Fill in this information to identify your case:

United States Bankruptcy Court for the:

Eastern District of California (State)

Case number (*If known*): _____

☐ Check if this is an amended filing

Chapter you are filing under:
☐ Chapter 7
☒ Chapter 11
☐ Chapter 12
☐ Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Sukhraj First name S. Middle name Pamma Last name Suffix (Sr., Jr., II, III)	First name Middle name Last name Suffix (Sr., Jr., II, III)
2. All other names you have used in the last 8 years Include your married or maiden names and any assumed, trade names and *doing business as* names. Do NOT list the name of any separate legal entity such as a corporation, partnership, or LLC that is not filing this petition.	First name Middle name Last name First name Middle name Last name dba Sukhraj S. Pamma Farms Business name (if applicable) Business name (if applicable)	First name Middle name Last name First name Middle name Last name Business name (if applicable) Business name (if applicable)
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - 2124 OR 9 xx - xx -	xxx - xx - OR 9 xx - xx -

Debtor 1 Sukhraj S. Pamma
First Name Middle Name Last Name

Case number (if known) _____

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Your Employer Identification Number (EIN), if any.	47 - 4545065 EIN _____ - _____ EIN	_____ - _____ EIN _____ - _____ EIN

5. Where you live

		If Debtor 2 lives at a different address:
	9850 Sheldon Ave. Number Street	Number Street
	Live Oak CA 95953 City State ZIP Code	City State ZIP Code
	Sutter County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	**If Debtor 2's mailing address is different from yours, fill it in here.** Note that the court will send any notices to this mailing address.
	855 Harter Parkway, Suite 305 Number Street	Number Street
	P.O. Box	P.O. Box
	Yuba City CA 95993 City State ZIP Code	City State ZIP Code

6. Why you are choosing *this district* to file for bankruptcy

About Debtor 1:	About Debtor 2:
Check one:	*Check one:*
☒ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Sukhraj S. Pamma
First Name Middle Name Last Name

Case number (if known) _____

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the Bankruptcy Code you are choosing to file under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☐ Chapter 7
- ☒ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13

8. How you will pay the fee

☒ **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

☐ **I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

☐ **I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for bankruptcy within the last 8 years?

☒ No

☐ Yes. District _____ When _____ (MM / DD / YYYY) Case number _____

District _____ When _____ (MM / DD / YYYY) Case number _____

District _____ When _____ (MM / DD / YYYY) Case number _____

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

☒ No

☐ Yes. Debtor _____ Relationship to you _____

District _____ When _____ (MM / DD / YYYY) Case number, if known _____

Debtor _____ Relationship to you _____

District _____ When _____ (MM / DD / YYYY) Case number, if known _____

11. Do you rent your residence?

☒ No Go to line 12.

☐ Yes. Has your landlord obtained an eviction judgment against you?

- ☐ No. Go to line 12.
- ☐ Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Debtor 1 Sukhraj S. Pamma
First Name Middle Name Last Name

Case number (if known) _____

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.
If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

☐ No. Go to Part 4.
☒ Yes. Name and location of business

Sukhraj S. Pamma Farms
Name of business, if any

855 Harter Parkway
Number Street

Suite 305

Yuba City CA 95993
City State ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
☒ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a *small business debtor* or a debtor as defined by 11 U.S. C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☐ No. I am not filing under Chapter 11.
☒ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.
☐ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☒ No
☐ Yes. What is the hazard? _____

If immediate attention is needed, why is it needed? _____

Where is the property? _____
Number Street

City State ZIP Code

Debtor 1 Sukhraj S. Pamma
First Name Middle Name Last Name

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.
If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.
Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ **I am not required to receive a briefing about credit counseling because of:**

☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Sukhraj S. Pamma
First Name Middle Name Last Name

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- [x] No. Go to line 16b.
- [ ] Yes. Go to line 17.

16b. **Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- [ ] No. Go to line 16c.
- [x] Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

_____

17. Are you filing under Chapter 7?

- [x] No. I am not filing under Chapter 7. Go to line 18.
- [ ] Yes.I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
  - [ ] No
  - [ ] Yes

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

18. How many creditors do you estimate that you owe?

- [ ] 1-49
- [ ] 50-99
- [x] 100-199
- [ ] 200-999
- [ ] 1,000-5,000
- [ ] 5,001-10,000
- [ ] 10,001-25,000
- [ ] 25,001-50,000
- [ ] 50,001-100,000
- [ ] More than 100,000

19. How much do you estimate your assets to be worth?

- [ ] $0-$50,000
- [ ] $50,001-$100,000
- [ ] $100,001-$500,000
- [ ] $500,001-$1 million
- [ ] $1,000,001-$10 million
- [x] $10,000,001-$50 million
- [ ] $50,000,001-$100 million
- [ ] $100,000,001-$500 million
- [ ] $500,000,001-$1 billion
- [ ] $1,000,000,001-$10 billion
- [ ] $10,000,000,001-$50 billion
- [ ] More than $50 billion

20. How much do you estimate your liabilities to be?

- [ ] $0-$50,000
- [ ] $50,001-$100,000
- [ ] $100,001-$500,000
- [ ] $500,001-$1 million
- [ ] $1,000,001-$10 million
- [x] $10,000,001-$50 million
- [ ] $50,000,001-$100 million
- [ ] $100,000,001-$500 million
- [ ] $500,000,001-$1 billion
- [ ] $1,000,000,001-$10 billion
- [ ] $10,000,000,001-$50 billion
- [ ] More than $50 billion

Debtor 1 Sukhraj S. Pamma
First Name Middle Name Last Name

Case number (if known) _____

Part 7: Sign Below

For you

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand 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 $250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

✗ _____ ✗ _____

Signature of Debtor 1 Sukhraj S. Pamma Signature of Debtor 2

Executed on 08/05/2024 Executed on _____
MM / DD / YYYY MM / DD / YYYY

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

✗ _____ Date 08/05/2024
Signature of Attorney for Debtor Sukhraj S. Pamma MM / DD / YYYY

Bernard R. Given II
Printed name

Loeb & Loeb LLP
Firm name

10100 Santa Monica Blvd.
Number Street

Suite 2200

Los Angeles CA 90067
City State ZIP Code

Contact phone 310-282-2000 Email address bgiven@loeb.com

134718 CA
Bar number State

Certificate Number: 14751-CAE-CC-038693926

14751-CAE-CC-038693926

CERTIFICATE OF COUNSELING

I CERTIFY that on July 23, 2024, at 9:26 o'clock AM PDT, SUKHRAJ S PAMMA received from $$$$$$0$ BK Class, Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the Eastern District of California, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan was not prepared. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: July 23, 2024 By: /s/AMEY AIONO

Name: AMEY AIONO

Title: Certified Credit Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

Fill in this information to identify your case:

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Debtor 2 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of CA

Case number (If known)

☐ Check if this is an amended filing

Official Form 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an *insider*. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

		Unsecured claim
1 Small Business Administration (Creditor's Name); 14925 Kingsport Rd. (Number Street); Fort Worth TX 76155 (City State ZIP Code); Contact; Contact phone	What is the nature of the claim? Loan As of the date you file, the claim is: Check all that apply. ☒ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply Does the creditor have a lien on your property? ☐ No ☐ Yes. Total claim (secured and unsecured): $ ____ Value of security: − $ ____ Unsecured claim $ ____	$2,000,000.00
2 Small Business Administration (Creditor's Name); 14925 Kingsport Rd. (Number Street); Forth Worth TX 76155 (City State ZIP Code); Contact; Contact phone	What is the nature of the claim? Loan As of the date you file, the claim is: Check all that apply. ☒ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply Does the creditor have a lien on your property? ☐ No ☐ Yes. Total claim (secured and unsecured): $ ____ Value of security: − $ ____ Unsecured claim $ ____	$1,900,000.00

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Case number (if known)

		Unsecured claim
3 Instafunders LLC Creditor's Name 1019 Kane Concourse Number Street Suite 202-A Bay Harbor Islands FL 33154 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Judgment **As of the date you file, the claim is:** Check all that apply. ☒ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ ____ Value of security: − $ ____ Unsecured claim $ ____	$ 1,890,826.46
4 UFS West LLC Creditor's Name 381 Sunrise Highway Number Street 3rd Floor Lynbrook NY 11563 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Judgment **As of the date you file, the claim is:** Check all that apply. ☒ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ ____ Value of security: − $ ____ Unsecured claim $ ____	$ 1,890,826.46
5 Webfund LLC Creditor's Name 99 Washington Avenue Number Street Suite 1008 Albany NY 12260 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Judgment **As of the date you file, the claim is:** Check all that apply. ☒ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ ____ Value of security: − $ ____ Unsecured claim $ ____	$ 1,890,826.46
6 Small Business Administration Creditor's Name 14925 Kingsport Rd. Number Street Fort Worth TX 76155 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Loan **As of the date you file, the claim is:** Check all that apply. ☒ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ ____ Value of security: − $ ____ Unsecured claim $ ____	$ 1,808,000.00
7 I.R.S. Creditor's Name 325 East 2500 South Number Street Ogden UT 84401 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Taxes **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ ____ Value of security: − $ ____ Unsecured claim $ ____	$ 125,000.00

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Case number (if known) _____

		Unsecured claim
8 PG&E Creditor's Name PO Box 997340 Number Street Sacramento CA 95899 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Utility **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ _____ Value of security: − $ _____ Unsecured claim $ _____	$ 112,000.00
9 Jenjil Packaging Creditor's Name 400 3rd Street Number Street Turlock CA 95380 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Business **As of the date you file, the claim is:** Check all that apply. ☒ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ _____ Value of security: − $ _____ Unsecured claim $ _____	$ 100,000.00
10 John Roth Creditor's Name 9075 Old Davis Rd Number Street Davis CA City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Loan **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ _____ Value of security: − $ _____ Unsecured claim $ _____	$ 100,000.00
11 PG&E Creditor's Name PO Box 997340 Number Street Sacramento CA 95380 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Utility **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ _____ Value of security: − $ _____ Unsecured claim $ _____	$ 100,000.00
12 Capital One Creditor's Name 1680 Capital One Drive Number Street McLean VA 22102 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Credit Card **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ _____ Value of security: − $ _____ Unsecured claim $ _____	$ 90,155.00

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Case number (if known) _____

		Unsecured claim
13 Trident Property Management Creditor's Name 1110 Civic Center Blvd Number Street Suite 102 Yuba City CA 95993 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** HOA Dues **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ _____ Value of security: − $ _____ Unsecured claim $ _____	$75,000.00
14 Accion Opportunity Fund Creditor's Name 111 W Street Number Street #800 San Jose CA 95113 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Loan **As of the date you file, the claim is:** Check all that apply. ☒ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ _____ Value of security: − $ _____ Unsecured claim $ _____	$72,818.00
15 American Express Creditor's Name PO Box 96001 Number Street Los Angeles CA 90096 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Credit Card **As of the date you file, the claim is:** Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ _____ Value of security: − $ _____ Unsecured claim $ _____	$53,233.00
16 Fieldin Creditor's Name 2600 Ventura Street Number Street Suite 201 Fresno CA 93721 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Vendor **As of the date you file, the claim is:** Check all that apply. ☒ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ _____ Value of security: − $ _____ Unsecured claim $ _____	$45,000.00
17 Industrial Credit Creditor's Name PO Box 4149 Number Street Bellevue WA 98009 City State ZIP Code Contact Contact phone	**What is the nature of the claim?** Loan **As of the date you file, the claim is:** Check all that apply. ☒ Contingent ☐ Unliquidated ☐ Disputed ☐ None of the above apply **Does the creditor have a lien on your property?** ☐ No ☐ Yes. Total claim (secured and unsecured): $ _____ Value of security: − $ _____ Unsecured claim $ _____	$45,000.00

Debtor 1 SUKHRAJ S. PAMMA dba SUKHRAJ S. PAMMA FARMS
First Name Middle Name Last Name

Case number (if known) _____

Unsecured claim

18 Tri Counties Bank
Creditor's Name
PO Box 992570
Number Street
Redding CA 96099
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? Loan $45,000.00
As of the date you file, the claim is: Check all that apply.
☒ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): $ _____
Value of security: − $ _____
Unsecured claim $ _____

19 United States Treasury
Creditor's Name
325 East 2500 South
Number Street
Ogden UT 84201
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? Tax $40,000.00
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): $ _____
Value of security: − $ _____
Unsecured claim $ _____

20 Internal Revenue Service
Creditor's Name
325 East 2500 South
Number Street
Ogden UT 84201
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? Tax $30,000.00
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): $ _____
Value of security: − $ _____
Unsecured claim $ _____

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

✕ _____
Signature of Debtor 1
Sukhraj S. Pamma
Date 08/05/2024
MM / DD / YYYY

✕ _____
Signature of Debtor 2
Date _____
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 Sukhraj S. Pamma dba Sukhraj S. Pamma Farms
First Name Middle Name Last Name

Debtor 2 (Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Eastern District of CA

Case number (If known) _____

☐ Check if this is an amended filing

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

12/21

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11 (other than Subchapter V). If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Current Monthly Income

1. **What is your marital and filing status?** Check one only.

☐ **Not married.** Fill out Column A, lines 2-11.

☐ **Married and your spouse is filing with you.** Fill out both Columns A and B, lines 2-11.

☒ **Married and your spouse is NOT filing with you.** Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write $0 in the space.

	Column A **Debtor 1**	*Column B* **Debtor 2**
2. **Your gross wages, salary, tips, bonuses, overtime, and commissions** (before all payroll deductions).	$ _____	$ _____
3. **Alimony and maintenance payments.** Do not include payments from a spouse if Column B is filled in.	$ _____	$ _____
4. **All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support.** Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	$ 17,761	$ _____

5. **Net income from operating a business, profession, or farm**

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	$ 564,403.00	$ _____			
Ordinary and necessary operating expenses	– $ 748,052.00	– $ _____			
Net monthly income from a business, profession, or farm	$ -183,649.00	$ _____	Copy here ➔	$ -183649	$ _____

6. **Net income from rental and other real property**

	Debtor 1	Debtor 2			
Gross receipts (before all deductions)	$ 40,391.00	$ _____			
Ordinary and necessary operating expenses	– $ 67,472.00	– $ _____			
Net monthly income from rental or other real property	$ -27,081	$ _____	Copy here ➔	$ -27,081	$ _____

Debtor 1 Sukhraj S. Pamma dba Sukhraj S. Pamma Farms
First Name Middle Name Last Name

Case number *(if known)* _____

	Column A Debtor 1	Column B Debtor 2
7. **Interest, dividends, and royalties**	$ 781	$ _____
8. **Unemployment compensation**	$ _____	$ _____
Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ↓		
For you ..... $ _____		
For your spouse ..... $ _____		
9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	$ _____	$ _____
10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.		
Capital Gains	$ 515.00	$ _____
_____	$ _____	$ _____
Total amounts from separate pages, if any.	+ $ _____	+ $ _____
11. **Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	$ -191,673.00 +	$ _____ = $ -191,673.00 **Total current monthly income**

Part 2: Sign Below

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

✗ _____
Signature of Debtor 1

Date 08/05/2024
MM / DD / YYYY

✗ _____
Signature of Debtor 2

Date _____
MM / DD / YYYY