35	Net Book Value	\$56.35
Equipment - SNF - Bed Ultracare U770	\$445.31	\$445.31	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Easy Care 2100 80In W/Sid	\$1,492.60	\$1,492.60	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Electric Low Height	\$1,914.66	\$1,914.66	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Ezcare 2100 80In Hand Cra	\$811.49	\$811.49	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Ezcare 2100 80In Hand Cra	\$1,175.79	\$1,175.79	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Ezcare 2100 Totalcare	\$277.05	\$277.05	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Ezcare 2100 W/Side Rails	\$1,320.17	\$1,320.17	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Ezcare 2100 W/Side Rails,	\$2,710.56	\$2,710.56	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Ezcare 2100 W/Siderails &	\$1,987.67	\$1,987.67	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - SNF - Beds Hi Lo Ultra Care 80I	\$9,006.94	\$7,546.33	\$1,460.61	Net Book Value	\$1,460.61
Equipment - SNF - Beds High Griplock Ezcare 2100	\$2,131.24	\$2,131.24	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Hi-Lo Ezcare 2100 Totalca	\$1,082.47	\$1,082.47	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Hi-Lo Ezcare 2100 W/Sider	\$1,194.20	\$1,194.20	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Beds Ultracare 80In	\$2,409.83	\$2,245.52	\$164.31	Net Book Value	\$164.31
Equipment - Dining - Beverage Cart/Kiosk	\$5,155.67	\$2,964.50	\$2,191.17	Net Book Value	\$2,191.17
Equipment - SNF - Blanket Warmer	\$3,841.88	\$2,089.47	\$1,752.41	Net Book Value	\$1,752.41
Equipment - SNF - Blood Pressure Monitor	\$2,625.00	\$2,625.00	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Blood Pressure Monitor	\$2,625.01	\$2,625.01	\$0.00	Net Book Value	\$0.00
Equipment - HC - Body Lift W/ Scale	\$2,947.50	\$491.24	\$2,456.26	Net Book Value	\$2,456.26
Equipment - Maingate - Camera And Door Access	\$32,749.99	\$32,749.99	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Camera And Sound System	\$4,995.26	\$4,995.26	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Canopy	\$3,292.49	\$2,268.19	\$1,024.30	Net Book Value	\$1,024.30
Equipment - Housekeeping - Carpet Extractor / Upright Vacuum	\$3,140.62	\$418.73	\$2,721.89	Net Book Value	\$2,721.89
Equipment - SNF - Carpet Extractor, Repair	\$229.15	\$229.15	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Cart	\$224.53	\$188.10	\$36.43	Net Book Value	\$36.43
Equipment - SNF - Cart	\$224.53	\$188.10	\$36.43	Net Book Value	\$36.43
Equipment - SNF - Cart	\$224.53	\$188.10	\$36.43	Net Book Value	\$36.43
Equipment - SNF - Cart	\$224.53	\$188.10	\$36.43	Net Book Value	\$36.43
Equipment - SNF - Cart	\$224.53	\$188.10	\$36.43	Net Book Value	\$36.43
Equipment - SNF - Cart Emergency Crash	\$345.83	\$345.83	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Cart Hold And Serve	\$16,891.63	\$14,152.43	\$2,739.20	Net Book Value	\$2,739.20
Equipment - SNF - Carts Isolation	\$174.99	\$174.99	\$0.00	Net Book Value	\$0.00
Equipment - HC - Chair	\$2,507.99	\$1,254.00	\$1,253.99	Net Book Value	\$1,253.99

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - SNF - Chairs Shower Royal Blue W/Sea	\$53.85	\$53.85	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Chest Biaxial A-350	\$2,788.66	\$2,788.66	\$0.00	Net Book Value	\$0.00
Equipment - FS - Cisco Switch/Transceiver	\$5,145.00	\$5,145.00	\$0.00	Net Book Value	\$0.00
Equipment - Facility - Climatedmaster Heat Pumps	\$6,408.00	\$3,043.80	\$3,364.20	Net Book Value	\$3,364.20
Equipment - SNF - Comfort Matt Floor Pad	\$549.58	\$549.58	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Commons - Artwork	\$2,191.51	\$1,509.70	\$681.81	Net Book Value	\$681.81
Equipment - Maingate - Commons - Curtains	\$1,184.49	\$1,184.49	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Commons - Ff&E	\$7,002.94	\$3,339.87	\$3,663.07	Net Book Value	\$3,663.07
Equipment - Maingate - Commons - Furniture	\$18,759.76	\$12,923.36	\$5,836.40	Net Book Value	\$5,836.40
Equipment - SNF - Compressor-Quiet 115V 60H Mod	\$24.75	\$24.75	\$0.00	Net Book Value	\$0.00
Equipment - Facility - Computer	\$739.18	\$739.18	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Condensing Unit	\$3,758.00	\$2,098.23	\$1,659.77	Net Book Value	\$1,659.77
Equipment - SNF - Countertop Hot Plate 4 Burner	\$712.80	\$712.80	\$0.00	Net Book Value	\$0.00
Equipment - HC - Cpr Monitor	\$2,466.80	\$1,713.04	\$753.76	Net Book Value	\$753.76
Equipment - Facility - Credit Card Machines	\$1,851.94	\$848.78	\$1,003.16	Net Book Value	\$1,003.16
Equipment - Wellness - Cross Trainer, Ct9500Hr Pre-Ow	\$1,483.76	\$1,483.76	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Cushiions	\$861.26	\$861.26	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Cybex 525T Treadmill	\$3,722.00	\$682.39	\$3,039.61	Net Book Value	\$3,039.61
Equipment - Heights - Cylindrical Scrubber & Wet Battery	\$5,193.74	\$2,899.81	\$2,293.93	Net Book Value	\$2,293.93
Equipment - SNF - Defibrillator 2B Lifepak 500 A	\$104.42	\$104.42	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Digital Dining Pos System	\$14,540.24	\$14,540.24	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Dish Machine Hobart Crs76A	\$4,271.17	\$4,271.17	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Terraces - Dishmachine Undercounter Hobar	\$1,977.22	\$1,977.22	\$0.00	Net Book Value	\$0.00
Equipment - H1110 - Dishwasher Ge Apt 1110	\$6.13	\$6.13	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Dishwasher Hobart	\$2,046.61	\$2,046.61	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Dishwasher Hobart Lx1H	\$2,798.66	\$2,798.66	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Dishwasher Repair	\$1,205.63	\$1,205.63	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Dishwasher Repair	\$1,357.73	\$1,357.73	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Dishwashers Ge	\$1,071.00	\$1,071.00	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Dishwashers Ge	\$3,468.00	\$3,468.00	\$0.00	Net Book Value	\$0.00
Equipment - Admin - Docking Strn/Keybd/Monitor/Travel Batt.	\$602.00	\$602.00	\$0.00	Net Book Value	\$0.00
Equipment - Mktg - Docking Strn/Keybd/Monitor/Travel Batt.	\$468.43	\$468.43	\$0.00	Net Book Value	\$0.00
Equipment - Dining - Dome Storage Rack	\$2,418.84	\$1,028.03	\$1,390.81	Net Book Value	\$1,390.81
Equipment - Terraces - Door Alarm	\$3,951.21	\$2,502.39	\$1,448.82	Net Book Value	\$1,448.82
Equipment - Maingate - Drive-Thru Landscaping	\$690.00	\$690.00	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Dryer Electric Speed Queen	\$189.15	\$189.15	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Dryer, Clothes	\$250.12	\$250.12	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Dryers Speed Queen	\$509.00	\$509.00	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Dumbell Set	\$609.45	\$609.45	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Dumbell Set, Troy Vinyl	\$115.15	\$115.15	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Dumbells W/ Rack	\$183.03	\$183.03	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Ear Speakers	\$101.76	\$101.76	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Ecs Phase Ii Clinical Module	\$13,131.46	\$13,131.46	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Electric Duct Heater	\$161.45	\$161.45	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Heights - Electronic Chart Software Fina	\$7,108.18	\$7,108.18	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Electronic Chart System Softwa	\$7,108.18	\$7,108.18	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Electronic Chart System Softwa	\$7,108.18	\$7,108.18	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Electronic Chart System Softwa	\$26,063.36	\$26,063.36	\$0.00	Net Book Value	\$0.00
Equipment - Admin - Enterprise E-Time Software	\$5,000.00	\$5,000.00	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Es Lty Tag W/Band	\$1,168.85	\$448.07	\$720.78	Net Book Value	\$720.78
Equipment - SNF - Evap Coil For Kitchen Cooler	\$4,395.60	\$4,095.90	\$299.70	Net Book Value	\$299.70
Equipment - Terraces - Exam Table Power-Height Medali	\$497.25	\$497.25	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Exercise Mats	\$473.12	\$473.12	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Exhaust Fan Replacement	\$14,153.87	\$11,024.38	\$3,129.50	Net Book Value	\$3,129.50
Equipment - Facility - Extreme Steam Model Xs204-14-3	\$5,074.00	\$3,171.21	\$1,902.79	Net Book Value	\$1,902.79
Equipment - Facility - Extreme Steam Model Xs204-14-3	\$4,772.00	\$2,942.77	\$1,829.23	Net Book Value	\$1,829.23
Equipment - Heights - Faucets Delta Bathroom W/Cryst	\$16.87	\$16.87	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Faucets Delta Kitchen W/Knob H	\$33.64	\$33.64	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Fax Machine	\$375.00	\$375.00	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Fax Machine, Lf416E	\$375.00	\$375.00	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Fence	\$1,564.49	\$1,077.79	\$486.70	Net Book Value	\$486.70
Equipment - Heights - Fire Alarm System Panel	\$2,283.75	\$1,046.74	\$1,237.02	Net Book Value	\$1,237.02
Equipment - SNF - Fire Door Replacement	\$652.51	\$449.50	\$203.01	Net Book Value	\$203.01
Equipment - Facility - Fire Extinguishers (40)	\$1,600.00	\$1,306.70	\$293.30	Net Book Value	\$293.30

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Facility - Firm Alarm	\$4,508.13	\$2,066.22	\$2,441.91	Net Book Value	\$2,441.91
Equipment - Wellness - Fitness Analyst	\$1,417.74	\$1,417.74	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Floor Lamps 59In Tall	\$2,985.79	\$2,985.79	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Floor Lamps 59In Tall W/Shades	\$346.51	\$346.51	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Food Processor	\$1,601.82	\$1,257.12	\$344.70	Net Book Value	\$344.70
Equipment - Dining - Food Processor	\$1,075.27	\$376.35	\$698.92	Net Book Value	\$698.92
Equipment - Heights - Freezer Reach In Two Door True	\$1,147.08	\$1,147.08	\$0.00	Net Book Value	\$0.00
Equipment - Dining - Frige, Freezer, Ice Maker, Range	\$5,827.00	\$2,427.94	\$3,399.07	Net Book Value	\$3,399.07
Equipment - Heights - Frigidaie Frig	\$948.60	\$948.60	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Frigidairefrig	\$292.95	\$292.95	\$0.00	Net Book Value	\$0.00
Equipment - H1010 - Frigidairefrigerator Apt 1010	\$90.67	\$90.67	\$0.00	Net Book Value	\$0.00
Equipment - HC - Full Body Lift/Digital Scale	\$7,926.40	\$3,236.58	\$4,689.82	Net Book Value	\$4,689.82
Equipment - HC - Full Body Lifts W/Scale & Accessories (2)	\$9,392.50	\$156.54	\$9,235.96	Net Book Value	\$9,235.96
Equipment - Wellness - Functional Trainer W/Out Base	\$1,785.02	\$1,785.02	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Garbage/Recycling Compactor	\$1,543.74	\$643.29	\$900.45	Net Book Value	\$900.45
Equipment - Heights - Garbage/Recycling Compactor	\$20,173.55	\$8,405.69	\$11,767.87	Net Book Value	\$11,767.87
Equipment - Gas Fryer	\$1,569.00	\$679.90	\$889.10	Net Book Value	\$889.10
Equipment - Maingate - Gas Range	\$1,707.01	\$1,430.19	\$276.83	Net Book Value	\$276.83
Equipment - Terraces - Ge Clothes Dryer	\$321.90	\$269.70	\$52.20	Net Book Value	\$52.20
Equipment - Dining - Guard Sneeze Breath Custom (2)	\$5,274.00	\$2,944.65	\$2,329.35	Net Book Value	\$2,329.35
Equipment - Dining - Guard Sneeze Breath Custom (2)	\$-1,516.16	\$-846.47	\$-669.70	Net Book Value	\$-669.70

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Wellness - Gym Balls	\$84.22	\$84.22	\$0.00	Net Book Value	\$0.00
Equipment - HC - Hamper, With Bags	\$519.27	\$447.86	\$71.42	Net Book Value	\$71.42
Equipment - Hb 201 Analyzer/Cleaner/Single Pk Cuvettes	\$966.00	\$635.95	\$330.05	Net Book Value	\$330.05
Equipment - HC - Hc Reno	\$2,693.33	\$1,212.02	\$1,481.31	Net Book Value	\$1,481.31
Equipment - HC - Hc Reno - Beds	\$22,039.00	\$4,591.48	\$17,447.53	Net Book Value	\$17,447.53
Equipment - HC - Hc Room Remodels	\$18,678.24	\$8,560.84	\$10,117.41	Net Book Value	\$10,117.41
Equipment - Wellness - Heartstart Frx Defibrillator	\$1,165.66	\$1,165.66	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Heat Pump Breaker Panel	\$1,676.44	\$810.26	\$866.18	Net Book Value	\$866.18
Equipment - Wellness Center - Heat Pumps	\$10,000.00	\$4,749.98	\$5,250.02	Net Book Value	\$5,250.02
Equipment - Wellness Center - Heat Pumps	\$555.50	\$259.24	\$296.26	Net Book Value	\$296.26
Equipment - Wellness Center - Heat Pumps	\$693.80	\$323.77	\$370.04	Net Book Value	\$370.04
Equipment - Wellness Center - Heat Pumps	\$14,710.00	\$6,864.65	\$7,845.35	Net Book Value	\$7,845.35
Equipment - Heights - Heat/Cool Units	\$3,922.98	\$3,922.98	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Heated Ultra Camcart	\$3,578.87	\$1,401.70	\$2,177.17	Net Book Value	\$2,177.17
Equipment - Terraces - Heated Ultra Camcart	\$-1,674.13	\$-655.68	\$-1,018.45	Net Book Value	\$-1,018.45
Equipment - Terraces - Heated Ultra Camcart	\$3,179.98	\$1,219.00	\$1,960.98	Net Book Value	\$1,960.98
Equipment - HC - Hot & Cold Units	\$900.00	\$615.00	\$285.00	Net Book Value	\$285.00
Equipment - HC - Hot & Cold Units - 2 & 3 Floor Hc Kitchens	\$3,701.20	\$2,652.49	\$1,048.71	Net Book Value	\$1,048.71
Equipment - HC - Hot & Cold Units - 2 & 3 Floor Hc Kitchens	\$3,000.00	\$2,100.00	\$900.00	Net Book Value	\$900.00
Equipment - HC - Hot & Cold Units - 2 & 3 Floor Hc Kitchens	\$1,458.77	\$1,009.03	\$449.74	Net Book Value	\$449.74
Equipment - Mktg - Hp Care Pack	\$87.00	\$87.00	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Hp Laserjet 4200Tn	\$385.50	\$385.50	\$0.00	Net Book Value	\$0.00
Equipment - Dining - Hp Laserjet P3015Dn Printer	\$836.77	\$836.77	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Htr Bstr 6 Gal 45Kw 480V 3Ph	\$3,509.81	\$2,486.13	\$1,023.69	Net Book Value	\$1,023.69
Equipment - HC - Hvac	\$7,759.60	\$2,457.17	\$5,302.43	Net Book Value	\$5,302.43
Equipment - HC - Hydrocollator, Intermediate Mobile	\$1,052.79	\$780.82	\$271.97	Net Book Value	\$271.97
Equipment - Kitchen - Ice Cream Machine	\$4,748.00	\$1,424.43	\$3,323.57	Net Book Value	\$3,323.57
Equipment - SNF - Ice Dispensar	\$1,840.38	\$1,541.94	\$298.44	Net Book Value	\$298.44
Equipment - SNF - Ice Dispenser M150	\$361.58	\$361.58	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Ice Machine	\$689.79	\$689.79	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Ice Machine	\$2,786.72	\$2,786.72	\$0.00	Net Book Value	\$0.00
Equipment - HC - Ice Machine	\$4,499.00	\$1,874.55	\$2,624.45	Net Book Value	\$2,624.45
Equipment - SNF - Ice Machine W/Bin	\$520.31	\$520.31	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Ice Machine W/Water Valve-Top	\$374.06	\$374.06	\$0.00	Net Book Value	\$0.00
Equipment - Dining - Ice Maker	\$1,635.00	\$599.53	\$1,035.48	Net Book Value	\$1,035.48
Equipment - Heights - Ice Maker W/Dispenser	\$1,452.94	\$1,452.94	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Icp Condensing Unit W/Line Set	\$53.17	\$53.17	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Infocus Projector	\$670.51	\$670.51	\$0.00	Net Book Value	\$0.00
Equipment - Dining - Insinkerator Disposer	\$2,528.32	\$1,264.16	\$1,264.16	Net Book Value	\$1,264.16
Equipment - Dining - Insinkerator Disposer	\$1,541.89	\$770.96	\$770.93	Net Book Value	\$770.93
Equipment - Maingate - John Deere 200Cx Loader	\$3,048.24	\$1,879.71	\$1,168.54	Net Book Value	\$1,168.54
Equipment - HC - Kitchen - Conveyor Warewashers	\$2,182.67	\$1,400.57	\$782.10	Net Book Value	\$782.10
Equipment - MG204 - Kitchen Appliances	\$4,823.95	\$1,447.20	\$3,376.75	Net Book Value	\$3,376.75
Equipment - Facility - Kubota H3000Hsdc Tractor	\$22,594.26	\$7,154.91	\$15,439.35	Net Book Value	\$15,439.35
Equipment - SNF - Lamps Heat Carlisle Dual Arm G	\$675.26	\$565.75	\$109.51	Net Book Value	\$109.51
Equipment - Facility - Laserjet Printer	\$845.06	\$845.06	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Terraces - Laundry Equipment	\$223.12	\$223.12	\$0.00	Net Book Value	\$0.00
Equipment - Facility - Lcd Tv Connection	\$775.00	\$755.65	\$19.35	Net Book Value	\$19.35
Equipment - SNF - Leg Press A-250 Model 2521.12	\$103.33	\$103.33	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lenovo M55E	\$568.57	\$568.57	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lenovo M55E	\$568.57	\$568.57	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Lenovo M55E	\$568.57	\$568.57	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lenovo M55E	\$754.56	\$754.56	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Lenovo M55E Sff Core	\$596.96	\$596.96	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Lenovo M55E Sff Core	\$596.96	\$596.96	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lenovo M55E Sff Core	\$596.96	\$596.96	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lenovo M55E Sff Core 2 Duo	\$821.97	\$821.97	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lenovo M55E Sff Core 2 Duo	\$821.97	\$821.97	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lenovo M55E Sff Core 2 Duo	\$821.97	\$821.97	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lenovo M55E Sff Core 2 Duo	\$821.97	\$821.97	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Lf 95Xi Cross Trainer	\$3,241.40	\$3,241.40	\$0.00	Net Book Value	\$0.00
Equipment - HC - Lg Led 55" Tv / Coby 32" Tv	\$2,848.35	\$1,946.37	\$901.98	Net Book Value	\$901.98
Equipment - Wellness Center - Life Fitness 91Ti Treadmill/Precor 576l	\$5,750.00	\$2,827.11	\$2,922.89	Net Book Value	\$2,922.89
Equipment - Wellness - Life Fitness 95Ci Bike	\$1,764.43	\$1,764.43	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Life Fitness 95Ri Rec Bike	\$1,764.43	\$1,764.43	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lift Arjo Maximove W/Scale	\$177.70	\$177.70	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lift Full Body W/Electronic Sc	\$3,246.75	\$3,246.75	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Lift Walkers Hydraulic	\$2,230.14	\$2,230.14	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Terraces - Lighting To Outdoor Smoking Ar	\$812.07	\$559.40	\$252.68	Net Book Value	\$252.68
Equipment - SNF - Lockers, Hc Nurses Lockers	\$3,003.01	\$2,798.25	\$204.76	Net Book Value	\$204.76
Equipment - Heights - Locks	\$475.28	\$475.28	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Low Beds	\$6,779.51	\$4,670.31	\$2,109.21	Net Book Value	\$2,109.21
Equipment - SNF - Machine Espresso Venezia	\$2,665.57	\$2,665.57	\$0.00	Net Book Value	\$0.00
Equipment - Premier Room - Magic Force Automatic Door	\$3,665.00	\$1,679.79	\$1,985.22	Net Book Value	\$1,985.22
Equipment - Grand Hall - Magic Force Automatic Door	\$3,665.00	\$1,679.79	\$1,985.22	Net Book Value	\$1,985.22
Equipment - SNF - Mattress, Isoflex 2800	\$7,279.99	\$7,279.99	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Maximore Lift W/Scale	\$1,458.80	\$1,458.80	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Maximove V Chassis	\$2,246.02	\$2,246.02	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Mechanical System Replacement	\$1,882.67	\$1,191.09	\$691.58	Net Book Value	\$691.58
Equipment - HC - Med Carts: 2 Xlarge , 3 Large	\$10,770.81	\$6,881.38	\$3,889.43	Net Book Value	\$3,889.43
Equipment - Terraces - Media Center	\$4,995.00	\$4,308.19	\$686.81	Net Book Value	\$686.81
Equipment - Wellness - Medicine Balls	\$133.84	\$133.84	\$0.00	Net Book Value	\$0.00
Equipment - MG - Mg Appliances - 109, 201, Wellness Room	\$2,724.90	\$772.07	\$1,952.83	Net Book Value	\$1,952.83
Equipment - Heights - Micro Hoods Ge	\$30.00	\$30.00	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Microphone	\$166.26	\$166.26	\$0.00	Net Book Value	\$0.00
Equipment - Grand Hall - Microphones	\$4,420.00	\$1,583.82	\$2,836.18	Net Book Value	\$2,836.18
Equipment - H1102 - Microwave,Range (Dryer Terraces)	\$1,235.00	\$535.17	\$699.84	Net Book Value	\$699.84
Equipment - Mini Doppler Kit	\$738.99	\$486.52	\$252.48	Net Book Value	\$252.48
Equipment - Wellness - Miscellaneous	\$170.49	\$170.49	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Facility - Monitoring Pc	\$1,575.00	\$1,575.00	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Move Modular Wall Power	\$286.38	\$286.38	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Msos In Seasons Restaurant	\$777.91	\$330.38	\$447.53	Net Book Value	\$447.53
Equipment - Heights - Msos In Seasons Restaurant	\$777.91	\$330.38	\$447.53	Net Book Value	\$447.53
Equipment - SNF - Muscle Tester Microfet Sn 130	\$18.67	\$18.67	\$0.00	Net Book Value	\$0.00
Equipment - HR - Name Tag Printer	\$4,701.00	\$2,872.81	\$1,828.19	Net Book Value	\$1,828.19
Equipment - Terraces - Nec 17 In Lcd Black Monitor	\$134.59	\$134.59	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Nec 17 In Lcd Black Monitor	\$134.59	\$134.59	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Nec 17 In Lcd Black Monitor	\$134.59	\$134.59	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Nec 17 In Lcd Black Monitor	\$134.59	\$134.59	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Nec 17In Lcd Monitor	\$30.25	\$30.25	\$0.00	Net Book Value	\$0.00
Equipment - Heights - New Electrical Panel	\$4,237.50	\$1,942.18	\$2,295.32	Net Book Value	\$2,295.32
Equipment - Heights - New Electrical Panel	\$1,263.95	\$579.32	\$684.63	Net Book Value	\$684.63
Equipment - Dining - New Freezer Tempature Monitoring / Preparation	\$1,285.00	\$696.05	\$588.96	Net Book Value	\$588.96
Equipment - HC - New Hc Phone System - Wireless Network Phones	\$5,592.50	\$1,864.18	\$3,728.33	Net Book Value	\$3,728.33
Equipment - Equipment - Npv - Equipment	\$-2,045.00	\$-1,278.13	\$-766.88	Net Book Value	\$-766.88
Equipment - Equipment - Npv - Equipment	\$-4,641.92	\$-4,641.92	\$0.00	Net Book Value	\$0.00
Equipment - Equipment - Npv - Equipment	\$-18,795.00	\$-17,505.60	\$-1,289.40	Net Book Value	\$-1,289.40
Equipment - Equipment - Npv - Equipment	\$-32,500.00	\$-32,157.00	\$-343.00	Net Book Value	\$-343.00
Equipment - Terraces - Nurse Call System	\$9,720.82	\$8,144.48	\$1,576.35	Net Book Value	\$1,576.35

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - SNF - Nustep Trs 4000	\$1,417.46	\$1,417.46	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Nustep Trs4000	\$3,815.62	\$3,815.62	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Parking - Artwork	\$1,879.50	\$1,294.79	\$584.71	Net Book Value	\$584.71
Equipment - Maingate - Parking - Curtains	\$1,016.25	\$1,016.25	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Parking - Ff&E	\$6,007.62	\$2,865.18	\$3,142.45	Net Book Value	\$3,142.45
Equipment - Maingate - Parking - Furniture	\$16,093.51	\$11,086.61	\$5,006.90	Net Book Value	\$5,006.90
Equipment - SNF - Patient Full Body Maxi Lift W/	\$2,695.93	\$2,695.93	\$0.00	Net Book Value	\$0.00
Equipment - Facility - Phoenix 200 Dehumidifier	\$1,977.07	\$889.71	\$1,087.36	Net Book Value	\$1,087.36
Equipment - SNF - Phone System Infrastructure Ad	\$5,566.58	\$2,241.07	\$3,325.51	Net Book Value	\$3,325.51
Equipment - Heights - Piano Digital	\$1,085.88	\$1,085.88	\$0.00	Net Book Value	\$0.00
Equipment - Wellness Center - Piping For Test Station And Heat Pumps	\$5,200.00	\$2,556.64	\$2,643.36	Net Book Value	\$2,643.36
Equipment - SNF - Plasma Tv	\$948.56	\$948.56	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Plasma Tv	\$948.56	\$948.56	\$0.00	Net Book Value	\$0.00
Equipment - Pool - Pool Cleaner (Vacuum)	\$2,640.00	\$792.00	\$1,848.00	Net Book Value	\$1,848.00
Equipment - HC - Pool Heater	\$3,682.41	\$1,841.19	\$1,841.22	Net Book Value	\$1,841.22
Equipment - Wellness Center - Pool Pumps	\$3,999.54	\$2,033.09	\$1,966.45	Net Book Value	\$1,966.45
Equipment - HC - Portable Aod Admissions Laptop Cart	\$3,761.03	\$1,065.62	\$2,695.41	Net Book Value	\$2,695.41
Equipment - HC - Portable Aod Admissions Laptop Cart	\$11,003.27	\$2,750.84	\$8,252.43	Net Book Value	\$8,252.43
Equipment - Facility - Pos System	\$17,194.65	\$6,734.60	\$10,460.05	Net Book Value	\$10,460.05
Equipment - SNF - Posey Deluxe Cushions	\$612.64	\$612.64	\$0.00	Net Book Value	\$0.00
Equipment - MainGate - Power Assist Doors	\$892.72	\$431.48	\$461.24	Net Book Value	\$461.24
Equipment - SNF - Printer, Hp Color 4650	\$1,059.75	\$1,059.75	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Printer, Hp Laserjet 4350	\$1,796.04	\$1,796.04	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - SNF - Printer, Hp Laserjet 4350	\$1,796.04	\$1,796.04	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Printer, Hp Laserjet 4350	\$1,373.44	\$1,373.44	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Printer, Hp Lj4350	\$1,722.04	\$1,722.04	\$0.00	Net Book Value	\$0.00
Equipment - Admin - Projector/Case	\$1,055.00	\$1,055.00	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Pro-Lift W/Scale, Sling	\$1,380.99	\$1,380.99	\$0.00	Net Book Value	\$0.00
Equipment - HC - Ptac Units	\$10,584.00	\$4,762.80	\$5,821.20	Net Book Value	\$5,821.20
Equipment - HC - Ptac Units	\$4,117.84	\$1,853.03	\$2,264.82	Net Book Value	\$2,264.82
Equipment - SNF - Pulse Oximeter Hand Held	\$28.63	\$28.63	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Pulse Oximeter Portable N 20E	\$117.53	\$117.53	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Pulse Oximeter Portable N20	\$23.50	\$23.50	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Range	\$335.32	\$335.32	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Range Ge White	\$869.40	\$869.40	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Range Ge White W/Hoods	\$425.07	\$425.07	\$0.00	Net Book Value	\$0.00
Equipment - H1010 - Range White Ge Apt 1010	\$86.12	\$86.12	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Ranges, French Door, (Dryer Terraces)	\$8,804.00	\$3,815.07	\$4,988.93	Net Book Value	\$4,988.93
Equipment - Heights - Reader Screen Zoom Text	\$47.83	\$47.83	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Recliner 16	\$368.51	\$368.51	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Recliner 18 In	\$368.51	\$368.51	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Recliner 18 In	\$368.51	\$368.51	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Recliner 20 In	\$446.43	\$446.43	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Recumbent Bar Kit	\$420.86	\$420.86	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Re-Face Sign	\$899.26	\$837.94	\$61.32	Net Book Value	\$61.32
Equipment - Heights - Refrigeration Unit W/Glass Doo	\$457.74	\$457.74	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Terraces - Refrigerator	\$1,047.11	\$877.30	\$169.81	Net Book Value	\$169.81
Equipment - SNF - Refrigerator Frigidaire	\$169.57	\$169.57	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerator Ge White Apt 1010	\$149.51	\$149.51	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerator Reach In One Door	\$596.14	\$596.14	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Refrigerator Side By Side	\$921.30	\$771.90	\$149.40	Net Book Value	\$149.40
Equipment - SNF - Refrigerator, Frigidaire Top M	\$303.06	\$303.06	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerators Frigidaire	\$24.10	\$24.10	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerators Frigidaire White	\$120.51	\$120.51	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerators Frigidare White	\$120.51	\$120.51	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerators Ge 12 Cu Ft	\$783.26	\$783.26	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerators Ge White	\$1,718.74	\$1,718.74	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerators Ge White	\$3,622.50	\$3,622.50	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerators Mrt White Frigid	\$24.10	\$24.10	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerators White Ge	\$448.50	\$448.50	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Refrigerators White Ge	\$3,909.99	\$3,909.99	\$0.00	Net Book Value	\$0.00
Equipment - Dining - Remote Chiller	\$1,045.00	\$383.18	\$661.83	Net Book Value	\$661.83
Equipment - Heights - Repairs Emergency Electrical	\$3,294.61	\$3,069.99	\$224.62	Net Book Value	\$224.62
Equipment - SNF - Replace Evaporator Coil On Hc	\$3,564.61	\$2,455.59	\$1,109.02	Net Book Value	\$1,109.02
Equipment - Maingate - Residential - Appliances	\$69,553.76	\$69,553.76	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Residential - Artwork	\$8,324.26	\$5,734.46	\$2,589.80	Net Book Value	\$2,589.80
Equipment - Maingate - Residential - Curtains	\$4,499.76	\$4,499.76	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Maingate - Residential - Donor Wall	\$22,571.25	\$10,764.75	\$11,806.50	Net Book Value	\$11,806.50
Equipment - Maingate - Residential - Electrical Vault	\$47,907.43	\$22,848.16	\$25,059.27	Net Book Value	\$25,059.27
Equipment - Maingate - Residential - Elevator	\$73,583.25	\$35,093.55	\$38,489.70	Net Book Value	\$38,489.70
Equipment - Maingate - Residential - F&E	\$26,603.68	\$12,687.91	\$13,915.77	Net Book Value	\$13,915.77
Equipment - Maingate - Residential - Furniture	\$21,156.01	\$14,574.11	\$6,581.90	Net Book Value	\$6,581.90
Equipment - Maingate - Residential - Furniture	\$71,267.23	\$49,095.17	\$22,172.07	Net Book Value	\$22,172.07
Equipment - Maingate - Residential - Kitchen And Bath	\$95,544.13	\$20,426.68	\$75,117.46	Net Book Value	\$75,117.46
Equipment - Maingate - Residential - Kitchen Equipmen	\$17,258.12	\$17,258.12	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Residential - Russell Richard	\$8,546.25	\$8,546.25	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Residential - Stereo System	\$1,096.50	\$1,096.50	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Salad Bar	\$13,559.61	\$11,360.73	\$2,198.89	Net Book Value	\$2,198.89
Equipment - Terraces - Samsung 50" 720P Plasma Tv	\$979.92	\$955.40	\$24.53	Net Book Value	\$24.53
Equipment - SNF - Sara Lifts W/Commde Attachment	\$3,967.64	\$3,967.64	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Sara Lifts W/Commode Attachmen	\$3,399.44	\$3,399.44	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Scale	\$3,418.95	\$3,418.95	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Scale Wheelchair W/Handrail	\$293.76	\$293.76	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Scale, Volaro Lift Series 4 Du	\$3,393.00	\$3,393.00	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Scifit Pro 2 Bike / Precor Amt	\$7,675.13	\$2,942.13	\$4,733.00	Net Book Value	\$4,733.00
Equipment - HC Garage - Security Camera	\$859.94	\$784.69	\$75.25	Net Book Value	\$75.25
Equipment - Terraces - Security Camera	\$1,530.85	\$574.10	\$956.75	Net Book Value	\$956.75
Equipment - SNF - Security Lighting To Outdoor S	\$812.07	\$559.40	\$252.68	Net Book Value	\$252.68

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Heights - Security Lighting To Outdoor S	\$812.07	\$559.40	\$252.68	Net Book Value	\$252.68
Equipment - Maingate - Security Stair Access	\$3,252.63	\$3,252.63	\$0.00	Net Book Value	\$0.00
Equipment - Various - Security System	\$4,617.55	\$3,847.97	\$769.58	Net Book Value	\$769.58
Equipment - Various - Security System	\$2,638.50	\$2,143.78	\$494.72	Net Book Value	\$494.72
Equipment - Various - Security System	\$15,000.00	\$12,187.51	\$2,812.49	Net Book Value	\$2,812.49
Equipment - Various - Security System	\$12,168.85	\$9,633.66	\$2,535.19	Net Book Value	\$2,535.19
Equipment - Various - Security System	\$2,517.50	\$2,045.47	\$472.03	Net Book Value	\$472.03
Equipment - Various - Security System	\$4,026.25	\$3,271.32	\$754.93	Net Book Value	\$754.93
Equipment - Security - Security Upgrades	\$1,013.91	\$304.18	\$709.74	Net Book Value	\$709.74
Equipment - Security - Security Upgrades	\$4,125.00	\$1,100.00	\$3,025.00	Net Book Value	\$3,025.00
Equipment - SNF - Sensor 15	\$548.59	\$548.59	\$0.00	Net Book Value	\$0.00
Equipment - HC - Series 4 Sit-To-Stand Lift	\$1,807.00	\$602.34	\$1,204.67	Net Book Value	\$1,204.67
Equipment - Facility - Server	\$8,515.48	\$8,515.48	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Shower Chairs Duralife Royal B	\$91.13	\$91.13	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Shure Uc Wireless System	\$2,014.99	\$2,014.95	\$0.04	Net Book Value	\$0.04
Equipment - Terraces - Sign, Exterior	\$2,556.50	\$2,382.20	\$174.30	Net Book Value	\$174.30
Equipment - SNF - Sign, Exterior	\$2,556.50	\$2,382.20	\$174.30	Net Book Value	\$174.30
Equipment - Maingate - Sign, Exterior	\$2,556.50	\$2,382.20	\$174.30	Net Book Value	\$174.30
Equipment - Heights - Sign, Exterior	\$2,556.48	\$2,382.20	\$174.29	Net Book Value	\$174.29
Equipment - Terraces - Sign, Exterior	\$4,103.47	\$4,103.47	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Sign, Exterior	\$4,103.47	\$4,103.47	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Signage	\$926.49	\$926.49	\$0.00	Net Book Value	\$0.00
Equipment - Maingate - Signage, Exterior	\$4,103.47	\$4,103.47	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - SNF - Sit To Stand Lift With Scale	\$3,776.31	\$3,163.93	\$612.38	Net Book Value	\$612.38
Equipment - SNF - Sit To Stand Lift With Scale	\$3,776.31	\$3,163.93	\$612.38	Net Book Value	\$612.38
Equipment - SNF - Sit To Stand Lift With Scale	\$3,776.31	\$3,163.93	\$612.38	Net Book Value	\$612.38
Equipment - SNF - Sit To Stand Lift With Scale	\$3,776.31	\$3,163.93	\$612.38	Net Book Value	\$612.38
Equipment - SNF - Sitter Select	\$4,657.99	\$4,657.99	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Slicer Manual	\$509.12	\$396.56	\$112.56	Net Book Value	\$112.56
Equipment - HC - Soft-Fall Bedside Mat	\$638.76	\$550.93	\$87.83	Net Book Value	\$87.83
Equipment - HC - Spot Vital Signs Monitor/Shower Chair	\$12,552.65	\$4,498.07	\$8,054.58	Net Book Value	\$8,054.58
Equipment - Wellness - Stage	\$9,925.26	\$9,925.26	\$0.00	Net Book Value	\$0.00
Equipment - Facility - Stand	\$512.00	\$311.50	\$200.50	Net Book Value	\$200.50
Equipment - Dining - Starbucks Coffee Machine	\$1,665.00	\$1,665.00	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Steam Kettle Ss 40Qt Table Top	\$1,128.66	\$1,128.66	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Steam Table-Heated Serving Uni	\$1,096.20	\$1,096.20	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Steamer Convection Counter Top	\$6,234.63	\$4,856.15	\$1,378.48	Net Book Value	\$1,378.48
Equipment - SNF - Steamers Steam N Hold 6 Pan W/	\$3,394.43	\$3,394.43	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Stove	\$862.50	\$862.50	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Swim Accessories	\$839.70	\$839.70	\$0.00	Net Book Value	\$0.00
Equipment - Premier Room - T Coil Sound System For Hearing Disabled	\$4,997.50	\$499.75	\$4,497.76	Net Book Value	\$4,497.76
Equipment - Wellness - Table - Treatment Table	\$2,837.75	\$1,111.49	\$1,726.27	Net Book Value	\$1,726.27
Equipment - SNF - Table Hi-Lo Mat	\$2,350.78	\$2,350.78	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Tap Device	\$99.99	\$99.99	\$0.00	Net Book Value	\$0.00
Equipment - Telephone - Uninterrupted Power Supply	\$2,360.00	\$1,573.35	\$786.65	Net Book Value	\$786.65

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Heights - Telephone System Cabling	\$1,484.41	\$1,484.41	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Telephone System Cabling	\$3,793.53	\$3,793.53	\$0.00	Net Book Value	\$0.00
Equipment - Facility - Telephone System Lease - Mitel Phones	\$98,544.18	\$73,908.13	\$24,636.05	Net Book Value	\$24,636.05
Equipment - Terraces - Telephone System Wireless Netw	\$4,470.82	\$4,470.82	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Telephone System Wireless Netw	\$5,029.65	\$5,029.65	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Telephone System Wireless Netw	\$12,853.56	\$12,853.56	\$0.00	Net Book Value	\$0.00
Equipment - Facility - Television - Sony 32" Lcd/Wall Mount And Audio Rec.	\$624.95	\$617.17	\$7.78	Net Book Value	\$7.78
Equipment - Wellness - Television Lcd 23 In Olevia Sy	\$778.05	\$778.05	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Television Tilt Mount	\$68.84	\$68.84	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Television, 50In Hitachi	\$1,297.17	\$1,297.17	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Television, Toshiba 26 In Lcd	\$790.49	\$790.49	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Television, Toshiba 26 In Lcd	\$790.48	\$790.48	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Thinkpad T61	\$1,244.74	\$1,244.74	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Thinkpad T61	\$1,244.74	\$1,244.74	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Thinkpad T61	\$1,759.82	\$1,759.82	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Toshiba 26 In Tv With Dvd Cd	\$15,229.49	\$15,229.49	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Touch Screen Monitor	\$1,848.67	\$1,848.67	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Transfer Lift Pro Sit To Stand	\$1,140.82	\$1,140.82	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Treadmill, 91T1	\$2,190.87	\$2,190.87	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Wellness - Treadmill, Wwdr Woodway Desmo	\$3,981.72	\$3,981.72	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Triflex Bed Platform	\$2,200.00	\$1,503.34	\$696.66	Net Book Value	\$696.66
Equipment - Dining - Tv (3)	\$1,813.94	\$1,511.60	\$302.34	Net Book Value	\$302.34
Equipment - Heights - Tv, Lcd 32In Hd	\$2,024.99	\$2,024.99	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Upper Back A-250	\$2,258.15	\$2,258.15	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Vacuum Cleaner Sensor 15In	\$241.79	\$241.79	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Vacuum Cleaners Windsor Sr15	\$34.99	\$34.99	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Vacuum Sensor 15In	\$609.61	\$609.61	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Vacuum, 15In Sensor Windsor	\$989.05	\$989.05	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Vacuums Sensor 15In	\$57.37	\$57.37	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Vacuums Windsor	\$174.99	\$174.99	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Vacuums Windsor Sensor Sr15	\$174.99	\$174.99	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Vacuums Windsor Sensor Sr15	\$34.99	\$34.99	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Vcm Repair Parts	\$67.34	\$67.34	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Vctv Media Center	\$3,044.28	\$3,044.28	\$0.00	Net Book Value	\$0.00
Equipment - Vigil Call System - Vigil Health Solutions Call System	\$28,196.97	\$2,819.70	\$25,377.27	Net Book Value	\$25,377.27
Equipment - Facility - Vital Signs Monitor System	\$6,519.87	\$2,607.94	\$3,911.93	Net Book Value	\$3,911.93
Equipment - Dining - Walk-In Cooler/Freezer	\$8,746.00	\$4,737.41	\$4,008.59	Net Book Value	\$4,008.59
Equipment - Dining - Walk-In Cooler/Freezer	\$14,904.00	\$8,073.00	\$6,831.00	Net Book Value	\$6,831.00
Equipment - Dining - Walk-In Cooler/Freezer - Additional Work	\$1,035.27	\$560.79	\$474.48	Net Book Value	\$474.48

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Dining - Walk-In Cooler/Freezer - Downpayment	\$11,503.63	\$6,231.11	\$5,272.52	Net Book Value	\$5,272.52
Equipment - Dining - Walk-In Cooler/Freezer - Wiring	\$3,000.00	\$1,625.00	\$1,375.00	Net Book Value	\$1,375.00
Equipment - SNF - Wanderguard Devices	\$485.01	\$485.01	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Washer Front Load Frigidaire	\$310.26	\$310.26	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Washer Speed Queen Top Load W/	\$18.94	\$18.94	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Washer Speen Queen	\$383.32	\$383.32	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Washer/Dryer Stacked	\$646.46	\$602.39	\$44.07	Net Book Value	\$44.07
Equipment - Heights - Washers Speed Queen	\$497.57	\$497.57	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Washing Machine With Stand	\$541.93	\$541.93	\$0.00	Net Book Value	\$0.00
Equipment - HC - Water Cooler	\$911.26	\$592.33	\$318.93	Net Book Value	\$318.93
Equipment - Terraces - Water Heater	\$6,495.00	\$2,868.64	\$3,626.37	Net Book Value	\$3,626.37
Equipment - Seasons - Water Heater	\$7,952.50	\$2,584.55	\$5,367.95	Net Book Value	\$5,367.95
Equipment - MG - Water Heater	\$11,195.00	\$3,358.49	\$7,836.52	Net Book Value	\$7,836.52
Equipment - Heights - Water Heater	\$11,985.00	\$3,595.55	\$8,389.46	Net Book Value	\$8,389.46
Equipment - SNF - Water Heater, Kitchen	\$2,356.26	\$2,356.26	\$0.00	Net Book Value	\$0.00
Equipment - HC - Water Heaters	\$23,775.00	\$9,708.18	\$14,066.83	Net Book Value	\$14,066.83
Equipment - Maingate - Water Heaters	\$11,195.00	\$4,384.70	\$6,810.31	Net Book Value	\$6,810.31
Equipment - Heights - Water Heaters	\$21,585.00	\$5,036.51	\$16,548.50	Net Book Value	\$16,548.50
Equipment - Heights - Water Heaters 90 Gallon	\$14,843.74	\$14,843.74	\$0.00	Net Book Value	\$0.00
Equipment - Heights - Water Softner	\$7,029.11	\$7,029.11	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Water Softner Mp-300 Twin Syst	\$3,680.56	\$3,680.56	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchair	\$1,250.01	\$1,250.01	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - SNF - Wheelchair 18 In W/ Attachment	\$1,260.65	\$1,260.65	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchair 20 In	\$264.88	\$264.88	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchair 20 In	\$264.88	\$264.88	\$0.00	Net Book Value	\$0.00
Equipment - Wellness - Wheelchair Aquatic 20	\$423.51	\$423.51	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchair Heavy Duty 22 In	\$284.53	\$284.53	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchair Lt W/Leg Rests	\$45.00	\$45.00	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchair Sacle With Handrail (2)	\$5,610.00	\$1,262.25	\$4,347.75	Net Book Value	\$4,347.75
Equipment - HC - Wheelchair Scale - Double Ramp Fold-Up 1000Lb Cap	\$2,236.12	\$1,583.86	\$652.26	Net Book Value	\$652.26
Equipment - SNF - Wheelchair Scale Oversize	\$1,025.38	\$1,025.38	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchair Washer, Medco	\$7,645.74	\$7,645.74	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchair, 20In Elite Tilt	\$587.49	\$587.49	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchairs	\$51.93	\$51.93	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchairs Tracer 16X	\$51.97	\$51.97	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Wheelchairs Tracer 18X	\$51.97	\$51.97	\$0.00	Net Book Value	\$0.00
Equipment - Terraces - Whiramatic Advance 20 Ultra	\$240.00	\$240.00	\$0.00	Net Book Value	\$0.00
Equipment - Facility - Wifi System And Caat 5 Cables	\$3,773.00	\$1,666.41	\$2,106.60	Net Book Value	\$2,106.60
Equipment - SNF - Wireless Headphones	\$390.01	\$390.01	\$0.00	Net Book Value	\$0.00
Equipment - SNF - Work Table	\$618.43	\$320.61	\$297.82	Net Book Value	\$297.82
Equipment - Wellness - Yoga Equipment	\$41.60	\$41.60	\$0.00	Net Book Value	\$0.00
Equipment - H301 - 1-1 Appliances Not Specified	\$2,871.00	\$215.36	\$2,655.65	Net Book Value	\$2,655.65

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Willow/Sage - 1-1 Appliances Not Specified	\$6,075.55	\$202.52	\$5,873.03	Net Book Value	\$5,873.03
Equipment - Npv - Equipment	\$-13,825.00	\$-13,825.00	\$0.00	Net Book Value	\$0.00
Equipment - Npv - Equipment	\$-50,846.00	\$-50,846.00	\$0.00	Net Book Value	\$0.00
Equipment - Computers - Npv - Comp Equipment	\$-33,545.00	\$-33,545.00	\$0.00	Net Book Value	\$0.00
Equipment - Computers - Npv - Comp Equipment	\$-2,287.00	\$-2,287.00	\$0.00	Net Book Value	\$0.00
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$4,746.36	\$2,241.33	\$2,505.03	Net Book Value	\$2,505.03
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$172.64	\$81.54	\$91.10	Net Book Value	\$91.10
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$1,462.73	\$690.74	\$772.00	Net Book Value	\$772.00
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$2,318.90	\$1,095.03	\$1,223.87	Net Book Value	\$1,223.87
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$3,204.86	\$1,513.40	\$1,691.46	Net Book Value	\$1,691.46
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$1,307.42	\$617.40	\$690.02	Net Book Value	\$690.02
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$112.49	\$53.12	\$59.38	Net Book Value	\$59.38
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$480.09	\$226.72	\$253.37	Net Book Value	\$253.37
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$36.82	\$17.38	\$19.44	Net Book Value	\$19.44
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$49.28	\$23.28	\$26.00	Net Book Value	\$26.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment - Computers & Related - HC - Aod Clinical Software Development	\$204.55	\$96.59	\$107.97	Net Book Value	\$107.97
Equipment - Computers & Related - HC - Clinical Software	\$94.09	\$23.55	\$70.55	Net Book Value	\$70.55
Equipment - Computers & Related - Facility - Hp Renew DI360P Gen8 Server	\$7,045.00	\$1,526.45	\$5,518.55	Net Book Value	\$5,518.55
Equipment - Computers & Related - Security - Install 6 Ip Cameras	\$7,363.73	\$2,209.13	\$5,154.60	Net Book Value	\$5,154.60
Equipment - Computers & Related - Pioneer Pos	\$3,741.55	\$1,766.84	\$1,974.72	Net Book Value	\$1,974.72
Equipment - Computers & Related - Security - Wire Routing/Tracing For 6 New Cameras	\$375.00	\$112.50	\$262.50	Net Book Value	\$262.50
Equipment - Computers & Related - P07WIFI - Wireless Internet	\$-303.84	\$-106.27	\$-197.58	Net Book Value	\$-197.58
Equipment-Computers - P07WIFI - Cable Pulling/Labor	\$973.29	\$332.54	\$640.75	Net Book Value	\$640.75
Equipment-Computers - P07WIFI - Cable Pulling/Labor	\$975.71	\$333.36	\$642.35	Net Book Value	\$642.35
Equipment-Computers - P07WIFI - Cable Pulling/Labor	\$1,750.00	\$597.91	\$1,152.09	Net Book Value	\$1,152.09
Equipment-Computers - P07WIFI - Cable Pulling/Labor	\$9,493.75	\$3,243.71	\$6,250.05	Net Book Value	\$6,250.05
Equipment-Computers - Facility - Computers	\$2,020.00	\$2,020.00	\$0.00	Net Book Value	\$0.00
Equipment-Computers - Facility - Computers	\$5,190.00	\$5,190.00	\$0.00	Net Book Value	\$0.00
Equipment-Computers - Facility - Ipad (3), Keyboard, & Accessories	\$2,404.85	\$2,404.85	\$0.00	Net Book Value	\$0.00
Equipment-Computers - P07WIFI - Network Switches/Labor/Travel	\$1,667.89	\$569.87	\$1,098.02	Net Book Value	\$1,098.02
Equipment-Computers - P07WIFI - Network Switches/Labor/Travel	\$2,141.76	\$731.79	\$1,409.98	Net Book Value	\$1,409.98
Equipment-Computers - Facility - Website	\$9,750.00	\$9,750.00	\$0.00	Net Book Value	\$0.00

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 7, Question 41: Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Equipment-Computers - P07WIFI - Wireless Survey/Cisco Components/Intall/Test	\$26,558.50	\$9,074.15	\$17,484.35	Net Book Value	\$17,484.35
Equipment-Computers - P07WIFI - Wireless Survey/Cisco Components/Intall/Test	\$29,971.23	\$10,240.16	\$19,731.07	Net Book Value	\$19,731.07
Equipment-Computers - P07WIFI - Wireless Survey/Cisco Components/Intall/Test	\$9,919.00	\$3,389.00	\$6,530.01	Net Book Value	\$6,530.01
				TOTAL	\$1,305,553.06

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 8, Question 47: Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
2008 Toyota Sienna 5 Door	\$23,780.00	\$23,780.00	\$0.00	Net Book Value	\$0.00
2009 Ford Challenger 14 Passenger Bus	\$67,065.00	\$67,065.00	\$0.00	Net Book Value	\$0.00
2015 Ford T350 VIN 1FBZX2CM3FKB06571	\$54,654.50	\$4,554.55	\$50,099.96	Net Book Value	\$50,099.96
				TOTAL	\$50,099.96

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 9, Question 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	Nature and extent of debtor's interest in property	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Heights (Independent Living) – 110 S. Henry St., Madison, WI 53703	Land	\$2,390,798.25	Net Book Value	\$2,390,798.25
MainGate (Independent Living) – 333 W. Main St., Madison, WI 53703	Land	\$1,902,819.37	Net Book Value	\$1,902,819.37
Terraces (Assisted Living and Memory Care) – 345 W. Main St., Madison, WI 53703	Land	\$2,578,929.04	Net Book Value	\$2,578,929.04
Capitol Lakes, Inc. Campus - Headquarters at 333 W. Main St., Madison, WI 53703	Renovations Projects	\$450,976.93	Net Book Value	\$450,976.93
Capitol Lakes, Inc. Campus - Headquarters at 333 W. Main St., Madison, WI 53703	Buildings - Health Center	\$1,780,090.30	Net Book Value	\$1,780,090.30
Capitol Lakes, Inc. Campus - Headquarters at 333 W. Main St., Madison, WI 53703	Buildings - Residential	\$28,847,258.62	Net Book Value	\$28,847,258.62
Capitol Lakes, Inc. Campus - Headquarters at 333 W. Main St., Madison, WI 53703	Land Improvements	\$635,295.34	Net Book Value	\$635,295.34
315 West Main Street, Madison, WI 53703	Land	\$147,298.49	Net Book Value	\$147,298.49
321 West Main Street, Madison, WI 53703	Land	\$184,346.23	Net Book Value	\$184,346.23
323 West Main Street, Madison, WI 53703	Land	\$289,142.17	Net Book Value	\$289,142.17
Health Center (Skilled Nursing Facility) – 334 W. Doty St., Madison, WI 53703	Land	\$1,044,266.45	Net Book Value	\$1,044,266.45
			TOTAL	\$40,251,221.19

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 10, Question 60: Patents, copyrights, trademarks, and trade secrets

General Description	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Image Trademark issued July 7, 2009 - Registration No. 3,649,723.			Undetermined
Trade Secrets			Undetermined
		TOTAL	\$0.00 + undetermined amounts

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 11, Question 73: Interests in insurance policies or annuities

Description	Policy type	Policy number	Current value of debtor's interest
CARING COMMUNITIES RECIPROCAL RISK RETENTION GROUP	General/Professional Liability—Primary and Excess Coverage - Debtor is named insured to Pacific Retirement Systems, Inc. Master Policy	CCRRRG-0015-16	Undetermined
CHURCH MUTUAL INSURANCE COMPANY	Automobile Liability - Debtor is named insured to Pacific Retirement Systems, Inc. Master Policy	03033709728246	Undetermined
CARING COMMUNITIES RECIPROCAL RISK RETENTION GROUP	Automobile Excess Liability - Debtor is named insured to Pacific Retirement Systems, Inc. Master Policy	CCRRRG-0015-16	Undetermined
ACE AMERICAN INSURANCE COMPANY	Storage Tank Liability	G24666086	Undetermined
TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA	Property Liability - Debtor is named insured to Pacific Retirement Systems, Inc. Master Policy	KTJCMB2305N08715	Undetermined
TRAVELERS PROPERTY CASUALTY COMPANY OF AMERICA	Crime - Debtor is named insured to Pacific Retirement Systems, Inc. Master Policy	105699312	Undetermined
WESCO INSURANCE COMPANY/WESTCHESTER FIRE INSURANCE COMPANY/RSUI INDEMNITY COMPANY	Employment Practices and Director and Officer Liability/Excess Coverage/ Director and Officer Liability—Excess Side A Coverage - Debtor is named insured to Pacific Retirement Systems, Inc. Master Policy	WIC—EUW108228402/WFIC— G24343340004/NHS665596	Undetermined
ALASKA NATIONAL INSURANCE COMPANY/OLD REPUBLIC INSURANCE COMPANY	Workers' Compensation - Debtor is named insured to Pacific Retirement Systems, Inc. Master Policy	Alaska National— 15JWS09338	Undetermined
CARING COMMUNITIES RECIPROCAL RISK RETENTION GROUP	Employer's Liability - Debtor is named insured to Pacific Retirement Systems, Inc. Master Policy	CCRRRG-0015-16	Undetermined
NORTH AMERICAN SPECIALTY INSURANCE CO.	Patient Trust Surety Bond—Terraces	2179101	Undetermined
NORTH AMERICAN SPECIALTY INSURANCE CO.	Patient Trust Surety Bond—Health Center	2179102	Undetermined
HARTFORD FIRE INSURANCE COMPANY	Unemployment Surety Bond	52BSBFG2612	Undetermined
		TOTAL	\$0.00 + undetermined amounts

Debtor Name: Capitol Lakes, Inc.

Case Number: 16-10158 (RDM)

Assets - Real and Personal Property

Part 11, Question 77: Other property of any kind not already listed

Description	Current value of debtor's interest
Country Club Membership	Undetermined
Affiliate Receivable - Capital Lakes Foundation	\$8,801.23
Affiliate Receivable - Holladay Park	\$30.67
Affiliate Receivable - Middleton Glen	\$36,300.76
Affiliate Receivable - Rogue Valley Manor	\$30.67
Affiliate Receivable - Trinity Terrace	\$61.34
Affiliate Receivable - University Retirement Community	\$53.98
Restricted Funds - Interest in Net Assets of Capitol Lakes Foundation	\$923,690.00
TOTAL	\$968,968.65 + undetermined amounts

Fill in this information to identify the case:

Debtor name Capitol Lakes, Inc.
United States Bankruptcy Court for the: Western District of Wisconsin
(State)
Case number (if known): 16-10158 (RDM)

☐ 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 Creditor's name

KBC BANK N.V.

Describe debtor's property that is subject to a lien

As defined in the underlying documents

\$ Undetermined

\$ Undetermined

Creditor's mailing address

1177 AVE OF AMERICAS
NEW YORK, NY 10036

Describe the lien

2008C Letter of Credit with a \$7,140,010 Limit related to 2008C Master Bond Note - Original principal amount of \$6,985,000

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

Creditor's email address, if known
raymond.murray@kbc.be

Date debt was incurred Undetermined

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.

2.2 Creditor's name

KBC BANK N.V.

Describe debtor's property that is subject to a lien

As defined in the underlying documents

\$ Undetermined

\$ Undetermined

Creditor's mailing address

1177 AVE OF AMERICAS
NEW YORK, NY 10036

Describe the lien

2002 Letter of Credit with a \$7,277,126 Limit related to 2002 Master Bond Note - Original principal amount of \$8,000,000

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

Creditor's email address, if known
raymond.murray@kbc.be

Date debt was incurred Undetermined

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☐ No
☐ Yes. Have you already specified the relative priority?
☐ No. Specify each creditor, including this creditor, and its relative priority.

☐ Yes. The relative priority of creditors is specified on lines

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

\$ 52,178,599.87
+ undetermined amounts

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Part 1: Additional Page

Column B
Amount of claim
Do not deduct the
value of collateral

Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.3 Creditor's name KBC BANK N.V.</p> <p>Creditor's mailing address 1177 AVE OF AMERICAS NEW YORK, NY 10036</p> <p>Creditor's email address, if known raymond.murray@kbc.be</p> <p>Date debt was incurred Undetermined Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines </p>	<p>Describe debtor's property that is subject to a lien As defined in the underlying documents</p> <p>Describe the lien 2008A Letter of Credit with a \$15,480,030 Limit related to 2008A Master Bond Note - Original principal amount of \$15,210,000</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes </p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) </p> <p>As of the petition date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </p>	<p><u>\$Undetermined</u></p>	<p><u>\$Undetermined</u></p>
<p>2.4 Creditor's name KBC BANK N.V., NEW YORK BRANCH</p> <p>Creditor's mailing address ATTN: GENERAL COUNSEL 1177 AVENUE OF THE AMERICAS NEW YORK, NY 10036</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines </p>	<p>Describe debtor's property that is subject to a lien As indicated in initial UCC filing and subsequent UCC filings.</p> <p>Describe the lien Wisconsin UCC Financing Statement number 080004425924 dated 4/1/2008 and all subsequent filings.</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes </p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) </p> <p>As of the petition date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed </p>	<p><u>\$Undetermined</u></p>	<p><u>\$Undetermined</u></p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Part 1: Additional Page

Column B
Amount of claim
Do not deduct the
value of collateral

Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.5</p> <p>Creditor's name NEC FINANCIAL SERVICES, LLC</p> <p>Creditor's mailing address ATTN: GENERAL COUNSEL 250 PEHLE AVE. SUITE 309 SADDLE BROOK, NJ 7663</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines</p>	<p>Describe debtor's property that is subject to a lien As indicated in initial UCC filing and subsequent UCC filings.</p> <p>Describe the lien Wisconsin UCC Financing Statement number 120002359120 dated 2/22/2012 and all subsequent filings.</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p>	<p><u>\$Undetermined</u></p>	<p><u>\$Undetermined</u></p>
<p>2.6</p> <p>Creditor's name SANTANDER BANK N.A.</p> <p>Creditor's mailing address 111 S WACKER DR, SUITE 3925 CHICAGO, IL 60606</p> <p>Creditor's email address, if known nodell@santander.us</p> <p>Date debt was incurred Undetermined Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines</p>	<p>Describe debtor's property that is subject to a lien As defined in the underlying documents</p> <p>Describe the lien 2008B Letter of Credit with a \$29,901,596 Limit related to 2008B Master Bond Note - Original principal amount of \$29,380,000</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p><u>\$Undetermined</u></p>	<p><u>\$Undetermined</u></p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Part 1: Additional Page

Column B
Amount of claim
Do not deduct the
value of collateral

Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.7</p> <p>Creditor's name U.S. BANK NATIONAL ASSOCIATION, AS MASTER TRUSTEE</p> <p>Creditor's mailing address DANE COUNTY TITLE COMPANY INC ATTN: CRAIG FERGUSON, CORP/UCC DIVISION 901 S. WHITNEY WAY MADISON, WI 53711</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines</p>	<p>Describe debtor's property that is subject to a lien As indicated in initial UCC filing and subsequent UCC filings.</p> <p>Describe the lien Wisconsin UCC Financing Statement number 080004504922 dated 4/2/2008 and all subsequent filings.</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p>	<p><u>\$Undetermined</u></p>	<p><u>\$Undetermined</u></p>
<p>2.8</p> <p>Creditor's name U.S. BANK NATIONAL ASSOCIATION, AS TRUSTEE</p> <p>Creditor's mailing address 555 SW OAK ST PORTLAND, OR 97204</p> <p>Creditor's email address, if known cherylk.nelson@usbank.com</p> <p>Date debt was incurred Undetermined Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines</p>	<p>Describe debtor's property that is subject to a lien As defined in the underlying documents</p> <p>Describe the lien 2002 Master Bond Note - Original principal amount of \$8,000,000 secured by the 2002 KBC Bank N.V. Letter of Credit with a \$7,277,126 Limit</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p><u>\$5,290,115.60</u></p>	<p><u>\$Undetermined</u></p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Part 1: Additional Page

Column B
Amount of claim
Do not deduct the
value of collateral

Column B
Value of collateral
that supports this
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.9</p> <p>Creditor's name U.S. BANK NATIONAL ASSOCIATION, AS TRUSTEE</p> <p>Creditor's mailing address 555 SW OAK ST PORTLAND, OR 97204</p> <p>Creditor's email address, if known cherylk.nelson@usbank.com</p> <p>Date debt was incurred Undetermined Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines</p>	<p>Describe debtor's property that is subject to a lien As defined in the underlying documents</p> <p>Describe the lien 2008A Master Bond Note - Original principal amount of \$15,210,000 secured by the 2008A KBC Bank N.V. Letter of Credit with a \$15,480,030 Limit</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p><u>\$15,212,202.54</u></p> <p><u>\$Undetermined</u></p>
<p>2.10</p> <p>Creditor's name U.S. BANK NATIONAL ASSOCIATION, AS TRUSTEE</p> <p>Creditor's mailing address 555 SW OAK ST PORTLAND, OR 97204</p> <p>Creditor's email address, if known cherylk.nelson@usbank.com</p> <p>Date debt was incurred Undetermined Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines</p>	<p>Describe debtor's property that is subject to a lien As defined in the underlying documents</p> <p>Describe the lien 2008B Master Bond Note - Original principal amount of \$29,380,000 secured by the 2008B Santander Bank N.A. Letter of Credit with a \$29,901,596 Limit</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</p> <p>As of the petition date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p><u>\$26,085,242.32</u></p> <p><u>\$Undetermined</u></p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Part 1: Additional Page

Column B
Amount of claim
Do not deduct the
value of collateral

Column B
**Value of collateral
that supports this
claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

<p>2.11</p> <p>Creditor's name U.S. BANK NATIONAL ASSOCIATION, AS TRUSTEE</p> <p>Creditor's mailing address 555 SW OAK ST PORTLAND, OR 97204</p> <p>Creditor's email address, if known cherylk.nelson@usbank.com</p> <p>Date debt was incurred Undetermined Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines </p>	<p>Describe debtor's property that is subject to a lien As defined in the underlying documents</p> <p>Describe the lien 2008C Master Bond Note - Original principal amount of \$6,985,000 secured by the 2008C KBC Bank N.V. Letter of Credit with a \$7,140,010 Limit</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes </p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) </p> <p>As of the petition date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed </p>	<p><u>\$5,591,039.41</u></p>	<p><u>\$Undetermined</u></p>
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Fill in this information to identify the case:

Debtor Capitol Lakes, Inc.
United States Bankruptcy Court for the: Western District of Wisconsin
(State)
Case number 16-10158 (RDM)
(If known)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

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

Part 1: List All Creditors with PRIORITY Unsecured Claims

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

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

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

Total claim

Priority amount

2.1 Priority creditor's name and mailing address

CITY OF MADISON TREASURER'S OFFICE
CITY-COUNTY BUILDING
210 MARTIN LUTHER KING JR. BLVD, ROOM 107
MADISON, WI 53703-3342

As of the petition filing date, the claim is: \$ Undetermined

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

\$ Undetermined

Date or dates debt was incurred

Basis for the claim:

Tax Claim

Last 4 digits of account number

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()

2.2 Priority creditor's name and mailing address

DEPARTMENT OF HEALTH SERVICES
1 WEST WILSON STREET
MADISON, WI 53703

As of the petition filing date, the claim is: \$ Undetermined

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

\$ Undetermined

Date or dates debt was incurred

Basis for the claim:

Tax Claim

Last 4 digits of account number

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()

2.3 Priority creditor's name and mailing address

WISCONSIN DEPARTMENT OF FINANCIAL INSTITUTIONS
201 W WASHINGTON AVE
MADISON, WI 53703

As of the petition filing date, the claim is: \$ Undetermined

Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

\$ Undetermined

Date or dates debt was incurred

Basis for the claim:

Tax Claim

Last 4 digits of account number

Is the claim subject to offset?

- ☐ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ()

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Part 1. Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.4 **Priority creditor's name and mailing address**

\$Undetermined

\$Undetermined

WISCONSIN DEPARTMENT OF REVENUE
2135 RIMROCK ROAD
MADISON, WI 53703

As of the petition filing date, the claim is:
Check all that apply.

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Date or dates debt was incurred

Basis for the claim:
Tax 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) ()

- ☐ No
☐ Yes

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

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 A & A ENVIRONMENTAL, INC. N4381 US HWY 51 POYNETTE, WI 53955 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 300.00
3.2	Nonpriority creditor's name and mailing address ADP, INC. 504 CLINTON CENTER DRIVE SUITE 4400 CLINTON, MS 39056 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 1,951.27
3.3	Nonpriority creditor's name and mailing address ADVACARE SYSTEMS, INC. 2939 NORTH PULASKI RD. CHICAGO, IL 60641 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 1,082.50
3.4	Nonpriority creditor's name and mailing address ALCO OF WISCONSIN INC PO BOX 485 DELAVER, WI 53115-0485 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 398.55
3.5	Nonpriority creditor's name and mailing address ALPHA BAKING CO, INC 36230 TREASURY CENTER CHICAGO, IL 60694-6200 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 1,102.80
3.6	Nonpriority creditor's name and mailing address AMERICAN DATA P.O. BOX 640 SAUK CITY, WI 53583 Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes \$ 1,351.20

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Amount of claim

3.7	Nonpriority creditor's name and mailing address	<u>\$25.96</u>
	<p>ASC1 PO BOX 8779 MADISON, WI 53708-8779</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.8	Nonpriority creditor's name and mailing address	<u>\$1,154.69</u>
	<p>AT & T MOBILITY P.O. BOX 6463 CAROL STREAM, IL 60197-6463</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.9	Nonpriority creditor's name and mailing address	<u>\$1,049.94</u>
	<p>AT&T P.O. BOX 5019 CAROL STREAM, IL 60197-5019</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.10	Nonpriority creditor's name and mailing address	<u>\$1,472.47</u>
	<p>BADGER SWIMPOOLS INC N789 GOLF ROAD PRAIRIE DU SAC, WI 53578</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.11	Nonpriority creditor's name and mailing address	<u>\$278.48</u>
	<p>BADGERLAND SUPPLY INC. PO BOX 259066 MADISON, WI 53725-9066</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.12	Nonpriority creditor's name and mailing address	\$216.10
	<p>BATTERIES PLUS LLC P.O. BOX 71471 CHICAGO, IL 60694-1471</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.13	Nonpriority creditor's name and mailing address	\$1,325.49
	<p>BMO HARRIS BANK N.A. FDBA M & I BANK P.O. BOX 3052 MILWAUKEE, WI 53201-3052</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.14	Nonpriority creditor's name and mailing address	\$2,881.10
	<p>BPV CAPITAL MANAGEMENT 9202 S. NORTHSORE DRIVE STE. 300 KNOXVILLE, TN 37922</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.15	Nonpriority creditor's name and mailing address	\$1,380.00
	<p>BRIGHT STAR 3240 UNIVERSITY AVE. STE. 3A MADISON, WI 53705</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.16	Nonpriority creditor's name and mailing address	\$286.29
	<p>C.E. SUNDBERG CO. 7534 SOLUTION CENTER CHICAGO, IL 60677-7005</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.17	Nonpriority creditor's name and mailing address	\$55.00
	<p>CAPITOL EXPRESS TRANSPORTATION 1319 HERITAGE LANE SUN PRAIRIE, WI 53590</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.18	Nonpriority creditor's name and mailing address	\$95.00
	<p>CARISOLO, INC S11251 FAIRVIEW RD. SPRING GREEN, WI 53588</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.19	Nonpriority creditor's name and mailing address	\$219.42
	<p>CHEM-TECH INTERNATIONAL, INC. 400 TERNES DRIVE RANDOM LAKE, WI 53075-1632</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.20	Nonpriority creditor's name and mailing address	\$135.00
	<p>CHOLAS FLORAL CO INC 1135 REGENT ST MADISON, WI 53715</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.21	Nonpriority creditor's name and mailing address	\$29,135.10
	<p>CINTAS CORPORATION ATTN: DIANE COLEMAN 97627 EAGLE WAY CHICAGO, IL 60678-7627</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.22	Nonpriority creditor's name and mailing address	<u>\$6,466.71</u>
	<p>CITY TREASURER PO BOX 2997 MADISON, WI 53701</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.23	Nonpriority creditor's name and mailing address	<u>\$3,112.58</u>
	<p>COMPLETE CONTROL, INC. 640 25TH AVENUE NORTH WISCONSIN RAPIDS, WI 54495</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.24	Nonpriority creditor's name and mailing address	<u>\$725.00</u>
	<p>COWAN, BEKKI DBA TRIQUETRA MASSAGE 734 JUPITER DRIVE, #206 MADISON, WI 53718</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.25	Nonpriority creditor's name and mailing address	<u>\$17,395.52</u>
	<p>CREATIVE SOLUTIONS 4, LLC ATTN: LEE ESSER 2310 DANIELS STREET SUITE A MADISON, WI 53718</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.26	Nonpriority creditor's name and mailing address	<u>\$500.00</u>
	<p>CUSTOMER_2666 ADDRESS ON FILE</p> <p>Date or dates 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 checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.27	Nonpriority creditor's name and mailing address CUSTOMER_2667 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.28	Nonpriority creditor's name and mailing address CUSTOMER_2668 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.29	Nonpriority creditor's name and mailing address CUSTOMER_2669 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.30	Nonpriority creditor's name and mailing address CUSTOMER_2670 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.31	Nonpriority creditor's name and mailing address CUSTOMER_2671 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.32	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2672 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.33	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2673 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.34	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2674 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.35	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2675 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.36	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2676 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.37	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2677 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.38	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2678 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.39	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2679 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.40	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2680 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.41	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2681 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.42	Nonpriority creditor's name and mailing address CUSTOMER_2682 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.43	Nonpriority creditor's name and mailing address CUSTOMER_2683 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.44	Nonpriority creditor's name and mailing address CUSTOMER_2684 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.45	Nonpriority creditor's name and mailing address CUSTOMER_2685 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.46	Nonpriority creditor's name and mailing address CUSTOMER_2686 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$500.00

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Amount of claim

3.47	Nonpriority creditor's name and mailing address CUSTOMER_2687 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.48	Nonpriority creditor's name and mailing address CUSTOMER_2688 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.49	Nonpriority creditor's name and mailing address CUSTOMER_2689 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.50	Nonpriority creditor's name and mailing address CUSTOMER_2690 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.51	Nonpriority creditor's name and mailing address CUSTOMER_2691 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.52	Nonpriority creditor's name and mailing address CUSTOMER_2692 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.53	Nonpriority creditor's name and mailing address CUSTOMER_2693 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.54	Nonpriority creditor's name and mailing address CUSTOMER_2694 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.55	Nonpriority creditor's name and mailing address CUSTOMER_2695 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.56	Nonpriority creditor's name and mailing address CUSTOMER_2696 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.57	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2697 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.58	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2698 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.59	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2699 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.60	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2700 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.61	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2701 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.62	Nonpriority creditor's name and mailing address CUSTOMER_2702 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.63	Nonpriority creditor's name and mailing address CUSTOMER_2703 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.64	Nonpriority creditor's name and mailing address CUSTOMER_2704 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.65	Nonpriority creditor's name and mailing address CUSTOMER_2705 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.66	Nonpriority creditor's name and mailing address CUSTOMER_2706 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.67	Nonpriority creditor's name and mailing address CUSTOMER_2707 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	Amount of claim \$1,000.00 As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.68	Nonpriority creditor's name and mailing address CUSTOMER_2708 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	Amount of claim \$1,000.00 As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.69	Nonpriority creditor's name and mailing address CUSTOMER_2709 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	Amount of claim \$1,000.00 As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.70	Nonpriority creditor's name and mailing address CUSTOMER_2710 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	Amount of claim \$1,000.00 As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes
3.71	Nonpriority creditor's name and mailing address CUSTOMER_2711 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	Amount of claim \$1,000.00 As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes

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Amount of claim

3.72	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2712 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.73	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2713 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.74	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2714 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.75	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2715 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.76	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2716 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.77	Nonpriority creditor's name and mailing address CUSTOMER_2717 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.78	Nonpriority creditor's name and mailing address CUSTOMER_2718 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.79	Nonpriority creditor's name and mailing address CUSTOMER_2719 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.80	Nonpriority creditor's name and mailing address CUSTOMER_2720 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.81	Nonpriority creditor's name and mailing address CUSTOMER_2721 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.82	Nonpriority creditor's name and mailing address CUSTOMER_2722 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.83	Nonpriority creditor's name and mailing address CUSTOMER_2723 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.84	Nonpriority creditor's name and mailing address CUSTOMER_2724 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.85	Nonpriority creditor's name and mailing address CUSTOMER_2725 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.86	Nonpriority creditor's name and mailing address CUSTOMER_2726 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.87	Nonpriority creditor's name and mailing address CUSTOMER_2727 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.88	Nonpriority creditor's name and mailing address CUSTOMER_2728 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.89	Nonpriority creditor's name and mailing address CUSTOMER_2729 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.90	Nonpriority creditor's name and mailing address CUSTOMER_2730 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.91	Nonpriority creditor's name and mailing address CUSTOMER_2731 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.92	Nonpriority creditor's name and mailing address CUSTOMER_2732 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.93	Nonpriority creditor's name and mailing address CUSTOMER_2733 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.94	Nonpriority creditor's name and mailing address CUSTOMER_2734 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.95	Nonpriority creditor's name and mailing address CUSTOMER_2735 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.96	Nonpriority creditor's name and mailing address CUSTOMER_2736 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.97	Nonpriority creditor's name and mailing address CUSTOMER_2737 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.98	Nonpriority creditor's name and mailing address CUSTOMER_2738 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.99	Nonpriority creditor's name and mailing address CUSTOMER_2739 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.100	Nonpriority creditor's name and mailing address CUSTOMER_2740 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.101	Nonpriority creditor's name and mailing address CUSTOMER_2741 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.102	Nonpriority creditor's name and mailing address CUSTOMER_2742 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.103	Nonpriority creditor's name and mailing address CUSTOMER_2743 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.104	Nonpriority creditor's name and mailing address CUSTOMER_2744 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.105	Nonpriority creditor's name and mailing address CUSTOMER_2745 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.106	Nonpriority creditor's name and mailing address CUSTOMER_2746 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.107	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2747 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.108	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2748 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.109	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2749 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.110	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2750 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.111	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2751 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.112	Nonpriority creditor's name and mailing address CUSTOMER_2752 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.113	Nonpriority creditor's name and mailing address CUSTOMER_2753 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.114	Nonpriority creditor's name and mailing address CUSTOMER_2754 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.115	Nonpriority creditor's name and mailing address CUSTOMER_2755 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.116	Nonpriority creditor's name and mailing address CUSTOMER_2756 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.117	Nonpriority creditor's name and mailing address CUSTOMER_2757 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.118	Nonpriority creditor's name and mailing address CUSTOMER_2758 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.119	Nonpriority creditor's name and mailing address CUSTOMER_2759 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.120	Nonpriority creditor's name and mailing address CUSTOMER_2760 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.121	Nonpriority creditor's name and mailing address CUSTOMER_2761 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.122	Nonpriority creditor's name and mailing address CUSTOMER_2762 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.123	Nonpriority creditor's name and mailing address CUSTOMER_2763 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.124	Nonpriority creditor's name and mailing address CUSTOMER_2764 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.125	Nonpriority creditor's name and mailing address CUSTOMER_2765 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.126	Nonpriority creditor's name and mailing address CUSTOMER_2766 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.127	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2767 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.128	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2768 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.129	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2769 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.130	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2770 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.131	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2771 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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3.132	Nonpriority creditor's name and mailing address CUSTOMER_2772 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.133	Nonpriority creditor's name and mailing address CUSTOMER_2773 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.134	Nonpriority creditor's name and mailing address CUSTOMER_2774 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.135	Nonpriority creditor's name and mailing address CUSTOMER_2775 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.136	Nonpriority creditor's name and mailing address CUSTOMER_2776 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.137	Nonpriority creditor's name and mailing address CUSTOMER_2777 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.138	Nonpriority creditor's name and mailing address CUSTOMER_2778 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.139	Nonpriority creditor's name and mailing address CUSTOMER_2779 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.140	Nonpriority creditor's name and mailing address CUSTOMER_2780 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.141	Nonpriority creditor's name and mailing address CUSTOMER_2781 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.142	Nonpriority creditor's name and mailing address CUSTOMER_2782 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.143	Nonpriority creditor's name and mailing address CUSTOMER_2783 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.144	Nonpriority creditor's name and mailing address CUSTOMER_2784 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.145	Nonpriority creditor's name and mailing address CUSTOMER_2785 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.146	Nonpriority creditor's name and mailing address CUSTOMER_2786 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.147	Nonpriority creditor's name and mailing address CUSTOMER_2787 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.148	Nonpriority creditor's name and mailing address CUSTOMER_2788 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.149	Nonpriority creditor's name and mailing address CUSTOMER_2789 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.150	Nonpriority creditor's name and mailing address CUSTOMER_2790 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.151	Nonpriority creditor's name and mailing address CUSTOMER_2791 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.152	Nonpriority creditor's name and mailing address CUSTOMER_2792 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.153	Nonpriority creditor's name and mailing address CUSTOMER_2793 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.154	Nonpriority creditor's name and mailing address CUSTOMER_2794 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.155	Nonpriority creditor's name and mailing address CUSTOMER_2795 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.156	Nonpriority creditor's name and mailing address CUSTOMER_2796 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.157	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2797 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.158	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2798 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.159	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2799 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.160	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2800 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.161	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2801 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.162	Nonpriority creditor's name and mailing address CUSTOMER_2802 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$9,000.00
3.163	Nonpriority creditor's name and mailing address CUSTOMER_2803 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.164	Nonpriority creditor's name and mailing address CUSTOMER_2804 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.165	Nonpriority creditor's name and mailing address CUSTOMER_2805 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.166	Nonpriority creditor's name and mailing address CUSTOMER_2806 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.167	Nonpriority creditor's name and mailing address CUSTOMER_2807 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.168	Nonpriority creditor's name and mailing address CUSTOMER_2808 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.169	Nonpriority creditor's name and mailing address CUSTOMER_2809 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.170	Nonpriority creditor's name and mailing address CUSTOMER_2810 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.171	Nonpriority creditor's name and mailing address CUSTOMER_2811 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.172	Nonpriority creditor's name and mailing address CUSTOMER_2812 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.173	Nonpriority creditor's name and mailing address CUSTOMER_2813 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.174	Nonpriority creditor's name and mailing address CUSTOMER_2814 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.175	Nonpriority creditor's name and mailing address CUSTOMER_2815 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.176	Nonpriority creditor's name and mailing address CUSTOMER_2816 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.177	Nonpriority creditor's name and mailing address CUSTOMER_2817 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.178	Nonpriority creditor's name and mailing address CUSTOMER_2818 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.179	Nonpriority creditor's name and mailing address CUSTOMER_2819 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.180	Nonpriority creditor's name and mailing address CUSTOMER_2820 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.181	Nonpriority creditor's name and mailing address CUSTOMER_2821 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.182	Nonpriority creditor's name and mailing address CUSTOMER_2822 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.183	Nonpriority creditor's name and mailing address CUSTOMER_2823 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.184	Nonpriority creditor's name and mailing address CUSTOMER_2824 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.185	Nonpriority creditor's name and mailing address CUSTOMER_2825 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.186	Nonpriority creditor's name and mailing address CUSTOMER_2826 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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3.187	Nonpriority creditor's name and mailing address CUSTOMER_2827 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.188	Nonpriority creditor's name and mailing address CUSTOMER_2828 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.189	Nonpriority creditor's name and mailing address CUSTOMER_2829 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.190	Nonpriority creditor's name and mailing address CUSTOMER_2830 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.191	Nonpriority creditor's name and mailing address CUSTOMER_2831 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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3.192	Nonpriority creditor's name and mailing address CUSTOMER_2832 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.193	Nonpriority creditor's name and mailing address CUSTOMER_2833 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.194	Nonpriority creditor's name and mailing address CUSTOMER_2834 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.195	Nonpriority creditor's name and mailing address CUSTOMER_2835 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.196	Nonpriority creditor's name and mailing address CUSTOMER_2836 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.197	Nonpriority creditor's name and mailing address CUSTOMER_2837 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.198	Nonpriority creditor's name and mailing address CUSTOMER_2838 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.199	Nonpriority creditor's name and mailing address CUSTOMER_2839 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.200	Nonpriority creditor's name and mailing address CUSTOMER_2840 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.201	Nonpriority creditor's name and mailing address CUSTOMER_2841 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.202	Nonpriority creditor's name and mailing address CUSTOMER_2842 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.203	Nonpriority creditor's name and mailing address CUSTOMER_2843 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.204	Nonpriority creditor's name and mailing address CUSTOMER_2844 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.205	Nonpriority creditor's name and mailing address CUSTOMER_2845 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.206	Nonpriority creditor's name and mailing address CUSTOMER_2846 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.207	Nonpriority creditor's name and mailing address CUSTOMER_2847 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.208	Nonpriority creditor's name and mailing address CUSTOMER_2848 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.209	Nonpriority creditor's name and mailing address CUSTOMER_2849 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.210	Nonpriority creditor's name and mailing address CUSTOMER_2850 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.211	Nonpriority creditor's name and mailing address CUSTOMER_2851 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.212	Nonpriority creditor's name and mailing address CUSTOMER_2852 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.213	Nonpriority creditor's name and mailing address CUSTOMER_2853 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.214	Nonpriority creditor's name and mailing address CUSTOMER_2854 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.215	Nonpriority creditor's name and mailing address CUSTOMER_2855 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00
3.216	Nonpriority creditor's name and mailing address CUSTOMER_2856 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,000.00

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Amount of claim

3.217	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2857 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.218	Nonpriority creditor's name and mailing address	\$1,000.00
	<p>CUSTOMER_2858 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.219	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2859 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.220	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2860 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.221	Nonpriority creditor's name and mailing address	\$9,000.00
	<p>CUSTOMER_2861 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.222	Nonpriority creditor's name and mailing address	\$9,000.00
	<p>CUSTOMER_2862 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.223	Nonpriority creditor's name and mailing address	\$9,000.00
	<p>CUSTOMER_2863 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.224	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2864 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.225	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2865 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.226	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2866 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.227	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2867 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.228	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2868 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.229	Nonpriority creditor's name and mailing address	\$9,000.00
	<p>CUSTOMER_2869 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.230	Nonpriority creditor's name and mailing address	\$9,000.00
	<p>CUSTOMER_2870 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.231	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2871 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.232	Nonpriority creditor's name and mailing address CUSTOMER_2872 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$9,000.00
3.233	Nonpriority creditor's name and mailing address CUSTOMER_2873 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$9,000.00
3.234	Nonpriority creditor's name and mailing address CUSTOMER_2874 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00
3.235	Nonpriority creditor's name and mailing address CUSTOMER_2875 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$9,000.00
3.236	Nonpriority creditor's name and mailing address CUSTOMER_2876 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Non Resident Entrance Fee Deposit Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$10,000.00

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Amount of claim

3.237	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2877 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.238	Nonpriority creditor's name and mailing address	\$9,000.00
	<p>CUSTOMER_2878 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.239	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2879 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.240	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2880 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.241	Nonpriority creditor's name and mailing address	\$10,000.00
	<p>CUSTOMER_2881 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Non Resident Entrance Fee Deposit Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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3.242	Nonpriority creditor's name and mailing address CUSTOMER_2882 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Security Deposit Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$162.00
3.243	Nonpriority creditor's name and mailing address CUSTOMER_2883 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Security Deposit Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$470.00
3.244	Nonpriority creditor's name and mailing address CUSTOMER_2884 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Security Deposit Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$504.00
3.245	Nonpriority creditor's name and mailing address CUSTOMER_2885 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Security Deposit Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$199.00
3.246	Nonpriority creditor's name and mailing address CUSTOMER_2886 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Security Deposit Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$217.00

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Amount of claim

3.247	Nonpriority creditor's name and mailing address CUSTOMER_2887 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.248	Nonpriority creditor's name and mailing address CUSTOMER_2888 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.249	Nonpriority creditor's name and mailing address CUSTOMER_2889 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.250	Nonpriority creditor's name and mailing address CUSTOMER_2890 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.251	Nonpriority creditor's name and mailing address CUSTOMER_2891 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.252	Nonpriority creditor's name and mailing address CUSTOMER_2892 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.253	Nonpriority creditor's name and mailing address CUSTOMER_2893 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.254	Nonpriority creditor's name and mailing address CUSTOMER_2894 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.255	Nonpriority creditor's name and mailing address CUSTOMER_2895 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.256	Nonpriority creditor's name and mailing address CUSTOMER_2896 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.257	Nonpriority creditor's name and mailing address CUSTOMER_2897 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.258	Nonpriority creditor's name and mailing address CUSTOMER_2898 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.259	Nonpriority creditor's name and mailing address CUSTOMER_2899 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.260	Nonpriority creditor's name and mailing address CUSTOMER_2900 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.261	Nonpriority creditor's name and mailing address CUSTOMER_2901 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.262	Nonpriority creditor's name and mailing address CUSTOMER_2902 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.263	Nonpriority creditor's name and mailing address CUSTOMER_2903 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.264	Nonpriority creditor's name and mailing address CUSTOMER_2904 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.265	Nonpriority creditor's name and mailing address CUSTOMER_2905 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.266	Nonpriority creditor's name and mailing address CUSTOMER_2906 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.267	Nonpriority creditor's name and mailing address CUSTOMER_2907 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.268	Nonpriority creditor's name and mailing address CUSTOMER_2908 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.269	Nonpriority creditor's name and mailing address CUSTOMER_2909 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.270	Nonpriority creditor's name and mailing address CUSTOMER_2910 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.271	Nonpriority creditor's name and mailing address CUSTOMER_2911 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.272	Nonpriority creditor's name and mailing address CUSTOMER_2912 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.273	Nonpriority creditor's name and mailing address CUSTOMER_2913 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.274	Nonpriority creditor's name and mailing address CUSTOMER_2914 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.275	Nonpriority creditor's name and mailing address CUSTOMER_2915 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.276	Nonpriority creditor's name and mailing address CUSTOMER_2916 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.277	Nonpriority creditor's name and mailing address CUSTOMER_2917 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.278	Nonpriority creditor's name and mailing address CUSTOMER_2918 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.279	Nonpriority creditor's name and mailing address CUSTOMER_2919 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.280	Nonpriority creditor's name and mailing address CUSTOMER_2920 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.281	Nonpriority creditor's name and mailing address CUSTOMER_2921 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.282	Nonpriority creditor's name and mailing address CUSTOMER_2922 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.283	Nonpriority creditor's name and mailing address CUSTOMER_2923 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.284	Nonpriority creditor's name and mailing address CUSTOMER_2924 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.285	Nonpriority creditor's name and mailing address CUSTOMER_2925 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.286	Nonpriority creditor's name and mailing address CUSTOMER_2926 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.287	Nonpriority creditor's name and mailing address CUSTOMER_2927 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.288	Nonpriority creditor's name and mailing address CUSTOMER_2928 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.289	Nonpriority creditor's name and mailing address CUSTOMER_2929 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.290	Nonpriority creditor's name and mailing address CUSTOMER_2930 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.291	Nonpriority creditor's name and mailing address CUSTOMER_2931 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.292	Nonpriority creditor's name and mailing address CUSTOMER_2932 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.293	Nonpriority creditor's name and mailing address CUSTOMER_2933 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.294	Nonpriority creditor's name and mailing address CUSTOMER_2934 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.295	Nonpriority creditor's name and mailing address CUSTOMER_2935 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.296	Nonpriority creditor's name and mailing address CUSTOMER_2936 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.297	Nonpriority creditor's name and mailing address CUSTOMER_2937 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.298	Nonpriority creditor's name and mailing address CUSTOMER_2938 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.299	Nonpriority creditor's name and mailing address CUSTOMER_2939 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.300	Nonpriority creditor's name and mailing address CUSTOMER_2940 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.301	Nonpriority creditor's name and mailing address CUSTOMER_2941 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.302	Nonpriority creditor's name and mailing address CUSTOMER_2942 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.303	Nonpriority creditor's name and mailing address CUSTOMER_2943 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.304	Nonpriority creditor's name and mailing address CUSTOMER_2944 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.305	Nonpriority creditor's name and mailing address CUSTOMER_2945 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.306	Nonpriority creditor's name and mailing address CUSTOMER_2946 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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3.307	Nonpriority creditor's name and mailing address CUSTOMER_2947 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.308	Nonpriority creditor's name and mailing address CUSTOMER_2948 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.309	Nonpriority creditor's name and mailing address CUSTOMER_2949 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.310	Nonpriority creditor's name and mailing address CUSTOMER_2950 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.311	Nonpriority creditor's name and mailing address CUSTOMER_2951 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.312	Nonpriority creditor's name and mailing address CUSTOMER_2952 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.313	Nonpriority creditor's name and mailing address CUSTOMER_2953 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.314	Nonpriority creditor's name and mailing address CUSTOMER_2954 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.315	Nonpriority creditor's name and mailing address CUSTOMER_2955 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.316	Nonpriority creditor's name and mailing address CUSTOMER_2956 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.317	Nonpriority creditor's name and mailing address CUSTOMER_2957 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.318	Nonpriority creditor's name and mailing address CUSTOMER_2958 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.319	Nonpriority creditor's name and mailing address CUSTOMER_2959 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.320	Nonpriority creditor's name and mailing address CUSTOMER_2960 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.321	Nonpriority creditor's name and mailing address CUSTOMER_2961 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.322	Nonpriority creditor's name and mailing address CUSTOMER_2962 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.323	Nonpriority creditor's name and mailing address CUSTOMER_2963 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.324	Nonpriority creditor's name and mailing address CUSTOMER_2964 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.325	Nonpriority creditor's name and mailing address CUSTOMER_2965 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.326	Nonpriority creditor's name and mailing address CUSTOMER_2966 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.327	Nonpriority creditor's name and mailing address CUSTOMER_2967 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.328	Nonpriority creditor's name and mailing address CUSTOMER_2968 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.329	Nonpriority creditor's name and mailing address CUSTOMER_2969 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.330	Nonpriority creditor's name and mailing address CUSTOMER_2970 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.331	Nonpriority creditor's name and mailing address CUSTOMER_2971 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.332	Nonpriority creditor's name and mailing address CUSTOMER_2972 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.333	Nonpriority creditor's name and mailing address CUSTOMER_2973 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.334	Nonpriority creditor's name and mailing address CUSTOMER_2974 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.335	Nonpriority creditor's name and mailing address CUSTOMER_2975 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.336	Nonpriority creditor's name and mailing address CUSTOMER_2976 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.337	Nonpriority creditor's name and mailing address CUSTOMER_2977 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.338	Nonpriority creditor's name and mailing address CUSTOMER_2978 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.339	Nonpriority creditor's name and mailing address CUSTOMER_2979 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.340	Nonpriority creditor's name and mailing address CUSTOMER_2980 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.341	Nonpriority creditor's name and mailing address CUSTOMER_2981 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.342	Nonpriority creditor's name and mailing address CUSTOMER_2982 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.343	Nonpriority creditor's name and mailing address CUSTOMER_2983 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.344	Nonpriority creditor's name and mailing address CUSTOMER_2984 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.345	Nonpriority creditor's name and mailing address CUSTOMER_2985 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.346	Nonpriority creditor's name and mailing address CUSTOMER_2986 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined

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Amount of claim

3.347	Nonpriority creditor's name and mailing address CUSTOMER_2987 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.348	Nonpriority creditor's name and mailing address CUSTOMER_2988 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$215,100.00
3.349	Nonpriority creditor's name and mailing address CUSTOMER_2989 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$255,600.00
3.350	Nonpriority creditor's name and mailing address CUSTOMER_2990 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$194,310.00
3.351	Nonpriority creditor's name and mailing address CUSTOMER_2991 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$255,600.00

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Amount of claim

3.352	Nonpriority creditor's name and mailing address	<u>\$261,360.00</u>
	<p>CUSTOMER_2992 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.353	Nonpriority creditor's name and mailing address	<u>\$248,310.00</u>
	<p>CUSTOMER_2993 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.354	Nonpriority creditor's name and mailing address	<u>\$215,100.00</u>
	<p>CUSTOMER_2994 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.355	Nonpriority creditor's name and mailing address	<u>\$282,510.00</u>
	<p>CUSTOMER_2995 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.356	Nonpriority creditor's name and mailing address	<u>\$306,540.00</u>
	<p>CUSTOMER_2996 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.357	Nonpriority creditor's name and mailing address	<u>\$194,310.00</u>
	<p>CUSTOMER_2998 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.358	Nonpriority creditor's name and mailing address	<u>\$216,000.00</u>
	<p>CUSTOMER_2999 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.359	Nonpriority creditor's name and mailing address	<u>\$212,310.00</u>
	<p>CUSTOMER_3000 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.360	Nonpriority creditor's name and mailing address	<u>\$215,399.70</u>
	<p>CUSTOMER_3001 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.361	Nonpriority creditor's name and mailing address	<u>\$255,600.00</u>
	<p>CUSTOMER_3002 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.362	Nonpriority creditor's name and mailing address	<u>\$323,020.80</u>
	<p>CUSTOMER_3003 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.363	Nonpriority creditor's name and mailing address	<u>\$216,000.00</u>
	<p>CUSTOMER_3004 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.364	Nonpriority creditor's name and mailing address	<u>\$301,500.00</u>
	<p>CUSTOMER_3005 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.365	Nonpriority creditor's name and mailing address	<u>\$301,500.00</u>
	<p>CUSTOMER_3006 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.366	Nonpriority creditor's name and mailing address	<u>\$505,630.80</u>
	<p>CUSTOMER_3007 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.367	Nonpriority creditor's name and mailing address	<u>\$302,412.60</u>
	<p>CUSTOMER_3008 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.368	Nonpriority creditor's name and mailing address	<u>\$382,115.70</u>
	<p>CUSTOMER_3009 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.369	Nonpriority creditor's name and mailing address	<u>\$375,016.50</u>
	<p>CUSTOMER_3010 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.370	Nonpriority creditor's name and mailing address	<u>\$237,760.20</u>
	<p>CUSTOMER_3011 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.371	Nonpriority creditor's name and mailing address	<u>\$249,127.20</u>
	<p>CUSTOMER_3012 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.372	Nonpriority creditor's name and mailing address	<u>\$535,196.70</u>
	<p>CUSTOMER_3013 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.373	Nonpriority creditor's name and mailing address	<u>\$400,687.20</u>
	<p>CUSTOMER_3014 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.374	Nonpriority creditor's name and mailing address	<u>\$328,600.80</u>
	<p>CUSTOMER_3015 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.375	Nonpriority creditor's name and mailing address	<u>\$402,581.70</u>
	<p>CUSTOMER_3016 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.376	Nonpriority creditor's name and mailing address	<u>\$187,318.80</u>
	<p>CUSTOMER_3017 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.377	Nonpriority creditor's name and mailing address	<u>\$187,318.80</u>
	<p>CUSTOMER_3018 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.378	Nonpriority creditor's name and mailing address	<u>\$387,000.00</u>
	<p>CUSTOMER_3019 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.379	Nonpriority creditor's name and mailing address	<u>\$325,759.50</u>
	<p>CUSTOMER_3020 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.380	Nonpriority creditor's name and mailing address	<u>\$408,265.20</u>
	<p>CUSTOMER_3021 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.381	Nonpriority creditor's name and mailing address	<u>\$312,210.00</u>
	<p>CUSTOMER_3022 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.382	Nonpriority creditor's name and mailing address CUSTOMER_3023 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$315,045.00
3.383	Nonpriority creditor's name and mailing address CUSTOMER_3024 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$312,210.00
3.384	Nonpriority creditor's name and mailing address CUSTOMER_3025 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$185,424.30
3.385	Nonpriority creditor's name and mailing address CUSTOMER_3026 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$309,375.00
3.386	Nonpriority creditor's name and mailing address CUSTOMER_3027 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$246,285.00

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Amount of claim

3.387	Nonpriority creditor's name and mailing address	<u>\$246,285.00</u>
	<p>CUSTOMER_3028 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.388	Nonpriority creditor's name and mailing address	<u>\$334,284.30</u>
	<p>CUSTOMER_3029 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.389	Nonpriority creditor's name and mailing address	<u>\$285,975.00</u>
	<p>CUSTOMER_3030 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.390	Nonpriority creditor's name and mailing address	<u>\$339,021.00</u>
	<p>CUSTOMER_3031 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.391	Nonpriority creditor's name and mailing address	<u>\$285,871.50</u>
	<p>CUSTOMER_3032 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.392	Nonpriority creditor's name and mailing address CUSTOMER_3033 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$220,195.80
3.393	Nonpriority creditor's name and mailing address CUSTOMER_3034 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$4,129.00
3.394	Nonpriority creditor's name and mailing address CUSTOMER_3035 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$315,045.00
3.395	Nonpriority creditor's name and mailing address CUSTOMER_3036 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$248,085.00
3.396	Nonpriority creditor's name and mailing address CUSTOMER_3037 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$277,449.30

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Amount of claim

3.397	Nonpriority creditor's name and mailing address	<u>\$185,424.30</u>
	<p>CUSTOMER_3038 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.398	Nonpriority creditor's name and mailing address	<u>\$266,608.80</u>
	<p>CUSTOMER_3039 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.399	Nonpriority creditor's name and mailing address	<u>\$275,562.00</u>
	<p>CUSTOMER_3040 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.400	Nonpriority creditor's name and mailing address	<u>\$219,118.50</u>
	<p>CUSTOMER_3041 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.401	Nonpriority creditor's name and mailing address	<u>\$336,178.80</u>
	<p>CUSTOMER_3042 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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3.402	Nonpriority creditor's name and mailing address CUSTOMER_3043 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$248,085.00
3.403	Nonpriority creditor's name and mailing address CUSTOMER_3044 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$300,375.00
3.404	Nonpriority creditor's name and mailing address CUSTOMER_3045 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$197,028.00
3.405	Nonpriority creditor's name and mailing address CUSTOMER_3046 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$320,170.50
3.406	Nonpriority creditor's name and mailing address CUSTOMER_3047 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$281,073.60

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Amount of claim

3.407	Nonpriority creditor's name and mailing address	<u>\$408,825.00</u>
	<p>CUSTOMER_3048 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.408	Nonpriority creditor's name and mailing address	<u>\$273,660.30</u>
	<p>CUSTOMER_3049 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.409	Nonpriority creditor's name and mailing address	<u>\$275,562.00</u>
	<p>CUSTOMER_3050 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.410	Nonpriority creditor's name and mailing address	<u>\$285,897.60</u>
	<p>CUSTOMER_3051 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.411	Nonpriority creditor's name and mailing address	<u>\$171,000.00</u>
	<p>CUSTOMER_3052 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.412	Nonpriority creditor's name and mailing address	<u>\$335,172.60</u>
	<p>CUSTOMER_3053 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.413	Nonpriority creditor's name and mailing address	<u>\$279,208.80</u>
	<p>CUSTOMER_3054 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.414	Nonpriority creditor's name and mailing address	<u>\$256,148.10</u>
	<p>CUSTOMER_3055 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.415	Nonpriority creditor's name and mailing address	<u>\$329,472.90</u>
	<p>CUSTOMER_3056 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.416	Nonpriority creditor's name and mailing address	<u>\$273,660.30</u>
	<p>CUSTOMER_3057 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.417	Nonpriority creditor's name and mailing address	<u>\$256,612.50</u>
	<p>CUSTOMER_3058 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.418	Nonpriority creditor's name and mailing address	<u>\$168,399.00</u>
	<p>CUSTOMER_3059 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.419	Nonpriority creditor's name and mailing address	<u>\$270,162.00</u>
	<p>CUSTOMER_3060 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.420	Nonpriority creditor's name and mailing address	<u>\$342,902.70</u>
	<p>CUSTOMER_3061 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.421	Nonpriority creditor's name and mailing address	<u>\$240,885.00</u>
	<p>CUSTOMER_3062 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.422	Nonpriority creditor's name and mailing address	<u>\$240,885.00</u>
	<p>CUSTOMER_3063 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.423	Nonpriority creditor's name and mailing address	<u>\$292,226.40</u>
	<p>CUSTOMER_3064 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.424	Nonpriority creditor's name and mailing address	<u>\$197,769.60</u>
	<p>CUSTOMER_3065 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.425	Nonpriority creditor's name and mailing address	<u>\$251,210.70</u>
	<p>CUSTOMER_3066 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.426	Nonpriority creditor's name and mailing address	<u>\$282,998.70</u>
	<p>CUSTOMER_3067 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.427	Nonpriority creditor's name and mailing address	<u>\$270,162.00</u>
	<p>CUSTOMER_3068 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.428	Nonpriority creditor's name and mailing address	<u>\$279,208.80</u>
	<p>CUSTOMER_3069 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.429	Nonpriority creditor's name and mailing address	<u>\$265,708.80</u>
	<p>CUSTOMER_3070 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.430	Nonpriority creditor's name and mailing address	<u>\$428,000.40</u>
	<p>CUSTOMER_3071 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.431	Nonpriority creditor's name and mailing address	<u>\$189,133.20</u>
	<p>CUSTOMER_3072 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.432	Nonpriority creditor's name and mailing address	<u>\$174,340.80</u>
	<p>CUSTOMER_3073 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.433	Nonpriority creditor's name and mailing address	<u>\$258,843.60</u>
	<p>CUSTOMER_3074 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.434	Nonpriority creditor's name and mailing address	<u>\$328,782.60</u>
	<p>CUSTOMER_3075 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.435	Nonpriority creditor's name and mailing address	<u>\$244,224.90</u>
	<p>CUSTOMER_3076 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.436	Nonpriority creditor's name and mailing address	<u>\$325,448.10</u>
	<p>CUSTOMER_3077 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.437	Nonpriority creditor's name and mailing address	<u>\$187,200.00</u>
	<p>CUSTOMER_3078 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.438	Nonpriority creditor's name and mailing address	<u>\$198,313.20</u>
	<p>CUSTOMER_3079 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.439	Nonpriority creditor's name and mailing address	<u>\$475,560.90</u>
	<p>CUSTOMER_3080 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.440	Nonpriority creditor's name and mailing address	<u>\$200,492.10</u>
	<p>CUSTOMER_3081 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.441	Nonpriority creditor's name and mailing address	<u>\$328,782.60</u>
	<p>CUSTOMER_3082 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.442	Nonpriority creditor's name and mailing address CUSTOMER_3083 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$333,846.90
3.443	Nonpriority creditor's name and mailing address CUSTOMER_3084 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$539,380.80
3.444	Nonpriority creditor's name and mailing address CUSTOMER_3085 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$266,990.40
3.445	Nonpriority creditor's name and mailing address CUSTOMER_3086 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$401,004.90
3.446	Nonpriority creditor's name and mailing address CUSTOMER_3087 ADDRESS ON FILE Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Resident Refund Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$285,091.20

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Amount of claim

3.447	Nonpriority creditor's name and mailing address	<u>\$288,891.90</u>
	<p>CUSTOMER_3088 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.448	Nonpriority creditor's name and mailing address	<u>\$384,670.80</u>
	<p>CUSTOMER_3089 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.449	Nonpriority creditor's name and mailing address	<u>\$405,000.00</u>
	<p>CUSTOMER_3090 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.450	Nonpriority creditor's name and mailing address	<u>\$293,639.40</u>
	<p>CUSTOMER_3091 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.451	Nonpriority creditor's name and mailing address	<u>\$571,743.00</u>
	<p>CUSTOMER_3092 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.452	Nonpriority creditor's name and mailing address	<u>\$453,680.10</u>
	<p>CUSTOMER_3093 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.453	Nonpriority creditor's name and mailing address	<u>\$329,327.10</u>
	<p>CUSTOMER_3094 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.454	Nonpriority creditor's name and mailing address	<u>\$210,212.10</u>
	<p>CUSTOMER_3095 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.455	Nonpriority creditor's name and mailing address	<u>\$283,009.50</u>
	<p>CUSTOMER_3096 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.456	Nonpriority creditor's name and mailing address	<u>\$210,212.10</u>
	<p>CUSTOMER_3097 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.457	Nonpriority creditor's name and mailing address	<u>\$381,145.50</u>
	<p>CUSTOMER_3098 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.458	Nonpriority creditor's name and mailing address	<u>\$268,418.70</u>
	<p>CUSTOMER_3099 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.459	Nonpriority creditor's name and mailing address	<u>\$282,670.20</u>
	<p>CUSTOMER_3100 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.460	Nonpriority creditor's name and mailing address	<u>\$221,130.90</u>
	<p>CUSTOMER_3101 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.461	Nonpriority creditor's name and mailing address	<u>\$210,212.10</u>
	<p>CUSTOMER_3102 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.462	Nonpriority creditor's name and mailing address	<u>\$501,739.60</u>
	<p>CUSTOMER_3103 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.463	Nonpriority creditor's name and mailing address	<u>\$210,212.10</u>
	<p>CUSTOMER_3104 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.464	Nonpriority creditor's name and mailing address	<u>\$9,000.00</u>
	<p>CUSTOMER_3105 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.465	Nonpriority creditor's name and mailing address	<u>\$268,418.70</u>
	<p>CUSTOMER_3106 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.466	Nonpriority creditor's name and mailing address	<u>\$352,042.20</u>
	<p>CUSTOMER_3107 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.467	Nonpriority creditor's name and mailing address	<u>\$294,789.60</u>
	<p>CUSTOMER_3108 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.468	Nonpriority creditor's name and mailing address	<u>\$315,450.00</u>
	<p>CUSTOMER_3109 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.469	Nonpriority creditor's name and mailing address	<u>\$151,200.00</u>
	<p>CUSTOMER_3110 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.470	Nonpriority creditor's name and mailing address	<u>\$230,400.00</u>
	<p>CUSTOMER_3111 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Resident Refund Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.471	Nonpriority creditor's name and mailing address	<u>\$Undetermined</u>
	<p>CUSTOMER_3114 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: Litigation Claim, Case No. 15 CV 1524/Case Code: 30303</p> <p>Date or dates debt was incurred Undetermined</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.472	Nonpriority creditor's name and mailing address CUSTOMER_3115 ADDRESS ON FILE Date or dates debt was incurred Undetermined Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Potential Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.473	Nonpriority creditor's name and mailing address CUSTOMER_3157 ADDRESS ON FILE Date or dates 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: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$70.00
3.474	Nonpriority creditor's name and mailing address CUSTOMER_3158 ADDRESS ON FILE Date or dates 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: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$80.00
3.475	Nonpriority creditor's name and mailing address CUSTOMER_3159 ADDRESS ON FILE Date or dates 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: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$65.00
3.476	Nonpriority creditor's name and mailing address CUSTOMER_3160 ADDRESS ON FILE Date or dates 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: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$160.00

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Amount of claim

3.477	Nonpriority creditor's name and mailing address	\$85.00
	<p>CUSTOMER_3161 ADDRESS ON FILE</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: Trade Payable</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.478	Nonpriority creditor's name and mailing address	\$109.95
	<p>CUSTOMER_3501 ADDRESS ON FILE</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: Trade Payable</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.479	Nonpriority creditor's name and mailing address	\$91.17
	<p>CUSTOMER_4021 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.480	Nonpriority creditor's name and mailing address	\$1,738.58
	<p>CUSTOMER_4022 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.481	Nonpriority creditor's name and mailing address	\$345.00
	<p>CUSTOMER_4023 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.482	Nonpriority creditor's name and mailing address	\$15.65
	<p>CUSTOMER_4024 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.483	Nonpriority creditor's name and mailing address	\$5.63
	<p>CUSTOMER_4025 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.484	Nonpriority creditor's name and mailing address	\$598.14
	<p>CUSTOMER_4026 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.485	Nonpriority creditor's name and mailing address	\$78.67
	<p>CUSTOMER_4027 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.486	Nonpriority creditor's name and mailing address	\$58.02
	<p>CUSTOMER_4027 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Amount of claim

3.487	Nonpriority creditor's name and mailing address	\$75.07
	<p>CUSTOMER_4027 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.488	Nonpriority creditor's name and mailing address	\$75.07
	<p>CUSTOMER_4027 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.489	Nonpriority creditor's name and mailing address	\$592.85
	<p>CUSTOMER_4028 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.490	Nonpriority creditor's name and mailing address	\$17.11
	<p>CUSTOMER_4029 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.491	Nonpriority creditor's name and mailing address	\$46.47
	<p>CUSTOMER_4030 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Uncashed Check Claim</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

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Case number (if known) 16-10158 (RDM)

Part 2: Additional Page

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Amount of claim

3.492	Nonpriority creditor's name and mailing address CUSTOMER_4031 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Uncashed Check Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$465.39</u>
3.493	Nonpriority creditor's name and mailing address CUSTOMER_4032 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Uncashed Check Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4.00</u>
3.494	Nonpriority creditor's name and mailing address CUSTOMER_4033 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Uncashed Check Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$7.00</u>
3.495	Nonpriority creditor's name and mailing address CUSTOMER_4034 ADDRESS ON FILE Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: Uncashed Check Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$34.77</u>
3.496	Nonpriority creditor's name and mailing address DAYTONA HEART GROUP 695 N CLYDE MORRIS BLVD DAYTONA BEACH, FL 32114 Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$26.05</u>

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Amount of claim

3.497	Nonpriority creditor's name and mailing address	\$89.42
	<p>DEAN HEALTH SYSTEMS, INC. P.O. BOX 78625 MILWAUKEE, WI 53278-0625</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.498	Nonpriority creditor's name and mailing address	\$5,580.66
	<p>DEWITT ROSS & STEVENS LAW FIRM TWO EAST MIFFLIN STREET SUITE 600 MADISON, WI 53703-2865</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.499	Nonpriority creditor's name and mailing address	\$8,537.07
	<p>DIERKS/WAUKESHA WHOLESALE FOOD ATTN: JANICE EPPERS PO BOX 0469 WAUKESHA, WI 53187-0469</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.500	Nonpriority creditor's name and mailing address	\$188.97
	<p>DIRECT SUPPLY HEALTHCARE EQUIP BOX 88201 MILWAUKEE, WI 53288-0201</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.501	Nonpriority creditor's name and mailing address	\$3,680.00
	<p>DOHERTY TRUCKING & EXCAVATING PO BOX 226 POYNETTE, WI 53955</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.502	Nonpriority creditor's name and mailing address	\$1,765.17
<p>ECOLAB, INC. P.O. BOX 70343 CHICAGO, IL 60673-0343</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: Trade Payable</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		
3.503	Nonpriority creditor's name and mailing address	\$1,618.16
<p>EMMONS BUSINESS INTERIORS, LLC P.O. BOX 640 GERMANTOWN, WI 53022</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: Trade Payable</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		
3.504	Nonpriority creditor's name and mailing address	\$2,352.79
<p>EMPIRE FISH COMPANY ATTN: M ANDERSON PO BOX 288 WINDSOR, WI 53598</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: Trade Payable</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		
3.505	Nonpriority creditor's name and mailing address	\$Undetermined
<p>EMPLOYEE_2026 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: Workers' Compensation Claim</p> <p>Date or dates debt was incurred Undetermined</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		
3.506	Nonpriority creditor's name and mailing address	\$Undetermined
<p>EMPLOYEE_2027 ADDRESS ON FILE</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: Workers' Compensation Claim</p> <p>Date or dates debt was incurred Undetermined</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		

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Amount of claim

3.507	Nonpriority creditor's name and mailing address EMPLOYEE_2028 ADDRESS ON FILE Date or dates debt was incurred Undetermined Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Workers' Compensation Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.508	Nonpriority creditor's name and mailing address EMPLOYEE_2029 ADDRESS ON FILE Date or dates debt was incurred Undetermined Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: Workers' Compensation Claim Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$Undetermined
3.509	Nonpriority creditor's name and mailing address EZ RIDE TRANSIT LLC 4915 B VOGES ROAD MADISON, WI 53718 Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$568.00
3.510	Nonpriority creditor's name and mailing address FARLEYS HOUSE OF PIANOS, LLC 6522 SEYBOLD RD MADISON, WI 53719 Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$110.00
3.511	Nonpriority creditor's name and mailing address FIRST SUPPLY MADISON, LLC 6800 GISHOLT DRIVE P.O. BOX 8124 MADISON, WI 53708-8124 Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$500.28

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Amount of claim

3.512	Nonpriority creditor's name and mailing address	\$1,769.87
	<p>FORTUNE FISH AND GOURMET CO. PO BOX 203 BEDFORD PARK, IL 60499-0203</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.513	Nonpriority creditor's name and mailing address	\$4,016.55
	<p>GENERAL BEVERAGE SALES CORP. ATTN: MIKE STOUT PO BOX 44326 MADISON, WI 53744-4326</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.514	Nonpriority creditor's name and mailing address	\$1,097.72
	<p>GRAINGER DEPT. 874021165 PALATINE, IL 60038-0001</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.515	Nonpriority creditor's name and mailing address	\$1,490.00
	<p>GRAND APPLIANCE 3300 16TH STREET ZION, IL 60099</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.516	Nonpriority creditor's name and mailing address	\$660.00
	<p>H J PERTZBORN PLUMBING FIRE PROTECTION, CORP. 802 JOHN NOLEN DR. MADISON, WI 53713</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.517	Nonpriority creditor's name and mailing address	<u>\$757.17</u>
<p>HALLMAN / LINDSAY PAINTS, INC. 1717 N. BRISTOL ST. P.O. BOX 109 SUN PRAIRIE, WI 53590-0109</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: Trade Payable</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		
3.518	Nonpriority creditor's name and mailing address	<u>\$Undetermined</u>
<p>HARTFORD FIRE INSURANCE COMPANY C/O PROPEL INSURANCE 1201 PACIFIC AVE. #1000 TACOMA, WA 98402</p> <p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Unemployment Reserve Fund, bond number 52BSBFG2612 in the amount of \$272,000 for the benefit of State of Wisconsin Unemployment Reserve F</p> <p>Date or dates debt was incurred Undetermined</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		
3.519	Nonpriority creditor's name and mailing address	<u>\$5,840.83</u>
<p>HD SUPPLY FACILITIES MAINT ATTN: WILLIAM GRIESE PO BOX 509058 SAN DIEGO, CA 92150-9058</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: Trade Payable</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		
3.520	Nonpriority creditor's name and mailing address	<u>\$123.55</u>
<p>HOBART SERVICE ITW FOOD EQUIPMENT GROUP LLC P.O. BOX 2517 CAROL STREAM, IL 60132-2517</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: Trade Payable</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		
3.521	Nonpriority creditor's name and mailing address	<u>\$1,407.26</u>
<p>HUBERT 25401 NETWORK PLACE CHICAGO, IL 60673-1254</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: Trade Payable</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number</p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes</p>		

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Amount of claim

3.522	Nonpriority creditor's name and mailing address	\$1,810.00
	<p>IN BUSINESS MAGAZINE 200 RIVER PLACE SUITE 250 MADISON, WI 53716</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.523	Nonpriority creditor's name and mailing address	\$911.23
	<p>INTERSTATE BILLING SERVICE, IN PO BOX 2208 DECATUR, AL 35601</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.524	Nonpriority creditor's name and mailing address	\$196.05
	<p>IRON MOUNTAIN RECORDS MANAGEME CONFIDENTIAL DESTRUCTION LLC PO BOX 27128 NEW YORK, NY 10087-7128</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.525	Nonpriority creditor's name and mailing address	\$30.00
	<p>JEFFERSON FIRE AND SAFETY INC 7617 DONNA ST MIDDLETON, WI 53562</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.526	Nonpriority creditor's name and mailing address	\$214.50
	<p>JUST COFFEE COOPERATIVE 3701 ORIN RD. MADISON, WI 53704</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.527	Nonpriority creditor's name and mailing address	\$4,579,115.62
	<p>KBC BANK N.V. 1177 AVE OF AMERICAS NEW YORK, NY 10036</p> <p>Date or dates debt was incurred Undetermined</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 checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: ISDA Master Agreement Obligations</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.528	Nonpriority creditor's name and mailing address	\$852,553.93
	<p>KBC BANK N.V. 1177 AVE OF AMERICAS NEW YORK, NY 10036</p> <p>Date or dates debt was incurred Undetermined</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 checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: ISDA Master Agreement Obligations</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.529	Nonpriority creditor's name and mailing address	\$102.26
	<p>KESSENICH'S LTD. OF AMERICA 131 S. FAIR OAKS AVE. MADISON, WI 53704</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.530	Nonpriority creditor's name and mailing address	\$100.00
	<p>LINN-MILLER, MOLLY 250 E. PROSPECT STREET LAKE MILLS, WI 53551</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.531	Nonpriority creditor's name and mailing address	\$104.71
	<p>MADISON ENVIRONMENTAL RESOURCI 1310 WEST BADGER ROAD MADISON, WI 53713</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.532	Nonpriority creditor's name and mailing address	\$65,379.46
	<p>MADISON GAS AND ELECTRIC PO BOX 1231 MADISON, WI 53701-1231</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.533	Nonpriority creditor's name and mailing address	\$2,500.00
	<p>MADISON SENIOR CENTER FOUNDATION 330 WEST MIFFLIN STREET MADISON, WI 53703</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.534	Nonpriority creditor's name and mailing address	\$6,967.84
	<p>MADISON UNITED HEALTHCARE LINE ATTN: ELLEEN BUECHLER PO BOX 71190 CHICAGO, IL 60694-1190</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.535	Nonpriority creditor's name and mailing address	\$46,426.28
	<p>MALLATT HOMECARE PHARMACY ATTN: MIKE FLINT ATTN: MARY OLSEN 3250 KINGSLEY WAY MADISON, WI 53713</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.536	Nonpriority creditor's name and mailing address	\$37.20
	<p>MARLING LUMBER CO. P.O. BOX 179 JANESVILLE, WI 53547-0179</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.537	Nonpriority creditor's name and mailing address	\$52,509.11
	<p>MCGANN CONSTRUCTION, INC. ATTN: AARON KOSTICHKA 3622 LEXINGTON AVE MADISON, WI 53714</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.538	Nonpriority creditor's name and mailing address	\$11,524.98
	<p>MEDLINE INDUSTRIES INC ATTN: TJ HAYES DEPT. CH 14400 PALATINE, IL 60055-4400</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.539	Nonpriority creditor's name and mailing address	\$33.61
	<p>MERITER HEALTH SERVICES INC. ATTN: WILLA SCHLECT 202 SOUTH PART STREET MADISON, WI 53704</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.540	Nonpriority creditor's name and mailing address	\$840.00
	<p>MIDWEST BIOMEDICAL & SCIENTIFIC SERVICES 6350 COPPS AVE MADISON, WI 53716</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.541	Nonpriority creditor's name and mailing address	\$457.91
	<p>MIDWEST POOL SUPPLY, INC PO BOX 620526 MIDDLETON, WI 53562</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.542	Nonpriority creditor's name and mailing address	\$3,600.00
	<p>MUELLER PROST PC 7733 FORSYTH BLVD., STE. 1200 ST. LOUIS, MO 63105</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.543	Nonpriority creditor's name and mailing address	\$154.45
	<p>NASCO 901 JANESVILLE AVE FT ADKINSON, WI 53538</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.544	Nonpriority creditor's name and mailing address	\$109.05
	<p>NASSCO, INC. 5365 S. MOORLAND ROAD NEW BERLIN, WI 53151</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.545	Nonpriority creditor's name and mailing address	\$121.53
	<p>NAVIANT, INC. 201 PRAIRIE HEIGHTS DRIVE VERONA, WI 53593</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.546	Nonpriority creditor's name and mailing address	\$4,067.18
	<p>NETWORK SERVICES COMPANY LOCKBOX 231805 1805 MOMENTUM PLACE CHICAGO, IL 60689-5318</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.547	Nonpriority creditor's name and mailing address	<u>\$Undetermined</u>
	<p>NORTH AMERICAN SPECIALTY INSURANCE COMPANY C/O PROPEL INSURANCE 1201 PACIFIC AVE. #1000 TACOMA, WA 98402</p> <p>Date or dates debt was incurred Undetermined</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 checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Health Center Resident Trust Bond Account, bond number 2179102 in the amount of \$12,201 for the benefit of State of Wisconsin Resident Trust</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.548	Nonpriority creditor's name and mailing address	<u>\$Undetermined</u>
	<p>NORTH AMERICAN SPECIALTY INSURANCE COMPANY C/O PROPEL INSURANCE 1201 PACIFIC AVE. #1000 TACOMA, WA 98402</p> <p>Date or dates debt was incurred Undetermined</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 checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Terraces Resident Trust Bond Account, bond number 2179101 in the amount of \$10,622 for the benefit of Wisconsin Dept. of Administration</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.549	Nonpriority creditor's name and mailing address	<u>\$32.63</u>
	<p>NORTH COAST MEDICAL INC. ATTN: ACCOUNTS RECEIVABLE 8100 CAMINO ARROYO GILROY, CA 95020</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.550	Nonpriority creditor's name and mailing address	<u>\$111.00</u>
	<p>OCCUPATIONAL HEALTH CENTERS OF P. O. BOX 1297 BROOKFIELD, WI 53008-1297</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.551	Nonpriority creditor's name and mailing address	<u>\$1,659.53</u>
	<p>OFFICE MAX 75 REMITTANCE DR #2698 CHICAGO, IL 60675-2698</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.552	Nonpriority creditor's name and mailing address	\$292.00
	<p>OJER, MICHAEL 2334 TALC TRAIL #204 MADISON, WI 53719</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.553	Nonpriority creditor's name and mailing address	\$132.30
	<p>PACKERLAND RENT-A-MAT, INC. P.O. BOX 233 BUTLER, WI 53007-0233</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.554	Nonpriority creditor's name and mailing address	\$870.45
	<p>PEPSI COLA COMPANY PO BOX 7425 MADISON, WI 53707-7425</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.555	Nonpriority creditor's name and mailing address	\$9,454.07
	<p>PIPER JAFFRAY ATTN: STEPHEN NGUYEN 800 NICOLLET MALL STE 800 MINNEAPOLIS, MN 55402-7020</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.556	Nonpriority creditor's name and mailing address	\$32.00
	<p>PITNEY BOWES GLOBAL FINANCIAL SERVICES LLC P.O. BOX 371887 PITTSBURGH, PA 15250-7887</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.557	Nonpriority creditor's name and mailing address	\$16.12
	<p>PITNEY BOWES PURCHASE POWER PO BOX 371874 PITTSBURGH, PA 15250-2648</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.558	Nonpriority creditor's name and mailing address	\$445.00
	<p>PLANT PROS 1102 MIDDLETON ST. MADISON, WI 53717</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.559	Nonpriority creditor's name and mailing address	\$40.00
	<p>PRIDHAM ELECTRONICS, INC. PO BOX 259304 MADISON, WI 53725--930</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.560	Nonpriority creditor's name and mailing address	\$210.00
	<p>PROVIDIGM, LLC DEPT CH 19808 PALATINE, IL 60055-9808</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.561	Nonpriority creditor's name and mailing address	\$3,324,539.24
	<p>PRS - PACIFIC RETIREMENT SERVICES ATTN: SHERI LOYA 1 W MAIN SUITE 303 MEDFORD, OR 97501</p> <p>Date or dates 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 checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: PRS Management Agreement Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.562	Nonpriority creditor's name and mailing address PRS MANAGEMENT INC. 1 W MAIN SUITE 303 MEDFORD, OR 97501 Date or dates debt 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 type="checkbox"/> Disputed Basis for the claim: PRS Management Agreement Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$7,743.82
3.563	Nonpriority creditor's name and mailing address PSOL INNOVATIVE I.T. SOLUTIONS ATTN: PETE SWANSON 1043 UNION ST. STEVENS POINT, WI 54481 Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$2,793.75
3.564	Nonpriority creditor's name and mailing address SCHINDLER ELEVATOR CORP ATTN: JULIE FOX P. O. BOX 93050 CHICAGO, IL 60673-3050 Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$36,971.83
3.565	Nonpriority creditor's name and mailing address SCOTT KNEPFEL ELECTRIC, INC ATTN: SCOTT KNEPFEL 562 ACADEMY DRIVE EDGERTON, WI 53534 Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$5,424.70
3.566	Nonpriority creditor's name and mailing address SERVICE MASTER BUILDING MAINT 2522 FISH HATCHERY RD MADISON, WI 53713 Date or dates debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Payable Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$1,990.00

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Amount of claim

3.567	Nonpriority creditor's name and mailing address	\$325.00
	<p>SNAPSHOT GROUP, INC. 1300 SE STARK, #215 PORTLAND, OR 97214</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.568	Nonpriority creditor's name and mailing address	\$209.84
	<p>SPECIALIZED MEDICAL SERVICES, 7237 SOLUTION CENTER CHICAGO, IL 60677-7002</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.569	Nonpriority creditor's name and mailing address	\$54.00
	<p>STAR ONE STAFFING OF MADISON, 101 N. WEBSTER AVENUE GREEN BAY, WI 54304</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.570	Nonpriority creditor's name and mailing address	\$34,037.94
	<p>SYSCO FOODS OF BARABOO LLC ATTN: DEBORAH MORA PO BOX 90 BARABOO, WI 53913-9987</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.571	Nonpriority creditor's name and mailing address	\$366.99
	<p>THE MADISON CLUB 5 E. WILSON ST. MADISON, WI 53703</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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Amount of claim

3.572	Nonpriority creditor's name and mailing address	\$508.25
	<p>UNION CAB OF MADISON COOP., IN PO BOX 8305 MADISON, WI 53708-8305</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.573	Nonpriority creditor's name and mailing address	\$704.26
	<p>UNIV OF WIS HOSPITAL AND CLINI 600 HIGHLAND AVE MADISON, WI 53792</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.574	Nonpriority creditor's name and mailing address	\$392.17
	<p>UNIVERSAL HOSP SERVICES INC SDS 12-0940 PO BOX 86 MINNEAPOLIS, MN 55486-0940</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.575	Nonpriority creditor's name and mailing address	\$129.68
	<p>US CELLULAR PO BOX 0205 PALATINE, IL 60055-0205</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.576	Nonpriority creditor's name and mailing address	\$1,182.80
	<p>USI NORTHWEST P.O. BOX 3716 NORFOLK, VA 23514-3716</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Capitol Lakes, Inc.
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Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.577	Nonpriority creditor's name and mailing address	\$3,534.26
	<p>UW MEDICAL FOUNDATION SPECIAL BILLING DEPT FINANCE DEPARTMENT P.O. BOX 620993 MIDDLETON, WI 53562</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.578	Nonpriority creditor's name and mailing address	\$43.00
	<p>VERIFIED CREDENTIALS, INC 20890 KENBRIDGE COURT LAKEVILLE, MN 55044</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.579	Nonpriority creditor's name and mailing address	\$1,307.00
	<p>VIGIL HEALTH SOLUTIONS, INC. 2102-4464 MARKHAM ST. VICTORIA, BC V8Z-7X8 CANADA</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.580	Nonpriority creditor's name and mailing address	\$14,450.00
	<p>WI DEPARTMENT OF HEALTH & FAMI ATTN: SEC. KITTY RHODES BOX #093594 MILWAUKEE, WI 53293-0594</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.581	Nonpriority creditor's name and mailing address	\$260.00
	<p>WI DEPT OF JUSTICE CRIME INFORMATION BUREAU PO BOX 93970 MILWAUKEE, WI 53293-3970</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Capitol Lakes, Inc.
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Part 2: Additional Page

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Amount of claim

3.582	Nonpriority creditor's name and mailing address	<u>\$595.00</u>
	<p>WIL-KIL PEST CONTROL, INC P.O. BOX 600730 JACKSONVILLE, FL 32260-0730</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.583	Nonpriority creditor's name and mailing address	<u>\$2,738.00</u>
	<p>WISCONSIN PUBLIC RADIO P.O. BOX 88698 MILWAUKEE, WI 53288-0698</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.584	Nonpriority creditor's name and mailing address	<u>\$575.90</u>
	<p>WRIGHT EXPRESS FSC PO BOX 6293 CAROL STREAM, IL 60197</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.585	Nonpriority creditor's name and mailing address	<u>\$3,560.09</u>
	<p>XEROX CORPORATION P.O. BOX 827598 PHILADELPHIA, PA 19182-7598</p> <p>Date or dates 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: Trade Payable</p> <p>Is the claim subject to offset?</p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor Capitol Lakes, Inc.
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Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

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

Total of claim amounts

5a. Total claims from Part 1

5a. \$ 0.00
+ undetermined amounts

5b. Total claims from Part 2

5b. + \$ 44,722,513.65
+ undetermined amounts

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c. \$ 44,722,513.65
+ undetermined amounts

Fill in this information to identify the case:

Debtor name Capitol Lakes, Inc.

United States Bankruptcy Court for the: Western District of Wisconsin
(State)

Case number (If known): 16-10158 (RDM) Chapter

☐ 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, numbering the entries consecutively.

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

- ☐ No. Check this box and file this form with the court 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 contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

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

2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Senior Living Referral Service dated 02/10/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>A PLACE FOR MOM, INC. 1300 DEXTER AVENUE, SUITE 400 SEATTLE, WA 98109</p>
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Billing Service Agreement dated 06/17/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>ABC FINANCIAL SERVICES, INC P.O. BOX 6800 N LITTLE ROCK, AR 72124</p>
2.3	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Healthcare Technology Services dated 06/11/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>AVALERE HEALTH, LLC 1350 CONNECTICUT AVENUE, NW SUITE 900 WASHINGTON, DC 20036</p>
2.4	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Gardening Maintenance dated 11/05/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>AVANT GARDENING AND LANDSCAPING, INC. 3055 SIGGELKOW ROAD MCFARLAND, WI 53558</p>
2.5	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Emergency Accommodation Services for Health Center Patients dated 11/20/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>BADGER PRAIRIE HEALTH CARE CENTER 1100 E VERONA AVE VERNOA, WI 53593</p>

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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
2.6	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Ancillary Services dated 10/01/2008</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>BLUE CROSS BLUE SHIELD OF WISCONSIN N17 W24340 RIVERWOOD DRIVE WAUKESHA, WI 53188</p>
2.7	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Affiliation Agreement dated 09/18/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM ON BEHALF OF THE UNIVERSITY OF WISCONSIN-MADISON, SCHOOL OF NURSING 701 HIGHLAND AVE. ROOM 5226B MADISON, WI 53705</p>
2.8	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Music License dated 11/01/2013</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>BROADCAST MUSIC, INC 10 MUSIC SQUARE E NASHVILLE, TN 37203</p>
2.9	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Amendment to Medicaid State Plan Services dated 01/01/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CARE WISCONSIN FIRST, INC. P.O. BOX 14017 MADISON, WI 53708</p>
2.10	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Medicaid State Plan Services dated 05/17/2011</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CARE WISCONSIN FIRST, INC. P.O. BOX 14017 MADISON, WI 53708</p>
2.11	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Cable Services dated 12/01/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CC VIII OPERATING, LLC 6399 FIDDLERS GREEN CIR FL6 GREENWOOD, CO 80111</p>
2.12	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Water Delivery dated 10/04/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CENTURY SPRING BOTTLING COMPANY PO BOX 275 GENESEE DEPOT, WI 53127</p>

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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
2.13	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Professional Medical Services dated 06/11/2008</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CHOICECARE NETWORK P.O. BOX 19013 GREEN BAY, WI 54307</p>
2.14	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Long Term Disability Insurance dated 01/01/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CIGNA BEHAVIORAL HEALTH, INC 11095 VIKING DRIVE, SUITE 350 EDEN PRAIRE, MN 55344</p>
2.15	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Cigna Rates Only Amendment to Participat Provider Agreement dated 1/1/2009</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CIGNA HEALTH AND LIFE INSURANCE COMPANY 2675 N. MAYFAIR ROAD, SUITE 210 WAUWATOSA, WI 53226</p>
2.16	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>HVAC Maintenance dated 08/14/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>COMPLETE CONTROL INC 640 25TH AVENUE NORTH WISCONSIN RAPIDS, WI 54495</p>
2.17	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>HMO Contract dated 01/01/2009</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CONNECTICUT GENERAL LIFE INSURANCE COMPANY 2675 N. MAYFAIR ROAD, SUITE 210 WAUWATOSA, WI 53226</p>
2.18	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Therapy Services Agreement dated 07/01/2013</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CONSONUS REHAB SERVICES 4560 SE INTERNATIONAL WAY, SUITE 100 MILWAUKIE, OR 97222</p>
2.19	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/01/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2001 ADDRESS ON FILE</p>

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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
2.20	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 12/31/2005</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2002 ADDRESS ON FILE</p>
2.21	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 08/27/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2002 ADDRESS ON FILE</p>
2.22	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 12/01/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2003 ADDRESS ON FILE</p>
2.23	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 07/01/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2004 ADDRESS ON FILE</p>
2.24	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/20/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2005 ADDRESS ON FILE</p>
2.25	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 09/15/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2005 ADDRESS ON FILE</p>
2.26	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 10/30/2002</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2006 ADDRESS ON FILE</p>

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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
2.27	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 05/25/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2007 ADDRESS ON FILE</p>
2.28	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/26/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2008 ADDRESS ON FILE</p>
2.29	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 08/16/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2009 ADDRESS ON FILE</p>
2.30	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 06/21/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2010 ADDRESS ON FILE</p>
2.31	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/28/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2011 ADDRESS ON FILE</p>
2.32	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/01/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2012 ADDRESS ON FILE</p>
2.33	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program Form 101-2012 dated 12/19/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2013 ADDRESS ON FILE</p>

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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
2.34	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 06/01/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2014 ADDRESS ON FILE</p>
2.35	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 07/21/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2015 ADDRESS ON FILE</p>
2.36	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/24/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2016 ADDRESS ON FILE</p>
2.37	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 11/03/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2017 ADDRESS ON FILE</p>
2.38	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 02/27/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2018 ADDRESS ON FILE</p>
2.39	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/30/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2019 ADDRESS ON FILE</p>
2.40	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 04/28/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2019 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
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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
2.41	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 09/29/1999</p> <p>State the term remaining List the contract number of any government contract</p> <p>Annual Renewal</p>	<p>CUSTOMER_2020 ADDRESS ON FILE</p>
2.42	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 03/27/2012</p> <p>State the term remaining List the contract number of any government contract</p> <p>Evergreen</p>	<p>CUSTOMER_2021 ADDRESS ON FILE</p>
2.43	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining List the contract number of any government contract</p> <p>6.6 months</p>	<p>CUSTOMER_2022 ADDRESS ON FILE</p>
2.44	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining List the contract number of any government contract</p> <p>3.8 months</p>	<p>CUSTOMER_2023 ADDRESS ON FILE</p>
2.45	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining List the contract number of any government contract</p> <p>9.8 months</p>	<p>CUSTOMER_2024 ADDRESS ON FILE</p>
2.46	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining List the contract number of any government contract</p> <p>8.3 months</p>	<p>CUSTOMER_2025 ADDRESS ON FILE</p>
2.47	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining List the contract number of any government contract</p> <p>11 months</p>	<p>CUSTOMER_2026 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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
2.48	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>6.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2027</p> <p>ADDRESS ON FILE</p>
2.49	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2028</p> <p>ADDRESS ON FILE</p>
2.50	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2029</p> <p>ADDRESS ON FILE</p>
2.51	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2030</p> <p>ADDRESS ON FILE</p>
2.52	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2031</p> <p>ADDRESS ON FILE</p>
2.53	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>6.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2032</p> <p>ADDRESS ON FILE</p>
2.54	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2033</p> <p>ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

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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
2.55	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2034 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	1.9 months	
2.56	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2035 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	9.1 months	
2.57	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2036 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	4.8 months	
2.58	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2037 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	29 days	
2.59	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2038 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	8.8 months	
2.60	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2039 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	5.8 months	
2.61	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2040 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	6.9 months	

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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
2.62	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>6.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2041</p> <p>ADDRESS ON FILE</p>
2.63	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2042</p> <p>ADDRESS ON FILE</p>
2.64	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2043</p> <p>ADDRESS ON FILE</p>
2.65	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>10 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2044</p> <p>ADDRESS ON FILE</p>
2.66	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2045</p> <p>ADDRESS ON FILE</p>
2.67	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2046</p> <p>ADDRESS ON FILE</p>
2.68	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2047</p> <p>ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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	
2.69	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2048 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>7.1 months</p> <p>List the contract number of any government contract</p>		
2.70	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2049 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Expired</p> <p>List the contract number of any government contract</p>		
2.71	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2050 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>2.3 months</p> <p>List the contract number of any government contract</p>		
2.72	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2051 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>21 days</p> <p>List the contract number of any government contract</p>		
2.73	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2052 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>4.1 months</p> <p>List the contract number of any government contract</p>		
2.74	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2053 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>8.8 months</p> <p>List the contract number of any government contract</p>		
2.75	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2054 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>3 months</p> <p>List the contract number of any government contract</p>		

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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	
2.76	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2055</p> <p>ADDRESS ON FILE</p>	
2.77	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2056</p> <p>ADDRESS ON FILE</p>	
2.78	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>22 days</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2057</p> <p>ADDRESS ON FILE</p>	
2.79	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>22 days</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2058</p> <p>ADDRESS ON FILE</p>	
2.80	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2059</p> <p>ADDRESS ON FILE</p>	
2.81	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>6.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2060</p> <p>ADDRESS ON FILE</p>	
2.82	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>20 days</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2061</p> <p>ADDRESS ON FILE</p>	

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Name

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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
2.83	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2062</p> <p>ADDRESS ON FILE</p>
2.84	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2063</p> <p>ADDRESS ON FILE</p>
2.85	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2064</p> <p>ADDRESS ON FILE</p>
2.86	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2065</p> <p>ADDRESS ON FILE</p>
2.87	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2066</p> <p>ADDRESS ON FILE</p>
2.88	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2067</p> <p>ADDRESS ON FILE</p>
2.89	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2068</p> <p>ADDRESS ON FILE</p>

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Name

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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
2.90	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2069</p> <p>ADDRESS ON FILE</p>
2.91	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2070</p> <p>ADDRESS ON FILE</p>
2.92	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2071</p> <p>ADDRESS ON FILE</p>
2.93	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2072</p> <p>ADDRESS ON FILE</p>
2.94	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.6 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2073</p> <p>ADDRESS ON FILE</p>
2.95	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2074</p> <p>ADDRESS ON FILE</p>
2.96	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.6 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2075</p> <p>ADDRESS ON FILE</p>

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Name

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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	
2.97	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2076 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>5.6 months</p> <p>List the contract number of any government contract</p>		
2.98	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2077 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>8.1 months</p> <p>List the contract number of any government contract</p>		
2.99	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2078 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>2.5 months</p> <p>List the contract number of any government contract</p>		
2.100	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2079 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>9.8 months</p> <p>List the contract number of any government contract</p>		
2.101	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2080 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>7.4 months</p> <p>List the contract number of any government contract</p>		
2.102	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2081 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>3.5 months</p> <p>List the contract number of any government contract</p>		
2.103	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2082 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>7.6 months</p> <p>List the contract number of any government contract</p>		

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Name

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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
2.104	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2083 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.105	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2084 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	3.1 months	
2.106	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2085 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	2.4 months	
2.107	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2086 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.108	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2087 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	8.3 months	
2.109	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2088 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	1.6 months	
2.110	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2089 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	N/A	

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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
2.111	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2090 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	2.5 months	
2.112	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2091 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	6.8 months	
2.113	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2092 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	7.8 months	
2.114	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2093 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	10.1 months	
2.115	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2094 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	11.3 months	
2.116	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2095 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	7.9 months	
2.117	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2096 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	8.2 months	

Debtor Capitol Lakes, Inc.
Name

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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	
2.118	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2097 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>3.4 months</p> <p>List the contract number of any government contract</p>		
2.119	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2098 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>11.3 months</p> <p>List the contract number of any government contract</p>		
2.120	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2099 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>		
2.121	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2100 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>5.8 months</p> <p>List the contract number of any government contract</p>		
2.122	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2101 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>10.1 months</p> <p>List the contract number of any government contract</p>		
2.123	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2102 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>10.1 months</p> <p>List the contract number of any government contract</p>		
2.124	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2103 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>1.3 months</p> <p>List the contract number of any government contract</p>		

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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
2.125	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2104</p> <p>ADDRESS ON FILE</p>
2.126	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2105</p> <p>ADDRESS ON FILE</p>
2.127	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2106</p> <p>ADDRESS ON FILE</p>
2.128	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>6.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2107</p> <p>ADDRESS ON FILE</p>
2.129	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2108</p> <p>ADDRESS ON FILE</p>
2.130	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2109</p> <p>ADDRESS ON FILE</p>
2.131	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2110</p> <p>ADDRESS ON FILE</p>

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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
2.132	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2111</p> <p>ADDRESS ON FILE</p>
2.133	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2112</p> <p>ADDRESS ON FILE</p>
2.134	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2113</p> <p>ADDRESS ON FILE</p>
2.135	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2114</p> <p>ADDRESS ON FILE</p>
2.136	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2115</p> <p>ADDRESS ON FILE</p>
2.137	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2116</p> <p>ADDRESS ON FILE</p>
2.138	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2117</p> <p>ADDRESS ON FILE</p>

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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
2.139	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2118</p> <p>ADDRESS ON FILE</p>
2.140	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>10.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2119</p> <p>ADDRESS ON FILE</p>
2.141	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2120</p> <p>ADDRESS ON FILE</p>
2.142	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2121</p> <p>ADDRESS ON FILE</p>
2.143	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>9.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2122</p> <p>ADDRESS ON FILE</p>
2.144	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2123</p> <p>ADDRESS ON FILE</p>
2.145	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2124</p> <p>ADDRESS ON FILE</p>

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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	
2.146	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>11.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2125</p> <p>ADDRESS ON FILE</p>	
2.147	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2126</p> <p>ADDRESS ON FILE</p>	
2.148	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2127</p> <p>ADDRESS ON FILE</p>	
2.149	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2128</p> <p>ADDRESS ON FILE</p>	
2.150	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.6 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2129</p> <p>ADDRESS ON FILE</p>	
2.151	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2130</p> <p>ADDRESS ON FILE</p>	
2.152	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>11.6 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2131</p> <p>ADDRESS ON FILE</p>	

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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
2.153	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2132 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	2.6 months	
2.154	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2133 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	3.6 months	
2.155	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2134 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	4.7 months	
2.156	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2135 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	3 months	
2.157	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2136 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	7 months	
2.158	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2137 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	7.9 months	
2.159	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2138 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	1.1 months	

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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
2.160	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2139 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.161	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2140 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	2.4 months	
2.162	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2141 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.163	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2142 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	3.1 months	
2.164	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2143 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	10.3 months	
2.165	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2144 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	5.7 months	
2.166	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2145 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	

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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	
2.167	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Expired</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2146</p> <p>ADDRESS ON FILE</p>	
2.168	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Expired</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2147</p> <p>ADDRESS ON FILE</p>	
2.169	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>9.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2148</p> <p>ADDRESS ON FILE</p>	
2.170	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2149</p> <p>ADDRESS ON FILE</p>	
2.171	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>10.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2150</p> <p>ADDRESS ON FILE</p>	
2.172	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2151</p> <p>ADDRESS ON FILE</p>	
2.173	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1 year 19 days</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2152</p> <p>ADDRESS ON FILE</p>	

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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
2.174	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2153 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	27 days	
2.175	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2154 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	N/A	
2.176	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2155 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.177	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2156 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.178	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2157 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	2.8 months	
2.179	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2158 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	2.8 months	
2.180	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2159 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	

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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
2.181	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2160 ADDRESS ON FILE</p>
2.182	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2161 ADDRESS ON FILE</p>
2.183	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2162 ADDRESS ON FILE</p>
2.184	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2163 ADDRESS ON FILE</p>
2.185	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2164 ADDRESS ON FILE</p>
2.186	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2165 ADDRESS ON FILE</p>
2.187	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2166 ADDRESS ON FILE</p>

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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
2.188	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>9.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2167</p> <p>ADDRESS ON FILE</p>
2.189	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2168</p> <p>ADDRESS ON FILE</p>
2.190	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2169</p> <p>ADDRESS ON FILE</p>
2.191	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>10 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2170</p> <p>ADDRESS ON FILE</p>
2.192	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2171</p> <p>ADDRESS ON FILE</p>
2.193	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>10.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2172</p> <p>ADDRESS ON FILE</p>
2.194	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2173</p> <p>ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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	
2.195	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2174 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>1.1 months</p> <p>List the contract number of any government contract</p>		
2.196	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2175 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>6.6 months</p> <p>List the contract number of any government contract</p>		
2.197	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2176 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>1.7 months</p> <p>List the contract number of any government contract</p>		
2.198	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2177 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>		
2.199	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2178 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>9.4 months</p> <p>List the contract number of any government contract</p>		
2.200	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2179 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>6.8 months</p> <p>List the contract number of any government contract</p>		
2.201	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2180 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>5.1 months</p> <p>List the contract number of any government contract</p>		

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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
2.202	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2181</p> <p>ADDRESS ON FILE</p>
2.203	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>10.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2182</p> <p>ADDRESS ON FILE</p>
2.204	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2183</p> <p>ADDRESS ON FILE</p>
2.205	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2184</p> <p>ADDRESS ON FILE</p>
2.206	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2185</p> <p>ADDRESS ON FILE</p>
2.207	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2186</p> <p>ADDRESS ON FILE</p>
2.208	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.6 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2187</p> <p>ADDRESS ON FILE</p>

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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	
2.209	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2188 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>		
2.210	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2189 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>5.4 months</p> <p>List the contract number of any government contract</p>		
2.211	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2190 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>9.8 months</p> <p>List the contract number of any government contract</p>		
2.212	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2191 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>2.9 months</p> <p>List the contract number of any government contract</p>		
2.213	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2192 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Expired</p> <p>List the contract number of any government contract</p>		
2.214	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2193 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>7.8 months</p> <p>List the contract number of any government contract</p>		
2.215	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2194 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>7.3 months</p> <p>List the contract number of any government contract</p>		

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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
2.216	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2195 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.217	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2196 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.218	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2197 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	9.4 months	
2.219	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2198 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	4 months	
2.220	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2199 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	1.6 months	
2.221	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2200 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	6.9 months	
2.222	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2201 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	10 days	

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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
2.223	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2202</p> <p>ADDRESS ON FILE</p>
2.224	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2203</p> <p>ADDRESS ON FILE</p>
2.225	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2204</p> <p>ADDRESS ON FILE</p>
2.226	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>9.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2205</p> <p>ADDRESS ON FILE</p>
2.227	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2206</p> <p>ADDRESS ON FILE</p>
2.228	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2207</p> <p>ADDRESS ON FILE</p>
2.229	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>9.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2208</p> <p>ADDRESS ON FILE</p>

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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
2.230	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2209</p> <p>ADDRESS ON FILE</p>
2.231	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2210</p> <p>ADDRESS ON FILE</p>
2.232	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2211</p> <p>ADDRESS ON FILE</p>
2.233	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2212</p> <p>ADDRESS ON FILE</p>
2.234	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2213</p> <p>ADDRESS ON FILE</p>
2.235	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2214</p> <p>ADDRESS ON FILE</p>
2.236	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2215</p> <p>ADDRESS ON FILE</p>

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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	
2.237	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2216 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>		
2.238	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2217 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>		
2.239	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2218 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>1.5 months</p> <p>List the contract number of any government contract</p>		
2.240	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2219 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>9.9 months</p> <p>List the contract number of any government contract</p>		
2.241	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2220 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>1 year 19 days</p> <p>List the contract number of any government contract</p>		
2.242	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2221 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>8.8 months</p> <p>List the contract number of any government contract</p>		
2.243	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2222 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>3.7 months</p> <p>List the contract number of any government contract</p>		

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2.244	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2223 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.245	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2224 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	10.5 months	
2.246	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2225 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	9.8 months	
2.247	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2226 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.248	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2227 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	8.8 months	
2.249	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2228 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	2.7 months	
2.250	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2229 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	7.7 months	

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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
2.251	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>9.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2230</p> <p>ADDRESS ON FILE</p>
2.252	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2231</p> <p>ADDRESS ON FILE</p>
2.253	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2232</p> <p>ADDRESS ON FILE</p>
2.254	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2233</p> <p>ADDRESS ON FILE</p>
2.255	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2234</p> <p>ADDRESS ON FILE</p>
2.256	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2235</p> <p>ADDRESS ON FILE</p>
2.257	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2236</p> <p>ADDRESS ON FILE</p>

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2.258	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2237 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	2 months	
2.259	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2238 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.260	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2239 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	8.3 months	
2.261	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2240 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.262	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2241 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.263	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2242 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	10.8 months	
2.264	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2243 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	25 days	

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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
2.265	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2244</p> <p>ADDRESS ON FILE</p>
2.266	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2245</p> <p>ADDRESS ON FILE</p>
2.267	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2246</p> <p>ADDRESS ON FILE</p>
2.268	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2247</p> <p>ADDRESS ON FILE</p>
2.269	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2248</p> <p>ADDRESS ON FILE</p>
2.270	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>11.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2249</p> <p>ADDRESS ON FILE</p>
2.271	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2250</p> <p>ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
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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
2.272	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>11.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2251</p> <p>ADDRESS ON FILE</p>
2.273	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>11.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2252</p> <p>ADDRESS ON FILE</p>
2.274	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>9.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2253</p> <p>ADDRESS ON FILE</p>
2.275	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2254</p> <p>ADDRESS ON FILE</p>
2.276	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2255</p> <p>ADDRESS ON FILE</p>
2.277	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2256</p> <p>ADDRESS ON FILE</p>
2.278	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2257</p> <p>ADDRESS ON FILE</p>

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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
2.279	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2258</p> <p>ADDRESS ON FILE</p>
2.280	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2259</p> <p>ADDRESS ON FILE</p>
2.281	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2260</p> <p>ADDRESS ON FILE</p>
2.282	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2261</p> <p>ADDRESS ON FILE</p>
2.283	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2262</p> <p>ADDRESS ON FILE</p>
2.284	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2263</p> <p>ADDRESS ON FILE</p>
2.285	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>6.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2264</p> <p>ADDRESS ON FILE</p>

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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
2.286	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2265 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	1.1 months	
2.287	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2266 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	8.1 months	
2.288	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2267 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.289	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2268 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	1.7 months	
2.290	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2269 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	N/A	
2.291	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2270 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	N/A	
2.292	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2271 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	4.2 months	

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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	
2.293	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2272 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>9.3 months</p> <p>List the contract number of any government contract</p>		
2.294	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2273 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>6.8 months</p> <p>List the contract number of any government contract</p>		
2.295	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2274 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>10.8 months</p> <p>List the contract number of any government contract</p>		
2.296	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2275 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>N/A</p> <p>List the contract number of any government contract</p>		
2.297	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2276 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>N/A</p> <p>List the contract number of any government contract</p>		
2.298	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2277 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>4.9 months</p> <p>List the contract number of any government contract</p>		
2.299	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2278 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>4.9 months</p> <p>List the contract number of any government contract</p>		

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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
2.300	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2279</p> <p>ADDRESS ON FILE</p>
2.301	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2280</p> <p>ADDRESS ON FILE</p>
2.302	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2281</p> <p>ADDRESS ON FILE</p>
2.303	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2282</p> <p>ADDRESS ON FILE</p>
2.304	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2283</p> <p>ADDRESS ON FILE</p>
2.305	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>11.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2284</p> <p>ADDRESS ON FILE</p>
2.306	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2285</p> <p>ADDRESS ON FILE</p>

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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
2.307	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>9.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2286 ADDRESS ON FILE</p>
2.308	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2287 ADDRESS ON FILE</p>
2.309	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2288 ADDRESS ON FILE</p>
2.310	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2289 ADDRESS ON FILE</p>
2.311	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/30/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2290 ADDRESS ON FILE</p>
2.312	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2291 ADDRESS ON FILE</p>
2.313	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2292 ADDRESS ON FILE</p>

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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
2.314	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2293</p> <p>ADDRESS ON FILE</p>
2.315	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2294</p> <p>ADDRESS ON FILE</p>
2.316	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2295</p> <p>ADDRESS ON FILE</p>
2.317	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2296</p> <p>ADDRESS ON FILE</p>
2.318	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2297</p> <p>ADDRESS ON FILE</p>
2.319	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2298</p> <p>ADDRESS ON FILE</p>
2.320	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2299</p> <p>ADDRESS ON FILE</p>

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2.321	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>1 year 15 days</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2300</p> <p>ADDRESS ON FILE</p>
2.322	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>11.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2301</p> <p>ADDRESS ON FILE</p>
2.323	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2302</p> <p>ADDRESS ON FILE</p>
2.324	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2303</p> <p>ADDRESS ON FILE</p>
2.325	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2304</p> <p>ADDRESS ON FILE</p>
2.326	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2305</p> <p>ADDRESS ON FILE</p>
2.327	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2306</p> <p>ADDRESS ON FILE</p>

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2.328	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2307</p> <p>ADDRESS ON FILE</p>
2.329	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2308</p> <p>ADDRESS ON FILE</p>
2.330	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2309</p> <p>ADDRESS ON FILE</p>
2.331	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2310</p> <p>ADDRESS ON FILE</p>
2.332	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.6 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2311</p> <p>ADDRESS ON FILE</p>
2.333	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.6 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2312</p> <p>ADDRESS ON FILE</p>
2.334	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2313</p> <p>ADDRESS ON FILE</p>

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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
2.335	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2314 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	2.3 months	
2.336	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2315 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	3.1 months	
2.337	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2316 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	9.9 months	
2.338	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2317 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	4.8 months	
2.339	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2318 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	10.8 months	
2.340	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2319 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	5.6 months	
2.341	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2320 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	

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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
2.342	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2321</p> <p>ADDRESS ON FILE</p>
2.343	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2322</p> <p>ADDRESS ON FILE</p>
2.344	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2323</p> <p>ADDRESS ON FILE</p>
2.345	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2324</p> <p>ADDRESS ON FILE</p>
2.346	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>10.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2325</p> <p>ADDRESS ON FILE</p>
2.347	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2326</p> <p>ADDRESS ON FILE</p>
2.348	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2327</p> <p>ADDRESS ON FILE</p>

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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	
2.349	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2328 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>		
2.350	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2329 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>7.2 months</p> <p>List the contract number of any government contract</p>		
2.351	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2330 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>		
2.352	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2331 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>		
2.353	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2332 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>2.5 months</p> <p>List the contract number of any government contract</p>		
2.354	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2333 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>4.2 months</p> <p>List the contract number of any government contract</p>		
2.355	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p>	<p>CUSTOMER_2334 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>		

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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	
2.356	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.5 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2335</p> <p>ADDRESS ON FILE</p>	
2.357	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2336</p> <p>ADDRESS ON FILE</p>	
2.358	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2337</p> <p>ADDRESS ON FILE</p>	
2.359	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2338</p> <p>ADDRESS ON FILE</p>	
2.360	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2339</p> <p>ADDRESS ON FILE</p>	
2.361	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.6 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2340</p> <p>ADDRESS ON FILE</p>	
2.362	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.3 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2341</p> <p>ADDRESS ON FILE</p>	

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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
2.363	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2342 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	4.7 months	
2.364	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2343 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.365	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2344 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	2.9 months	
2.366	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2345 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	7.6 months	
2.367	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2346 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	5.7 months	
2.368	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2347 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	6.9 months	
2.369	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2348 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	25 days	

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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
2.370	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.9 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2349</p> <p>ADDRESS ON FILE</p>
2.371	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>9.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2350</p> <p>ADDRESS ON FILE</p>
2.372	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 03/27/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2351</p> <p>ADDRESS ON FILE</p>
2.373	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2352</p> <p>ADDRESS ON FILE</p>
2.374	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2353</p> <p>ADDRESS ON FILE</p>
2.375	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>4.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2354</p> <p>ADDRESS ON FILE</p>
2.376	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.7 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2355</p> <p>ADDRESS ON FILE</p>

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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
2.377	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>7.8 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2356 ADDRESS ON FILE</p>
2.378	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>N/A</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2357 ADDRESS ON FILE</p>
2.379	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>N/A</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2358 ADDRESS ON FILE</p>
2.380	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2359 ADDRESS ON FILE</p>
2.381	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.1 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2360 ADDRESS ON FILE</p>
2.382	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>2.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2361 ADDRESS ON FILE</p>
2.383	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>28 days</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2362 ADDRESS ON FILE</p>

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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
2.384	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2363 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	7.8 months	
2.385	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2364 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	3.4 months	
2.386	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2365 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	9 months	
2.387	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2366 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	7.7 months	
2.388	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2367 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	4.4 months	
2.389	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2368 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	1.1 months	
2.390	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2369 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	

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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
2.391	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2370 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	4.7 months	
2.392	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2371 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.393	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2372 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.394	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2373 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	6.5 months	
2.395	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2374 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.396	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2375 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	7.8 months	
2.397	State what the contract or lease is for and the nature of the debtor's interest	Capitol Lakes Aquatic & Wellness Center Membership Agreement	CUSTOMER_2376 ADDRESS ON FILE
	State the term remaining List the contract number of any government contract	7.1 months	

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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
2.398	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>3.2 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2377</p> <p>ADDRESS ON FILE</p>
2.399	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.6 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2378</p> <p>ADDRESS ON FILE</p>
2.400	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Aquatic & Wellness Center Membership Agreement</p> <p>State the term remaining</p> <p>5.4 months</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2379</p> <p>ADDRESS ON FILE</p>
2.401	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/20/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2380</p> <p>ADDRESS ON FILE</p>
2.402	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 01/23/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2381</p> <p>ADDRESS ON FILE</p>
2.403	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/15/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2382</p> <p>ADDRESS ON FILE</p>
2.404	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/23/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2383</p> <p>ADDRESS ON FILE</p>

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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	
2.405	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 05/14/2015</p>	<p>CUSTOMER_2384 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.406	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/16/2016</p>	<p>CUSTOMER_2385 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.407	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 06/05/2013</p>	<p>CUSTOMER_2386 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.408	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 05/22/2015</p>	<p>CUSTOMER_2387 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.409	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/26/2016</p>	<p>CUSTOMER_2388 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.410	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/19/2016</p>	<p>CUSTOMER_2389 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.411	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 12/07/2015</p>	<p>CUSTOMER_2390 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		

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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
2.412	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/18/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2391 ADDRESS ON FILE</p>
2.413	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 01/15/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2392 ADDRESS ON FILE</p>
2.414	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 08/28/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2393 ADDRESS ON FILE</p>
2.415	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 12/31/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2394 ADDRESS ON FILE</p>
2.416	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 10/21/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2395 ADDRESS ON FILE</p>
2.417	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/05/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2396 ADDRESS ON FILE</p>
2.418	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 06/21/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2397 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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	
2.419	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 04/17/2015</p>	<p>CUSTOMER_2398 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.420	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/14/2016</p>	<p>CUSTOMER_2399 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.421	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 08/31/2015</p>	<p>CUSTOMER_2400 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.422	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/13/2016</p>	<p>CUSTOMER_2401 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.423	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/14/2016</p>	<p>CUSTOMER_2402 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.424	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/13/2016</p>	<p>CUSTOMER_2403 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.425	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 08/05/2015</p>	<p>CUSTOMER_2404 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		

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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	
2.426	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/26/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2405</p> <p>ADDRESS ON FILE</p>	
2.427	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 09/29/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2406</p> <p>ADDRESS ON FILE</p>	
2.428	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/15/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2407</p> <p>ADDRESS ON FILE</p>	
2.429	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 06/07/1993</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2408</p> <p>ADDRESS ON FILE</p>	
2.430	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 09/14/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2409</p> <p>ADDRESS ON FILE</p>	
2.431	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/13/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2410</p> <p>ADDRESS ON FILE</p>	
2.432	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 09/01/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2411</p> <p>ADDRESS ON FILE</p>	

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Name

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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	
2.433	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 04/25/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2412</p> <p>ADDRESS ON FILE</p>	
2.434	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 06/25/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2413</p> <p>ADDRESS ON FILE</p>	
2.435	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 07/11/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2414</p> <p>ADDRESS ON FILE</p>	
2.436	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 09/21/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2415</p> <p>ADDRESS ON FILE</p>	
2.437	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 05/01/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2416</p> <p>ADDRESS ON FILE</p>	
2.438	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 12/30/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2417</p> <p>ADDRESS ON FILE</p>	
2.439	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 09/26/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2418</p> <p>ADDRESS ON FILE</p>	

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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	
2.440	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/08/2016</p>	<p>CUSTOMER_2419 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.441	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 04/15/2014</p>	<p>CUSTOMER_2420 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.442	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 06/01/2010</p>	<p>CUSTOMER_2421 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.443	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/12/2016</p>	<p>CUSTOMER_2422 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.444	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 12/30/2015</p>	<p>CUSTOMER_2423 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.445	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 10/14/2015</p>	<p>CUSTOMER_2424 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.446	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 09/16/2015</p>	<p>CUSTOMER_2425 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		

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2.447	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/09/2016</p>	<p>CUSTOMER_2426 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.448	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 02/20/2015</p>	<p>CUSTOMER_2427 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.449	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/14/2016</p>	<p>CUSTOMER_2428 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.450	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 02/17/2015</p>	<p>CUSTOMER_2429 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.451	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/05/2016</p>	<p>CUSTOMER_2430 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.452	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 12/30/2015</p>	<p>CUSTOMER_2431 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.453	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 12/01/2015</p>	<p>CUSTOMER_2432 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		

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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	
2.454	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 02/02/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2433</p> <p>ADDRESS ON FILE</p>	
2.455	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/08/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2434</p> <p>ADDRESS ON FILE</p>	
2.456	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 11/25/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2435</p> <p>ADDRESS ON FILE</p>	
2.457	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 04/21/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2436</p> <p>ADDRESS ON FILE</p>	
2.458	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/11/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2437</p> <p>ADDRESS ON FILE</p>	
2.459	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 12/03/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2438</p> <p>ADDRESS ON FILE</p>	
2.460	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 10/15/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2439</p> <p>ADDRESS ON FILE</p>	

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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
2.461	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 10/15/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2440</p> <p>ADDRESS ON FILE</p>
2.462	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/05/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2441</p> <p>ADDRESS ON FILE</p>
2.463	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/12/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2442</p> <p>ADDRESS ON FILE</p>
2.464	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 11/19/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2443</p> <p>ADDRESS ON FILE</p>
2.465	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 03/17/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2444</p> <p>ADDRESS ON FILE</p>
2.466	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/14/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2445</p> <p>ADDRESS ON FILE</p>
2.467	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 02/26/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2446</p> <p>ADDRESS ON FILE</p>

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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
2.468	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 12/14/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2447</p> <p>ADDRESS ON FILE</p>
2.469	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/06/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2448</p> <p>ADDRESS ON FILE</p>
2.470	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 02/05/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2449</p> <p>ADDRESS ON FILE</p>
2.471	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 01/04/2016</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2450</p> <p>ADDRESS ON FILE</p>
2.472	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/02/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2451</p> <p>ADDRESS ON FILE</p>
2.473	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 06/17/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2452</p> <p>ADDRESS ON FILE</p>
2.474	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 03/12/2013</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2453</p> <p>ADDRESS ON FILE</p>

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2.475	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 09/1/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2454</p> <p>ADDRESS ON FILE</p>	
2.476	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 03/12/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2455</p> <p>ADDRESS ON FILE</p>	
2.477	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 11/10/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2456</p> <p>ADDRESS ON FILE</p>	
2.478	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 06/19/2012</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2457</p> <p>ADDRESS ON FILE</p>	
2.479	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 06/02/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2458</p> <p>ADDRESS ON FILE</p>	
2.480	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 08/06/2013</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2459</p> <p>ADDRESS ON FILE</p>	
2.481	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 10/30/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2460</p> <p>ADDRESS ON FILE</p>	

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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
2.482	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 11/25/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2461</p> <p>ADDRESS ON FILE</p>
2.483	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 11/13/2009</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2462</p> <p>ADDRESS ON FILE</p>
2.484	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 05/07/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2463</p> <p>ADDRESS ON FILE</p>
2.485	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 01/19/2016</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2464</p> <p>ADDRESS ON FILE</p>
2.486	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 09/22/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2465</p> <p>ADDRESS ON FILE</p>
2.487	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 02/17/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2466</p> <p>ADDRESS ON FILE</p>
2.488	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 05/15/2013</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2467</p> <p>ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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
2.489	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 04/14/2004</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2468</p> <p>ADDRESS ON FILE</p>
2.490	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 02/19/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2469</p> <p>ADDRESS ON FILE</p>
2.491	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/07/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2470</p> <p>ADDRESS ON FILE</p>
2.492	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 03/01/2008</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2471</p> <p>ADDRESS ON FILE</p>
2.493	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 01/06/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2472</p> <p>ADDRESS ON FILE</p>
2.494	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 02/28/2005</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2473</p> <p>ADDRESS ON FILE</p>
2.495	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 02/27/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2473</p> <p>ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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
2.496	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/15/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2474 ADDRESS ON FILE</p>
2.497	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/15/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2475 ADDRESS ON FILE</p>
2.498	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/04/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2476 ADDRESS ON FILE</p>
2.499	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 07/16/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2477 ADDRESS ON FILE</p>
2.500	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 09/17/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2477 ADDRESS ON FILE</p>
2.501	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Services Residency Agreement dated 05/03/2008</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2478 ADDRESS ON FILE</p>
2.502	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Services Residency Agreement dated 05/03/2008</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2479 ADDRESS ON FILE</p>

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Name

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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
2.503	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Center Occupancy Agreement and Current Rate Schedule dated 06/29/1999</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2480 ADDRESS ON FILE</p>
2.504	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/01/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2481 ADDRESS ON FILE</p>
2.505	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 11/26/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2482 ADDRESS ON FILE</p>
2.506	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 10/23/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2483 ADDRESS ON FILE</p>
2.507	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CBRF Residency and Services Agreement dated 06/15/2005</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2484 ADDRESS ON FILE</p>
2.508	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/22/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2485 ADDRESS ON FILE</p>
2.509	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/01/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2486 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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
2.510	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 12/28/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2487 ADDRESS ON FILE</p>
2.511	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 05/10/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2488 ADDRESS ON FILE</p>
2.512	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/27/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2489 ADDRESS ON FILE</p>
2.513	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 05/02/2005</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2490 ADDRESS ON FILE</p>
2.514	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 05/07/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2491 ADDRESS ON FILE</p>
2.515	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/30/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2492 ADDRESS ON FILE</p>
2.516	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/30/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2493 ADDRESS ON FILE</p>

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Name

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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
2.517	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/30/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2494 ADDRESS ON FILE</p>
2.518	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 11/17/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2495 ADDRESS ON FILE</p>
2.519	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 05/15/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2496 ADDRESS ON FILE</p>
2.520	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 04/26/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2497 ADDRESS ON FILE</p>
2.521	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/28/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2498 ADDRESS ON FILE</p>
2.522	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 05/05/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2499 ADDRESS ON FILE</p>
2.523	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/11/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2500 ADDRESS ON FILE</p>

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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
2.524	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Center Occupancy Agreement and Current Rate Schedule dated 05/18/1997</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2501 ADDRESS ON FILE</p>
2.525	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 05/07/2012</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2501 ADDRESS ON FILE</p>
2.526	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/20/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2502 ADDRESS ON FILE</p>
2.527	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/30/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2503 ADDRESS ON FILE</p>
2.528	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 11/03/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2504 ADDRESS ON FILE</p>
2.529	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 12/28/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2505 ADDRESS ON FILE</p>
2.530	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Services Residency Agreement dated 05/02/2008</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2506 ADDRESS ON FILE</p>

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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
2.531	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/11/2015 Evergreen	CUSTOMER_2507 ADDRESS ON FILE
2.532	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/28/2012 Evergreen	CUSTOMER_2508 ADDRESS ON FILE
2.533	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/03/2012 Evergreen	CUSTOMER_2509 ADDRESS ON FILE
2.534	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Capitol Lakes Section 8 Tenant Lease Agreement dated 03/19/2003 Annual Renewal	CUSTOMER_2510 ADDRESS ON FILE
2.535	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/26/2014 Evergreen	CUSTOMER_2511 ADDRESS ON FILE
2.536	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 10/08/2010 Evergreen	CUSTOMER_2512 ADDRESS ON FILE
2.537	State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract	Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/28/2013 Evergreen	CUSTOMER_2513 ADDRESS ON FILE

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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
2.538	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 05/05/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2514 ADDRESS ON FILE</p>
2.539	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 05/28/2001</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2515 ADDRESS ON FILE</p>
2.540	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 02/14/2013</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2515 ADDRESS ON FILE</p>
2.541	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/20/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2516 ADDRESS ON FILE</p>
2.542	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/07/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2517 ADDRESS ON FILE</p>
2.543	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 08/16/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2518 ADDRESS ON FILE</p>
2.544	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 07/13/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2519 ADDRESS ON FILE</p>

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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
2.545	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/27/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2520 ADDRESS ON FILE</p>
2.546	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/01/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2521 ADDRESS ON FILE</p>
2.547	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/25/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2522 ADDRESS ON FILE</p>
2.548	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/25/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2523 ADDRESS ON FILE</p>
2.549	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 07/01/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2524 ADDRESS ON FILE</p>
2.550	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 07/08/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2525 ADDRESS ON FILE</p>
2.551	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/02/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2526 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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
2.552	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/02/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2527 ADDRESS ON FILE</p>
2.553	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 01/17/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2528 ADDRESS ON FILE</p>
2.554	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 11/08/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2529 ADDRESS ON FILE</p>
2.555	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 05/10/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2530 ADDRESS ON FILE</p>
2.556	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 06/01/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2531 ADDRESS ON FILE</p>
2.557	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Services Residency Agreement dated 06/09/2008</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2532 ADDRESS ON FILE</p>
2.558	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/02/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2533 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

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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
2.559	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/30/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2534 ADDRESS ON FILE</p>
2.560	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 10/01/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2535 ADDRESS ON FILE</p>
2.561	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 01/06/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2536 ADDRESS ON FILE</p>
2.562	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 01/06/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2537 ADDRESS ON FILE</p>
2.563	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 11/05/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2538 ADDRESS ON FILE</p>
2.564	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 01/15/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2539 ADDRESS ON FILE</p>
2.565	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 07/24/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2539 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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
2.566	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 06/01/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2540</p> <p>ADDRESS ON FILE</p>
2.567	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Heights Occupancy Agreement and Current Rate Schedule dated 05/09/2006</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2541</p> <p>ADDRESS ON FILE</p>
2.568	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/07/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2542</p> <p>ADDRESS ON FILE</p>
2.569	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/30/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2543</p> <p>ADDRESS ON FILE</p>
2.570	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 12/04/2013</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2543</p> <p>ADDRESS ON FILE</p>
2.571	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 06/03/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2544</p> <p>ADDRESS ON FILE</p>
2.572	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 02/14/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2545</p> <p>ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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
2.573	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 10/01/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2546 ADDRESS ON FILE</p>
2.574	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 11/12/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2547 ADDRESS ON FILE</p>
2.575	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 09/19/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2548 ADDRESS ON FILE</p>
2.576	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/22/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2549 ADDRESS ON FILE</p>
2.577	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 09/15/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2550 ADDRESS ON FILE</p>
2.578	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/30/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2551 ADDRESS ON FILE</p>
2.579	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 09/30/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2552 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

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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
2.580	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 10/21/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2553 ADDRESS ON FILE</p>
2.581	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 08/12/2002</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2554 ADDRESS ON FILE</p>
2.582	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 08/12/2002</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2555 ADDRESS ON FILE</p>
2.583	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 05/01/2006</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2556 ADDRESS ON FILE</p>
2.584	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/29/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2557 ADDRESS ON FILE</p>
2.585	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 10/01/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2558 ADDRESS ON FILE</p>
2.586	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 03/01/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2559 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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
2.587	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/01/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2560 ADDRESS ON FILE</p>
2.588	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/22/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2561 ADDRESS ON FILE</p>
2.589	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program Form 101-2012 dated 12/12/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2562 ADDRESS ON FILE</p>
2.590	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Heights Occupancy Agreement and Current Rate Schedule dated 12/31/2005</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2563 ADDRESS ON FILE</p>
2.591	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/18/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2564 ADDRESS ON FILE</p>
2.592	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 05/21/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2565 ADDRESS ON FILE</p>
2.593	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 05/21/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2566 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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
2.594	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 02/22/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2567 ADDRESS ON FILE</p>
2.595	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 12/01/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2568 ADDRESS ON FILE</p>
2.596	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/07/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2569 ADDRESS ON FILE</p>
2.597	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 03/15/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2570 ADDRESS ON FILE</p>
2.598	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 07/07/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2571 ADDRESS ON FILE</p>
2.599	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 09/22/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2571 ADDRESS ON FILE</p>
2.600	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 09/01/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		<p>CUSTOMER_2572 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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
2.601	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 11/02/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2573 ADDRESS ON FILE</p>
2.602	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 04/30/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2574 ADDRESS ON FILE</p>
2.603	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Services Residency Agreement dated 05/01/2008</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2575 ADDRESS ON FILE</p>
2.604	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/01/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2576 ADDRESS ON FILE</p>
2.605	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 03/26/1996</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2577 ADDRESS ON FILE</p>
2.606	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/28/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2578 ADDRESS ON FILE</p>
2.607	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Center Occupancy Agreement and Current Rate Schedule dated 05/01/2002</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2579 ADDRESS ON FILE</p>

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Name

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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
2.608	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/24/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2580 ADDRESS ON FILE</p>
2.609	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/28/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2581 ADDRESS ON FILE</p>
2.610	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 10/29/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2582 ADDRESS ON FILE</p>
2.611	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 03/11/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2583 ADDRESS ON FILE</p>
2.612	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 03/24/2001</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2584 ADDRESS ON FILE</p>
2.613	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/24/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2585 ADDRESS ON FILE</p>
2.614	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/01/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2586 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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
2.615	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/30/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2587 ADDRESS ON FILE</p>
2.616	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 08/20/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2588 ADDRESS ON FILE</p>
2.617	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 11/15/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2588 ADDRESS ON FILE</p>
2.618	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 03/15/2005</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2589 ADDRESS ON FILE</p>
2.619	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 02/04/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2590 ADDRESS ON FILE</p>
2.620	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 01/05/2008</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2590 ADDRESS ON FILE</p>
2.621	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 03/31/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2591 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

Case number (if known) 16-10158 (RDM)

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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
2.622	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 11/03/2004</p> <p>State the term remaining List the contract number of any government contract</p> <p>Annual Renewal</p>	<p>CUSTOMER_2592 ADDRESS ON FILE</p>
2.623	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/21/2013</p> <p>State the term remaining List the contract number of any government contract</p> <p>Evergreen</p>	<p>CUSTOMER_2593 ADDRESS ON FILE</p>
2.624	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Services Residency Agreement dated 11/07/2007</p> <p>State the term remaining List the contract number of any government contract</p> <p>Evergreen</p>	<p>CUSTOMER_2594 ADDRESS ON FILE</p>
2.625	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 06/03/2013</p> <p>State the term remaining List the contract number of any government contract</p> <p>Auto Renewal</p>	<p>CUSTOMER_2595 ADDRESS ON FILE</p>
2.626	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 07/15/2011</p> <p>State the term remaining List the contract number of any government contract</p> <p>Evergreen</p>	<p>CUSTOMER_2595 ADDRESS ON FILE</p>
2.627	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/28/2012</p> <p>State the term remaining List the contract number of any government contract</p> <p>Evergreen</p>	<p>CUSTOMER_2596 ADDRESS ON FILE</p>
2.628	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 10/21/2014</p> <p>State the term remaining List the contract number of any government contract</p> <p>Evergreen</p>	<p>CUSTOMER_2597 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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
2.629	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 07/25/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2598 ADDRESS ON FILE</p>
2.630	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/01/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2599 ADDRESS ON FILE</p>
2.631	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 11/05/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2600 ADDRESS ON FILE</p>
2.632	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program Form 101-2012 dated 12/20/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2601 ADDRESS ON FILE</p>
2.633	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program Form 101-2012 dated 12/12/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2602 ADDRESS ON FILE</p>
2.634	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 02/14/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2603 ADDRESS ON FILE</p>
2.635	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 01/21/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2604 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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
2.636	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/07/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2605 ADDRESS ON FILE</p>
2.637	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 10/07/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2606 ADDRESS ON FILE</p>
2.638	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 11/01/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2607 ADDRESS ON FILE</p>
2.639	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Services Residency Agreement dated 05/01/2008</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2608 ADDRESS ON FILE</p>
2.640	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/30/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2609 ADDRESS ON FILE</p>
2.641	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 05/15/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2610 ADDRESS ON FILE</p>
2.642	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 06/02/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2611 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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
2.643	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 11/12/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2612</p> <p>ADDRESS ON FILE</p>
2.644	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/20/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2612</p> <p>ADDRESS ON FILE</p>
2.645	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/10/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2613</p> <p>ADDRESS ON FILE</p>
2.646	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 03/31/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2614</p> <p>ADDRESS ON FILE</p>
2.647	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 05/15/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2615</p> <p>ADDRESS ON FILE</p>
2.648	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 12/27/2012</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2615</p> <p>ADDRESS ON FILE</p>
2.649	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 11/08/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2616</p> <p>ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
Name

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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
2.650	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 07/31/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2617 ADDRESS ON FILE</p>
2.651	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 05/19/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2617 ADDRESS ON FILE</p>
2.652	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 07/08/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2618 ADDRESS ON FILE</p>
2.653	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program Form 101-2012 dated 10/24/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2619 ADDRESS ON FILE</p>
2.654	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/03/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2620 ADDRESS ON FILE</p>
2.655	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 03/01/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2621 ADDRESS ON FILE</p>
2.656	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 09/15/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2622 ADDRESS ON FILE</p>

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Name

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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
2.657	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 12/23/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2622</p> <p>ADDRESS ON FILE</p>
2.658	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 04/27/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2623</p> <p>ADDRESS ON FILE</p>
2.659	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 05/05/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2624</p> <p>ADDRESS ON FILE</p>
2.660	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 05/25/1992</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2625</p> <p>ADDRESS ON FILE</p>
2.661	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 05/01/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2626</p> <p>ADDRESS ON FILE</p>
2.662	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 01/31/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2627</p> <p>ADDRESS ON FILE</p>
2.663	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 05/27/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2628</p> <p>ADDRESS ON FILE</p>

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Name

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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
2.664	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Center Occupancy Agreement and Current Rate Schedule dated 03/25/1998</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2629 ADDRESS ON FILE</p>
2.665	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/10/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2630 ADDRESS ON FILE</p>
2.666	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 07/30/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2631 ADDRESS ON FILE</p>
2.667	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 03/22/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2632 ADDRESS ON FILE</p>
2.668	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 03/22/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2633 ADDRESS ON FILE</p>
2.669	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 02/17/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2633 ADDRESS ON FILE</p>
2.670	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/30/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2634 ADDRESS ON FILE</p>

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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
2.671	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 08/03/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2635 ADDRESS ON FILE</p>
2.672	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 05/11/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2636 ADDRESS ON FILE</p>
2.673	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 11/22/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2637 ADDRESS ON FILE</p>
2.674	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 04/01/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2638 ADDRESS ON FILE</p>
2.675	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 01/09/2011</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2639 ADDRESS ON FILE</p>
2.676	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/05/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2640 ADDRESS ON FILE</p>
2.677	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/19/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2641 ADDRESS ON FILE</p>

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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
2.678	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 05/01/2009</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2642 ADDRESS ON FILE</p>
2.679	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 04/27/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2643 ADDRESS ON FILE</p>
2.680	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Services Residency Agreement dated 05/01/2008</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2644 ADDRESS ON FILE</p>
2.681	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 10/23/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2645 ADDRESS ON FILE</p>
2.682	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 02/28/2014</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2646 ADDRESS ON FILE</p>
2.683	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/27/2013</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2647 ADDRESS ON FILE</p>
2.684	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/28/2012</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2648 ADDRESS ON FILE</p>

Debtor Capitol Lakes, Inc.
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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
2.685	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Heights Occupancy Agreement and Current Rate Schedule dated 05/20/2006</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2649 ADDRESS ON FILE</p>
2.686	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 06/05/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2650 ADDRESS ON FILE</p>
2.687	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 05/14/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2651 ADDRESS ON FILE</p>
2.688	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 06/09/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2652 ADDRESS ON FILE</p>
2.689	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 12/23/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2652 ADDRESS ON FILE</p>
2.690	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 03/24/2001</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2653 ADDRESS ON FILE</p>
2.691	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 02/19/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2654 ADDRESS ON FILE</p>

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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
2.692	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Meriter Retirement Center Occupancy Agreement and Current Rate Schedule dated 05/27/1997</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2655 ADDRESS ON FILE</p>
2.693	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 02/23/2015</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2655 ADDRESS ON FILE</p>
2.694	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>CRBF Residency and Services Agreement dated 08/13/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2655 ADDRESS ON FILE</p>
2.695	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 09/28/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2656 ADDRESS ON FILE</p>
2.696	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Maingate Limited Lifetime Lease Agreement dated 06/30/2004</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2657 ADDRESS ON FILE</p>
2.697	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/30/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2658 ADDRESS ON FILE</p>
2.698	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Section 8 Tenant Lease Agreement dated 06/14/2005</p> <p>State the term remaining</p> <p>Annual Renewal</p> <p>List the contract number of any government contract</p>	<p>CUSTOMER_2659 ADDRESS ON FILE</p>

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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	
2.699	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes Health Center Nursing Home Agreement dated 03/11/2008</p>	<p>CUSTOMER_2659 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.700	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 11/28/2014</p>	<p>CUSTOMER_2660 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.701	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 07/21/2014</p>	<p>CUSTOMER_2661 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.702	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 07/30/2010</p>	<p>CUSTOMER_2662 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.703	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 09/28/2012</p>	<p>CUSTOMER_2663 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.704	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - 90% Repayment Program dated 07/21/2014</p>	<p>CUSTOMER_2664 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		
2.705	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Capitol Lakes, Inc. Residence and Care Agreement - Traditional Form 202-2012 dated 09/01/2012</p>	<p>CUSTOMER_2665 ADDRESS ON FILE</p>	
	<p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>		

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2.706	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Healthcare Provider Agreement dated 08/05/2008</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>DEAN HEALTH SYSTEMS, INC 1277 DEMING WAY MADISON, WI 53717</p>
2.707	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Addendum to Dean Health Systems Contract dated 12/01/2014</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>DEAN HEALTH SYSTEMS, INC 1277 DEMING WAY MADISON, WI 53717</p>
2.708	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Employee Dental Plans dated 01/01/2015</p> <p>State the term remaining</p> <p>11 Months</p> <p>List the contract number of any government contract</p>	<p>DELTA DENTAL OF WISCONSIN, INC P.O. BOX 828 STEVENS POINT, WI 54481</p>
2.709	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Healthcare Services and Supplies dated 01/01/2005</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>EMPLOYER HEALTH CARE ALLIANCE COOPERATIVE 37 KESSEL COURT, SUITE 201 MADISON, WI 53711</p>
2.710	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Mental Health Services Contract dated 03/28/2008</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>GORDON I. HERZ, PH.D. 478 COMMERCE DR. #204 MADISON, WI 53719</p>
2.711	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Prepaid Healthcare Services dated 09/01/2008</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>GROUP HEALTH COOPERATIVE OF SOUTH CENTRAL WISCONSIN 1265 JOHN Q. HAMMONS DRIVE MADISON, WI 53744</p>
2.712	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Skilled Services Compensation Schedule dated 09/01/2014</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>GROUP HEALTH COOPERATIVE OF SOUTH CENTRAL WISCONSIN 1265 JOHN Q. HAMMONS DRIVE MADISON, WI 53744</p>

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2.713	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>HMO Contract dated 01/07/2016</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>GUNDERSEN HEALTH PLAN, INC 1836 SOUTH AVENUE, NCA2-01 LA CROSSE, WI 54601</p>
2.714	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Educational Programs for Clinical Experience dated 01/07/2009</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>HERZING COLLEGE W140N8917 LILLY RD MENOMONEE FALLS, WI 53051</p>
2.715	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Rental Therapy Agreement dated 11/13/2009</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>HILL-ROM COMPANY, INC 1069 STATE ROUTE 46 EAST BATESVILLE, IN 47006</p>
2.716	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Hospice Services dated 05/15/2009</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>HOSPICECARE INC. 5395 E CHERYL PARKWAY MADISON, WI 53711</p>
2.717	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>AMAC Purchase Agreement dated 12/17/2014</p> <p>State the term remaining</p> <p>10 months</p> <p>List the contract number of any government contract</p>	<p>INTEGRA TELECOM PO BOX 1450 MINNEAPOLIS, MN 55485</p>
2.718	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Medical Supply Pricing dated 07/17/2009</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>KCI USA, INC P.O. BOX 659508 SAN ANTONIO, TX 78265</p>
2.719	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Educational Programs for Clinical Experience dated 09/15/2014</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>MADISON AREA TECHNICAL COLLEGE 1701 WRIGHT STREET MADISON, WI 53704</p>

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2.720	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Educational Programs for Clinical Experience dated 10/28/2008</p> <p>State the term remaining List the contract number of any government contract</p> <p>Auto Renewal</p>	<p>MADISON AREA TECHNICAL COLLEGE DISTRICT 1701 WRIGHT STREET MADISON, WI 53704</p>
2.721	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Waste Services Agreement dated 07/24/2015</p> <p>State the term remaining List the contract number of any government contract</p> <p>1 year 7 months</p>	<p>MADISON ENVIRONMENTAL RESOURCING, INC. 1310 WEST BADGER ROAD MADISON, WI 53713</p>
2.722	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Educational Programs for Clinical Experience dated 01/01/2010</p> <p>State the term remaining List the contract number of any government contract</p> <p>Auto Renewal</p>	<p>MADISON METROPOLITAN SCHOOL DISTRICT 545 W DAYTON ST MADISON, WI 53703</p>
2.723	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Facilities Use Agreement dated 07/01/2015</p> <p>State the term remaining List the contract number of any government contract</p> <p>5 months</p>	<p>MADISON METROPOLITAN SCHOOL DISTRICT (ON BEHALF OF MADISON SCHOOL AND COMMUNITY RECREATION) 3802 REGENT ST. MADISON, WI 53705</p>
2.724	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Linen Service Agreement dated 06/18/2009</p> <p>State the term remaining List the contract number of any government contract</p> <p>Auto Renewal</p>	<p>MADISON UNITED HEALTHCARE LINEN, LTD 1310 WEST BADGER ROAD MADISON, WI 53713</p>
2.725	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Medical Supply Contract dated 01/26/2010</p> <p>State the term remaining List the contract number of any government contract</p> <p>Auto Renewal</p>	<p>MCKESSON MEDICAL SURGICAL MEDIMART INC. 8121 10TH AVE N MINNEAPOLIS, MN 55427</p>
2.726	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>HC Supply Contract dated 01/01/2011</p> <p>State the term remaining List the contract number of any government contract</p> <p>Evergreen</p>	<p>MEDLINE INDUSTRIES, INC ONE MEDLINE PLACE MUNDELEIN, IL 60060</p>

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2.727	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Laboratory Services dated 01/01/2011</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>MERITER HEALTH ENTERPRISES DBA MERITER LABORATORIES 202 SOUTH PARK STREET MADISON, WI 53715</p>
2.728	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Inventory Consignment dated 04/01/2008</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>MERITER HEALTH ENTERPRISES, INC., DBA MERITER HOME HEALTH 202 SOUTH PARK STREET MADISON, WI 53715</p>
2.729	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Durable Medical Equipment dated 04/01/2008</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>MERITER HEALTH ENTERPRISES, INC., DBA MERITER HOME HEALTH 202 SOUTH PARK STREET MADISON, WI 53715</p>
2.730	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Confidentiality Agreement dated 04/02/2008</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>MERITER HOSPITAL INC 202 SOUTH PARK STREET MADISON, WI 53715</p>
2.731	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Transfer Agreement dated 12/09/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>MERITER HOSPITAL, INC. 6720 CENTURY AVE. MIDDLETON, WI 53562</p>
2.732	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Acupuncturist Independent Contractor dated 02/25/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>MICHAEL OJER 2334 TALC TR #204 MADISON, WI 53719</p>
2.733	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Health and Wellness Agreement dated 01/01/2016</p> <p>State the term remaining</p> <p>1 year 11 months</p> <p>List the contract number of any government contract</p>	<p>MIDDLETON GLEN, INC. 6720 CENTURY AVE. MIDDLETON, WI 53562</p>

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2.734	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Pharmaceutical Services dated 11/01/2012</p> <p>State the term remaining</p> <p>Expired</p> <p>List the contract number of any government contract</p>	<p>MIKE FLINT ENTERPRISES, INC 3250 KINGSLEY WAY MADISON, WI 53713</p>
2.735	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Offsite Record Storage dated 06/10/2013</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>NAVIANT, INC 201 PRAIRIE HEIGHTS DRIVE VERONA, WI 53593</p>
2.736	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Phone System Agreement dated 04/16/2012</p> <p>State the term remaining</p> <p>1 year 2 months</p> <p>List the contract number of any government contract</p>	<p>NEC FINANCIAL SERVICES, LLC 250 PEHLE AVE. #309 SADDLE BROOK, NJ 7663</p>
2.737	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Management Services Agreement dated 01/31/2014</p> <p>State the term remaining</p> <p>3 years, 1.5 months</p> <p>List the contract number of any government contract</p>	<p>PACIFIC RETIREMENT SERVICES, INC 1 WEST MAIN ST, SUITE 303 MEDFORD, OR 97501</p>
2.738	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Waste Removal Contract dated 3/25/1996</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>PELLITTERI'S CONTAINER HAUL-AWAY, INC P.O. BOX 9426 MADISON, WI 53715</p>
2.739	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>HMO Contract dated 08/01/2008</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>PHYSICIANS PLUS INSURANCE CORPORATION 22 EAST MIFFLIN ST. MADISON, WI 53703</p>
2.740	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Provider Agreement dated 08/01/2008</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>PHYSICIANS PLUS INSURANCE CORPORATION 22 EAST MIFFLIN ST. MADISON, WI 53703</p>

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2.741	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Pitney Bowes Lease dated 07/31/2015</p> <p>State the term remaining</p> <p>2 years 4 months</p> <p>List the contract number of any government contract</p>	<p>PITNEY BOWES 27 WATERVIEW DR. SHELTON, CT 06484</p>
2.742	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Facility Service Agreement dated 11/13/2013</p> <p>State the term remaining</p> <p>2 years 4 months</p> <p>List the contract number of any government contract</p>	<p>PREFERRED PODIATRY GROUP, P.C. 425 HUEHL RD., UNIT 13 NORTHBROOK, IL 60062</p>
2.743	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Health Center Training Subscription dated 08/09/2012</p> <p>State the term remaining</p> <p></p> <p>List the contract number of any government contract</p>	<p>PROVIDIGM, LLC 8055 E TUFTS AVE #1200 DENVER, CO 80237</p>
2.744	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Language Services (Onsite Interpreters) dated 10/01/2012</p> <p>State the term remaining</p> <p></p> <p>List the contract number of any government contract</p>	<p>PURPLE LANGUAGE SERVICES 595 MENLO DRIVE ROCKLIN, CA 95765</p>
2.745	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Standard Independent Consultant Agreement dated 2/9/16</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>RAMSEY, AMY 2400 PARMENTER ST, APT 215 MADISON, WI 53715</p>
2.746	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Health Center Training Subscription dated 11/05/2013</p> <p>State the term remaining</p> <p>7 months</p> <p>List the contract number of any government contract</p>	<p>RELIAS LEARNING, LLC 111 CORNING ROAD, SUITE 250 CARY, NC 27518</p>
2.747	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Nursing Personnel dated 09/25/2014</p> <p>State the term remaining</p> <p></p> <p>List the contract number of any government contract</p>	<p>S&J HOMECARE D/B/A BRIGHTSTAR 7365 KIRKWOOD CT #345 MAPLE GROVE, MN 55369</p>

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Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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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
2.748	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Lease Agreement dated 12/16/2014</p> <p>State the term remaining</p> <p>2 years</p> <p>List the contract number of any government contract</p>	<p>SALON PS WISCONSIN, LLC 345 W MAIN ST MADISON, WI 53703</p>
2.749	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Elevator Maintenance dated 03/01/2005</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>SCHINDLER ELEVATOR CORPORATION 1906 WRIGHT STREET MADISON, WI 53704</p>
2.750	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Elevator Maintenance Upgrade dated 07/22/2015</p> <p>State the term remaining</p> <p></p> <p>List the contract number of any government contract</p>	<p>SCHINDLER ELEVATOR CORPORATION 1906 WRIGHT STREET MADISON, WI 53704</p>
2.751	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Elevator Maintenance Upgrade dated 07/28/2015</p> <p>State the term remaining</p> <p></p> <p>List the contract number of any government contract</p>	<p>SCHINDLER ELEVATOR CORPORATION 1906 WRIGHT STREET MADISON, WI 53704</p>
2.752	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Elevator Maintenance Upgrade dated 07/28/2015</p> <p>State the term remaining</p> <p></p> <p>List the contract number of any government contract</p>	<p>SCHINDLER ELEVATOR CORPORATION 1906 WRIGHT STREET MADISON, WI 53704</p>
2.753	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Elevator Maintenance Upgrade dated 07/28/2015</p> <p>State the term remaining</p> <p></p> <p>List the contract number of any government contract</p>	<p>SCHINDLER ELEVATOR CORPORATION 1906 WRIGHT STREET MADISON, WI 53704</p>
2.754	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Elevator Maintenance Upgrade dated 07/28/2015</p> <p>State the term remaining</p> <p></p> <p>List the contract number of any government contract</p>	<p>SCHINDLER ELEVATOR CORPORATION 1906 WRIGHT STREET MADISON, WI 53704</p>

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2.755	State what the contract or lease is for and the nature of the debtor's interest	Senior Living Agreement dated 02/05/2014	SENIOR-LIVING.COM, INC. 8521 LEESBURG PIKE #310 VIENNA, VA 22182
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.756	State what the contract or lease is for and the nature of the debtor's interest	SeniorDent Contract for Services dated 12/01/2015	SENIORDENT, INC. 9012 MAGNOLIA LN. TINLEY PARK, IL 60487
	State the term remaining List the contract number of any government contract	11 months	
2.757	State what the contract or lease is for and the nature of the debtor's interest	Respiratory Services Agreement dated 05/07/2008	SPECIALIZED MEDICAL SERVICES, INC. 5343 N. 118TH COURT MILWAUKEE, WI 53226
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.758	State what the contract or lease is for and the nature of the debtor's interest	Building and Roof Lease Agreement dated 03/25/2004	SPRINT SPECTRUM L.P. 6391 SPRINT PARKWAY MAILSTOP KSOPHT0101-Z2650 OVERLAND PARK, KS 66251
	State the term remaining List the contract number of any government contract		
2.759	State what the contract or lease is for and the nature of the debtor's interest	1st Amendment to Building and Roof Lease Agreement dated 11/09/2005	SPRINT SPECTRUM L.P. 6391 SPRINT PARKWAY MAILSTOP KSOPHT0101-Z2650 OVERLAND PARK, KS 66251
	State the term remaining List the contract number of any government contract		
2.760	State what the contract or lease is for and the nature of the debtor's interest	Network Skilled Nursing Facility Provider Agreement dated 01/01/2015	SPWI TPA, INC. DBA QURATZ 840 CAROLINA ST. SAUK CITY, WI 53583
	State the term remaining List the contract number of any government contract	Auto Renewal	
2.761	State what the contract or lease is for and the nature of the debtor's interest	Resident Rotation Agreement dated 10/01/2014	ST. MARY'S HOSPITAL 1808 W. BELTLINE HWY. MADISON, WI 53713
	State the term remaining List the contract number of any government contract	7 months	

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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
2.762	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>License Agreement dated 01/01/2014</p> <p>State the term remaining</p> <p>Expired</p> <p>List the contract number of any government contract</p>	<p>STOUGHTON HOSPITAL ASSOCIATION 900 RIDGE STREET STOUGHTON, WI 53589</p>
2.763	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Transfer Agreement dated 12/09/2010</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>STOUGHTON HOSPITAL, INC. (AFFILIATED WITH SSM HEALTH CARE OF WISCONSIN) 900 RIDGE STREET STOUGHTON, WI 53589</p>
2.764	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Mobile Diagnostic Services Agreement dated 05/01/2011</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>SYMPHONY DIAGNOSTIC SERVICES NO. 1 (DBA MOBILEXUSA) 101 ROCK ROAD HORSHAM, PA 19044</p>
2.765	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Aquarium Maintenance and Sales dated 03/30/2015</p> <p>State the term remaining</p> <p>Evergreen</p> <p>List the contract number of any government contract</p>	<p>TANK WISE LLC 6155 PERROT PLACE MCFARLAND, WI 53558</p>
2.766	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Agreement for the Conduct of a Clinical Education dated 05/01/2012</p> <p>State the term remaining</p> <p>3 years 9 months</p> <p>List the contract number of any government contract</p>	<p>THE BOARD OF REGENTS OF THE UNIVERSITY OF WISCONSIN SYSTEM ON BEHALF OF THE UNIVERSITY OF WISCONSIN-EAU CLAIRE 105 GARFIELD AVE EAU CLAIRE, WI 54701</p>
2.767	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Program Letter Agreement dated 07/01/2013</p> <p>State the term remaining</p> <p>Auto Renewal</p> <p>List the contract number of any government contract</p>	<p>THE UNIVERSITY OF WISCONSIN - DEPARTMENT OF FAMILY MEDICINE 1100 DELAPLAINE COURT MADISON, WI 53715</p>
2.768	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Theiss Interior Design Contract</p> <p>State the term remaining</p> <p></p> <p>List the contract number of any government contract</p>	<p>THEISS INTERIOR DESIGN, LTD. 740 N. PLANKINTON AVE. #800 MILWAUKEE, WI 53203</p>

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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
2.769	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>SNF Participation Agreement dated 07/31/2014</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TRICARE PO BOX 870158 SURFSIDE BEACH, SC 29587</p>
2.770	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Message Therapist Independent Contractor Agreement dated 02/25/2015</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>TRIQUETRA MASSAGE LLC 585 N MAIN ST COTTAGE GROVE, WI 53527</p>
2.771	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Provider Services Agreement dated 01/01/2015</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>UNITY HEALTH PLANS INSURANCE CORPORATION 840 CAROLINA ST. SAUK CITY, WI 53527</p>
2.772	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Transfer Agreement dated 12/09/2010</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>UNIVERSITY OF WISCONSIN 600 HIGHLAND AVE MADISON, WI 53792</p>
2.773	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Business Partner Affinity Agreement dated 07/01/2014</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>UNIVERSITY OF WISCONSIN FOUNDATION DBA WISCONSIN ALUMNI ASSOCIATION (WAA) 650 N. LAKE ST. MADISON, WI 53706</p>
2.774	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Medical Director Services Agreement dated 07/01/2008</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>UNIVERSITY OF WISCONSIN MEDICAL FOUNDATION, INC. 7974 UW HEALTH COURT MIDDLETON, WI 53562</p>
2.775	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Practicum in Health Care Administration dated 06/01/2015</p> <p>State the term remaining</p> <p>List the contract number of any government contract</p>	<p>UNIVERSITY OF WISCONSIN-EAU CLAIRE 105 GARFIELD AVE EAU CLAIRE, WI 54701</p>

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2.776	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Vigil Software Maintenance Agreement dated 04/01/2013</p> <p>State the term remaining List the contract number of any government contract</p> <p>3 years 9 months</p>	<p>VIGIL HEALTH SOLUTIONS, INC. #2102-4464 MARKHAM ST, VICTORIA, BRITISH COLUMBIA, CANADA V8Z 7X8</p>
2.777	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>VCTV Equipment Warranty Agreement dated 09/01/2015</p> <p>State the term remaining List the contract number of any government contract</p> <p>8 months</p>	<p>VISITOR AND COMMUNITY TELEVISION CORPORATION 4600 WEST COLLEGE BLVD, STE 101 OVERLAND PARK, KS 66211</p>
2.778	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Pest Abatement Agreement dated 01/01/2016</p> <p>State the term remaining List the contract number of any government contract</p> <p>Auto Renewal</p>	<p>WILKIL PEST CONTROL 2803 CAPITOL DRIVE, SUITE 1 SUN PRAIRIE, WI 53590</p>
2.779	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Preferred Provider Agreement dated 04/01/2014</p> <p>State the term remaining List the contract number of any government contract</p> <p>4.5 years</p>	<p>WISCONSIN PHYSICIANS SERVICE INSURANCE CORPORATION (WPS) 1717 W. BROADWAY MADISON, WI 53708</p>
2.780	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Xerox Lease Agreement dated 03/14/2014</p> <p>State the term remaining List the contract number of any government contract</p> <p>3 years 1 month</p>	<p>XEROX XEROX SQUARE 16TH FLOOR 100 CLINTON AVENUE SOUTH ROCHESTER, NY 14604</p>

Fill in this information to identify the case:

Debtor name Capitol Lakes, Inc.

United States Bankruptcy Court for the: Western District of Wisconsin
(State)

Case number (If known): 16-10158 (RDM)

☐ Check if this is an amended filing

Official Form 206H

Schedule H: 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. Does the debtor 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

Name

Mailing address

Column 2: Creditor

Name

Check all schedules that apply:

- ☐ D
☐ E/F
☐ G

- ☐ D
☐ E/F
☐ G

- ☐ D
☐ E/F
☐ G

- ☐ D
☐ E/F
☐ G

- ☐ D
☐ E/F
☐ G

- ☐ D
☐ E/F
☐ G

Fill in this information to identify the case and this filing:Debtor Name Capitol Lakes, Inc.United States Bankruptcy Court for the: Western District of: Wisconsin
(State)Case number (If known): 16-10158 (RDM)**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)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206—Summary)
- ☐ 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: 02/10/2016
MM /DD/ YYYY

X /s/ Tim Conroy
Signature of individual signing on behalf of debtor
Tim Conroy
Printed name
Executive Director
Position or relationship to debtor