

UNITED STATES DEPARTMENT OF AGRICULTURE  
BEFORE THE SECRETARY OF AGRICULTURE

In re: )  
)  
Custom Fresh Cuts, Inc., ) PACA-D Docket No. 20-J-0017  
)  
Respondent. )

**DECISION AND ORDER WITHOUT HEARING BY REASON OF DEFAULT**

Appearance:

*Shelton S. Smallwood, Esq., with the Office of the General Counsel, United States Department of Agriculture, Washington, DC, for the Complainant, Associate Deputy Administrator, Fair Trade Practices Program, Agricultural Marketing Service (“AMS”).*

**Preliminary Statement**

This is a disciplinary proceeding under the Perishable Agricultural Commodities Act, 1930, as amended (7 U.S.C. §§ 499a *et seq.*) (“PACA”); the regulations promulgated thereunder (7 C.F.R. §§ 46.1 through 46.5) (“Regulations”); and the Rules of Practice Governing Formal Adjudicatory Proceedings Instituted by the Secretary Under Various Statutes (7 C.F.R. §§ 1.130 through 1.151) (“Rules of Practice”).

The Associate Deputy Administrator, Fair Trade Practices Program, Agricultural Marketing Service, United States Department of Agriculture (“Complainant”), initiated this proceeding by filing a complaint against Custom Fresh Cuts, Inc. (“Respondent”) on November 15, 2019. The Complaint alleges that Respondent violated PACA section 2(4) (7 U.S.C. § 499 b(4)) by failing to make full payment promptly to ten sellers, in the total amount of \$696,769.23, for 370 lots of perishable agricultural commodities that Respondent purchased, received, and accepted in interstate and foreign commerce during the period November 2017 through June

2018.<sup>1</sup> Further, the Complaint requests:

That the Administrative Law Judge find that Respondent has willfully, flagrantly and repeatedly violated section 2(4) of the PACA (7 U.S.C. § 499b(4)), and publish of the facts and circumstances of Respondent's violations pursuant to section 8(a) of the PACA (7 U.S.C. § 499h(a)).

Complaint at 4.

Respondent was duly served with a copy of the Complaint and did not file an answer within the twenty-day period prescribed by section 1.136 of the Rules of Practice (7 C.F.R. § 1.136).<sup>2</sup>

On January 10, 2020, Complainant filed a Motion for Decision Without Hearing by Reason of Default ("Motion for Default") and Proposed Decision Without Hearing by Reason of Default ("Proposed Decision"). Respondent has not filed objections to the Motion for Default or Proposed Decision.<sup>3</sup>

Failure to file a timely answer or failure to deny or otherwise respond to allegations in the

---

<sup>1</sup> See Complaint at 2-3.

<sup>2</sup> United States Postal Service records reflect that the Complaint was sent to Respondent's president and fifty-percent shareholder, [REDACTED], via certified mail and delivered on November 22, 2019. Respondent had twenty days from the date of service to file a response. 7 C.F.R. § 1.136(a). Weekends and federal holidays shall be included in the count; however, if the due date falls on a Saturday, Sunday, or federal holiday, the last day for timely filing shall be the following work day. 7 C.F.R. § 1.147(h). In this case, Respondent's answer was due on or before December 12, 2019. Respondent has not filed a response.

<sup>3</sup> United States Postal Service records reflect that the Motion for Default and Proposed Decision were sent to [REDACTED] via certified mail but were returned to the Hearing Clerk's Office as "unclaimed." In accordance with the Rules of Practice, the Hearing Clerk re-mailed (see 7 C.F.R. § 1.142) the Motion for Default and Proposed Decision to the same address via ordinary mail on March 6, 2020. 7 C.F.R. § 1.147(c). Respondent had twenty days from the date of service to file objections thereto. 7 C.F.R. § 1.139. Weekends and federal holidays shall be included in the count; however, if the due date falls on a Saturday, Sunday, or federal holiday, the last day for timely filing shall be the following work day. 7 C.F.R. § 1.147(h). In this case, Respondent's objections were due by March 26, 2020. Respondent has not filed any objections.

Complaint shall be deemed, for purposes of this proceeding, an admission of the allegations in the Complaint, unless the parties have agreed to a consent decision.<sup>4</sup> Other than a consent decision, the Rules of Practice do not provide for exceptions to the regulatory consequences of an unfiled answer where, as in the present case, no meritorious objections have been filed.<sup>5</sup>

As Respondent failed to file a timely answer the Complaint, and upon Complainant's motion for the issuance of a decision without hearing by reason of default, this Decision and Order is issued without further procedure or hearing pursuant to section 1.139 of the Rules of Practice (7 C.F.R. § 1.139).

### **Findings of Fact**

1. Respondent Custom Fresh Cuts, Inc. is a corporation organized and existing under the laws of the state of California. Respondent's mailing address is 2031 Bay Street, Los Angeles, California 90021. Respondent is out of business, and the Complaint was served upon Respondent's president, [REDACTED]. [REDACTED] address was is withheld from this Decision and Order to protect his personal privacy but was provided to the Hearing Clerk's Office for service purposes.
2. At all times material herein, Respondent was licensed and/or operating subject to the provisions of PACA. License number 20160763 was issued to Respondent on June 8, 2016. The license terminated on June 8, 2018, pursuant to PACA section 4(a) (7 U.S.C. § 499d(a)), when Respondent failed to pay the required annual renewal fee.
3. Respondent, during the period November 2017 through June 2018, on or about the dates and in the transactions set forth in Appendix A to the Complaint, incorporated herein by

---

<sup>4</sup> 7 C.F.R. § 1.136(c).

<sup>5</sup> 7 C.F.R. § 1.139; *see supra* note 3 and accompanying text.

reference, failed to make full payment promptly to ten sellers for 370 lots of perishable agricultural commodities that Respondent purchased, received, and accepted in interstate and foreign commerce, in the total amount of \$ 696,769.23.

4. On July 24, 2018, Respondent filed a Voluntary Petition pursuant to Chapter 7 of the Bankruptcy Code (11 U.S.C. §§ 701 *et seq.*) in the United States Bankruptcy Court, Central District of California. The Petition was designated Case No. 18-bk-18625. Respondent list in its Schedule E/F<sup>6</sup> that nine of the ten PACA creditors listed in Appendix A to the Complaint hold unsecured produce-debt claims against Respondent in the amount of \$741,220.09.<sup>7</sup>

### Conclusions

1. The Secretary of Agriculture has jurisdiction in this matter.
2. Respondent Custom Fresh Cuts, Inc.’s failure to make full payment promptly with respect to the 370 transactions referenced in Finding of Fact No. 3 above, and set forth in Appendix A to the Complaint, constitutes willful, flagrant, and repeated violations of PACA section 2(4) (7 U.S.C. § 499b(4)), for which the below Order is issued.
3. The total unpaid balance due to sellers represents more than a *de minimis* amount, thereby obviating the need for a hearing in this matter.<sup>8</sup>

---

<sup>6</sup> Official notice is taken of Respondent’s Voluntary Bankruptcy Petition (designated Case No. 18-bk-18625) and Schedule E/F. 7 C.F.R. § 1.141(h)(6); *see Five Star Food Distribs., Inc.*, 56 Agric. Dec. 880, 893 (U.S.D.A. 1997). Both the Petition and Schedule E/F are attached hereto as “Attachment A.”

<sup>7</sup> The amounts admitted in the Schedule E/F for PACA creditors Fresh Packing Corp. (\$26,184.30); Valley Fruit & Produce, Inc. (\$622,999.81); and Fruit Distributing Corp. of California (\$14,484.00) are larger than the amounts listed in Appendix A to the Complaint (\$22,297.50; \$579,372.55; and \$10,744.00, respectively).

<sup>8</sup> *See The Square Group, LLC*, 75 Agric. Dec. 689, 695 (U.S.D.A. 2016); *Tri-State Fruit & Vegetable, Inc.*, 46 Agric. Dec. 81, 82-83 (U.S.D.A. 1984) (Ruling on Certified Question).

4. As Respondent's license terminated prior to the institution of this proceeding, the appropriate sanction is publication of the facts and circumstances of Respondent's violations.<sup>9</sup>

### ORDER

1. Complainant's Motion for Decision Without Hearing by Reason of Default is GRANTED.
2. A finding is made that Respondent Custom Fresh Cuts, Inc. has committed willful, flagrant, and repeated violations of PACA section 2(4) (7 U.S.C. § 499b(4)).
3. The facts and circumstances of Respondent's PACA violations, as set forth above, shall be published pursuant to PACA section 8(a) (7 U.S.C. § 499h(a)).

This Decision and Order shall be final and effective without further proceedings thirty-five (35) days after service, unless an appeal to the Judicial Officer is filed with the Hearing Clerk within thirty (30) days after service as provided in sections 1.139 and 1.145 of the Rules of Practice (7 C.F.R. §§ 1.139 and 1.145).

Copies of this Decision and Order shall be served upon the parties and counsel by the Hearing Clerk.

Done at Washington, D.C.,  
this 14th day of April 2020

  
Channing D. Strother  
Chief Administrative Law Judge

---

<sup>9</sup> See *Baiardi Chain Food Corp.*, 64 Agric. Dec. 1822, 1832 (U.S.D.A. 2005), *petition for review denied*, 482 F.3d 238 (3d Cir. 2002); *Scamcorp, Inc.*, 57 Agric. Dec. 527, 571 n.23 (U.S.D.A. 1998); *Hogan Distrib., Inc.*, 55 Agric. Dec. 622, 633 (U.S.D.A. 1996).

Hearing Clerk's Office  
United States Department of Agriculture  
Stop 9203, South Building, Room 1031  
1400 Independence Avenue, SW  
Washington, DC 20250-9203  
Tel: 202-720-4443  
Fax: 202-720-9776  
[SM.OHA.HearingClerks@USDA.GOV](mailto:SM.OHA.HearingClerks@USDA.GOV)

# ATTACHMENT A

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Central District of California  
(State)

Case number (if known): Chapter 7

Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

04/16

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

1. Debtor's name Custom Fresh Cuts, Inc.

2. All other names debtor used in the last 8 years Custom Fresh Cuts LLC  
Include any assumed names, trade names, and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 9 5 - 1 1 1 9 8 9 5

4. Debtor's address  
Principal place of business: 2031 Bay Street, Los Angeles, CA 90021, Los Angeles County  
Mailing address, if different from principal place of business: Number Street, P.O. Box, City State ZIP Code  
Location of principal assets, if different from principal place of business: Number Street, City State ZIP Code

5. Debtor's website (URL)

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

Debtor Custom Fresh Cuts, Inc.  
Name

Case number (if known) \_\_\_\_\_

7. Describe debtor's business

A. Check one:

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. Check all that apply:

- Tax-exempt entity (as described in 26 U.S.C. § 501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.naics.com/search/>.

8. Under which chapter of the Bankruptcy Code is the debtor filing?

Check one:

- Chapter 7
- Chapter 9

Chapter 11. Check all that apply:

- Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- A plan is being filed with this petition.
- Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

No

Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
MM / DD / YYYY

If more than 2 cases, attach a separate list.

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?

No

Yes. Debtor \_\_\_\_\_ Relationship \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_  
MM / DD / YYYY

Case number, if known \_\_\_\_\_

List all cases. If more than 1, attach a separate list.

Debtor Custom Fresh Cuts, Inc.  
Name

Case number (if known) \_\_\_\_\_

11. Why is the case filed in this district?

Check all that apply:

- Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

- No
- Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

- It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_
- It needs to be physically secured or protected from the weather.
- It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- Other \_\_\_\_\_

Where is the property? \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Is the property insured?

- No
  - Yes. Insurance agency \_\_\_\_\_
- Contact name \_\_\_\_\_
- Phone \_\_\_\_\_

**Statistical and administrative information**

13. Debtor's estimation of available funds

Check one:

- Funds will be available for distribution to unsecured creditors.
- After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- |                                          |                                        |                                            |
|------------------------------------------|----------------------------------------|--------------------------------------------|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |                                        |                                            |

15. Estimated assets

- |                                                         |                                                      |                                                        |
|---------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> \$0-\$50,000                   | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000             | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input checked="" type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million          | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

Debtor Custom Fresh Cuts, Inc.

Case number (if known) \_\_\_\_\_

16. Estimated liabilities

- \$0-\$50,000
- \$50,001-\$100,000
- \$100,001-\$500,000
- \$500,001-\$1 million
- \$1,000,001-\$10 million
- \$10,000,001-\$50 million
- \$50,000,001-\$100 million
- \$100,000,001-\$500 million
- \$500,000,001-\$1 billion
- \$1,000,000,001-\$10 billion
- \$10,000,000,001-\$50 billion
- More than \$50 billion

**Request for Relief, Declaration, and Signatures**

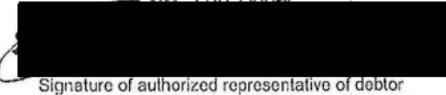
WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

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

Executed on \_\_\_\_\_



Richard Wise

Printed name

Signature of authorized representative of debtor

Title President

18. Signature of attorney

/s/ Gregory K. Jones

Signature of attorney for debtor

Date 07/24/2018

MM / DD / YYYY

Gregory K. Jones

Printed name

DYKEMA GOSSETT LLP

Firm name

333 South Grand Avenue, Suite 2100

Number Street

Los Angeles

City

CA

State

90071

ZIP Code

213-457-1800

Contact phone

gjones@dykema.com

Email address

181072

Bar number

CA

State

**Fill in this information to identify the case:**

Debtor Custom Fresh Cuts, Inc.  
 United States Bankruptcy Court for the: Central District of California  
(State)  
 Case number 2:18-bk-18625  
(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
<b>2.1</b>	Priority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____ \$ _____
	Date or dates debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)		
<b>2.2</b>	Priority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____ \$ _____
	Date or dates debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (qqqqq)		
<b>2.3</b>	Priority creditor's name and mailing address _____ _____ _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ _____ \$ _____
	Date or dates debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)		

Debtor Custom Fresh Cuts, Inc.  
Name

Case number (if known) 2:18-bk-18625

**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 <u>1-800-Timeclocks.com</u> <u>1200 So Brand Blvd #11-110</u> <u>Glendale, CA 91204</u>	As of the petition filing date, the claim is: \$ <u>995.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ref# 44947</u> Date or dates debt was incurred <u>3/6/18</u> Last 4 digits of account number <u>5 2 6 5</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	Nonpriority creditor's name and mailing address <u>Alaska Flake Ice</u> <u>PO Box 2675</u> <u>Oxford, CA 93033</u>	As of the petition filing date, the claim is: \$ <u>1,176.58</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Invoice # 269642</u> Date or dates debt was incurred <u>6/7/18</u> Last 4 digits of account number <u>N/A</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	Nonpriority creditor's name and mailing address <u>Allied Plastics</u> <u>5380 Lindberg Lane</u> <u>Bell, CA 90201</u>	As of the petition filing date, the claim is: \$ <u>386.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Invoice # 47883</u> Date or dates debt was incurred <u>6/7/18</u> Last 4 digits of account number <u>O N E T</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	Nonpriority creditor's name and mailing address <u>Alpha Labels</u> <u>1220 S Maple Ave #206</u> <u>Los Angeles, CA 90015</u>	As of the petition filing date, the claim is: \$ <u>572.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Invoices</u> Date or dates debt was incurred <u>5/23/18- 6/4/18</u> Last 4 digits of account number <u>N/A</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address <u>ARS Recue Rooter</u> <u>7243 Somerset Blvd</u> <u>Paramount, CA 90723</u>	As of the petition filing date, the claim is: \$ <u>6,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Invoice # 477127</u> Date or dates debt was incurred <u>3/19/18</u> Last 4 digits of account number <u>N/A</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address <u>Mr Chavez Produce</u> <u>PO Box 2125</u> <u>Basset, CA 91746</u>	As of the petition filing date, the claim is: \$ <u>12,481.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Invoices</u> Date or dates debt was incurred <u>7/2/15-5/31/18</u> Last 4 digits of account number <u>N/A</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Custom Fresh Cuts, Inc.  
Name

Case number (if known) 2:18-bk-18625

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 NONPRIORITY creditors exist, do not fill out or submit this page.		Amount of claim
3.7	<p>Nonpriority creditor's name and mailing address <u>Cleancraft Industries Inc</u> <u>2024 Camfield Ave</u> <u>Commerce, CA 90040</u></p> <p>Date or dates debt was incurred <u>5/24/18-6/11/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is: <u>1,764.96</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: <u>Invoices</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.8	<p>Nonpriority creditor's name and mailing address <u>Colima Produce</u> <u>1210 8th Street #B</u> <u>Los Angeles, CA 90021</u></p> <p>Date or dates debt was incurred <u>5/22/18-6/14/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is: <u>10,896.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Invoices</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.9	<p>Nonpriority creditor's name and mailing address <u>Conway RE Services (Venice Properties)</u> <u>1200 Wilshire Blvd #208</u> <u>Los Angeles, CA 90017</u></p> <p>Date or dates debt was incurred <u>6/1/18 - 7/1/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is: <u>23,384.02</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Lease, Security Dep.</u></p> <p>Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>
3.10	<p>Nonpriority creditor's name and mailing address <u>F &amp; A Produce Company</u> <u>PO Box 2125</u> <u>Basset, CA 90746</u></p> <p>Date or dates debt was incurred <u>2/28/18-6/14/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is: <u>21,142.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Invoices</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.11	<p>Nonpriority creditor's name and mailing address <u>Farmers Link Inc</u> <u>PO Box 86223</u> <u>Los Angeles, CA 90086</u></p> <p>Date or dates debt was incurred <u>3/1/18-5/18/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is: <u>10,236.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Invoices</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor \_\_\_\_\_  
Name \_\_\_\_\_

Case number (if known) \_\_\_\_\_

**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 NONPRIORITY creditors exist, do not fill out or submit this page.		Amount of claim
3.12	<p>Nonpriority creditor's name and mailing address <u>Fresh Packing Corp</u>  <u>4333 S Maywood Ave</u> <u>Vernon, CA 90058</u></p> <p>Date or dates debt was incurred <u>1/5/18 - 5/11/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 26,184.30</u> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  <input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: <u>A/R</u></p> <p>Is the claim subject to offset?  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes</p>
3.13	<p>Nonpriority creditor's name and mailing address <u>Fruit Distributing Corp of California</u>  <u>2124 S Atlantic Blvd</u> <u>Commerce, CA 90040</u></p> <p>Date or dates debt was incurred <u>3/31/18-6/14/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 14,484.00</u> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
3.14	<p>Nonpriority creditor's name and mailing address <u>Great American Packaging</u>  <u>4361 S Soto Street</u> <u>Vernon, CA 90058</u></p> <p>Date or dates debt was incurred <u>4/23/18-6/6/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 13,731.36</u> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Invoices</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
3.15	<p>Nonpriority creditor's name and mailing address <u>Guarantee Pest Control Inc</u>  <u>PO Box 27035</u> <u>Los Angeles, CA 90027</u></p> <p>Date or dates debt was incurred <u>7/31/17-6/30/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 3,624.00</u> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Invoices</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>
3.16	<p>Nonpriority creditor's name and mailing address <u>Gene Wheeler Farms Inc</u>  <u>PO Box 10029</u> <u>Lancaster, CA 93584</u></p> <p>Date or dates debt was incurred <u>11/14/17-12/1/17</u> Last 4 digits of account number <u>5 3 1</u></p>	<p>As of the petition filing date, the claim is: <u>\$ 25,340.00</u> <i>Check all that apply.</i>  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Invoices</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>

Debtor

Name

Case number (if known)

**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 NONPRIORITY creditors exist, do not fill out or submit this page.		Amount of claim
<p>3.11 Nonpriority creditor's name and mailing address  <u>Los Angeles DWP</u>  <u>PO Box 515407</u>  <u>Los Angeles, CA 90051-6707</u></p> <p>Date or dates debt was incurred <u>4/18-6/18</u>                      Last 4 digits of account number <u>4 0 9 2</u></p>	<p>As of the petition filing date, the claim is:                      Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  <input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim: <u>Service Invoices</u></p> <p>Is the claim subject to offset?  <input type="checkbox"/> No  <input checked="" type="checkbox"/> Yes</p>	<p>\$ <u>16,628.41</u></p>
<p>3.12 Nonpriority creditor's name and mailing address  <u>Lupe Produce</u>  <u>1210 E. 8th Street</u>  <u>Los Angeles, CA 90058</u></p> <p>Date or dates debt was incurred <u>4/7/17-7/28/17</u>                      Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is:                      Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Invoices</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>\$ <u>84,880.10</u></p>
<p>3.14 Nonpriority creditor's name and mailing address  <u>M&amp;M Distributors</u>  <u>1953 S Alameda Street</u>  <u>Los Angeles, CA 90058</u></p> <p>Date or dates debt was incurred <u>12/18/17-2/16/18</u>                      Last 4 digits of account number <u>S F R E</u></p>	<p>As of the petition filing date, the claim is:                      Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Invoices</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>\$ <u>7,311.98</u></p>
<p>3.10 Nonpriority creditor's name and mailing address  <u>Max Group Corporation</u>  <u>17011 Green Drive</u>  <u>City of Industry, CA 91745</u></p> <p>Date or dates debt was incurred <u>2/2/16</u>                      Last 4 digits of account number <u>C 2 1 9</u></p>	<p>As of the petition filing date, the claim is:                      Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Invoice</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>\$ <u>2,000.00</u></p>
<p>3.11 Nonpriority creditor's name and mailing address  <u>Melva Disposal &amp; Recycling</u>  <u>2108 E. 81st Street</u>  <u>Los Angeles, CA 90001</u></p> <p>Date or dates debt was incurred <u>6/20/18</u>                      Last 4 digits of account number <u>N/A</u></p>	<p>As of the petition filing date, the claim is:                      Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>Invoice</u></p> <p>Is the claim subject to offset?  <input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>\$ <u>660.00</u></p>



Debtor

Name

Case number (if known)

**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 NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.21	<p>Nonpriority creditor's name and mailing address Promarks Vac Corp 1915 E Acacia Street #A Ontario, CA 91761</p>	<p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed</p>	<p>\$ 844.67</p>
	<p>Date or dates debt was incurred <u>6/18/18</u> Last 4 digits of account number <u>I C F C</u></p>	<p>Basis for the claim: <u>Invoice</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.28	<p>Nonpriority creditor's name and mailing address SAJ Office Supplies 6311 Semillon Place Rancho Cucamonga, CA 91737</p>	<p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p>\$ 335.69</p>
	<p>Date or dates debt was incurred <u>5/11/18-6/8/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>Basis for the claim: <u>Invoice</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.29	<p>Nonpriority creditor's name and mailing address Sunset Ranch Roll Off Service 12625 Rush Street El Monte, CA 90733</p>	<p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p>\$ 15,600.00</p>
	<p>Date or dates debt was incurred <u>7/17-6/18</u> Last 4 digits of account number <u>S O O 6</u></p>	<p>Basis for the claim: <u>Invoices</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.32	<p>Nonpriority creditor's name and mailing address Superior Packaging Solutions Inc 26858 Almond Ave Redlands, CA 92374</p>	<p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p>\$ 11,399.60</p>
	<p>Date or dates debt was incurred <u>5/9/18-6/4/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>Basis for the claim: <u>Invoices</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.31	<p>Nonpriority creditor's name and mailing address TNT Produce 800 McGarry Street Los Angeles, CA 90021</p>	<p>As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p>\$ 2,624.50</p>
	<p>Date or dates debt was incurred <u>5/22/18-6/14/18</u> Last 4 digits of account number <u>N/A</u></p>	<p>Basis for the claim: <u>Invoices</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	

Debtor

Name

Case number (if known)

**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 NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.21	Nonpriority creditor's name and mailing address <u>Time Warner Cable</u> <u>P.O. Box 60074</u> <u>City of Industry, CA 91716</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed	\$ <u>1,234.04</u>
	Date or dates debt was incurred <u>5/26/18-7/26/18</u> Last 4 digits of account number <u>3 7 7 6</u>	Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.23	Nonpriority creditor's name and mailing address <u>The Hartford</u> <u>PO Box 660916</u> <u>Dallas, TX 95266-0916</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>99,130.75</u>
	Date or dates debt was incurred <u>2018</u> Last 4 digits of account number <u>6 5 4 9</u>	Basis for the claim: <u>Invoice</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.24	Nonpriority creditor's name and mailing address <u>Torres Produce</u> <u>11045 Schmidt Road</u> <u>El Monte, CA 91733</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>5,465.00</u>
	Date or dates debt was incurred <u>9/20/15</u> Last 4 digits of account number <u>N/A</u>	Basis for the claim: <u>Invoice</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.25	Nonpriority creditor's name and mailing address <u>Mercury Insurance</u> <u>P.O. Box 5600</u> <u>Rancho Cucamonga, CA 91729</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>132.72</u>
	Date or dates debt was incurred <u>6/2018</u> Last 4 digits of account number <u>5 9 4 6</u>	Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.31	Nonpriority creditor's name and mailing address <u>Travelers</u> <u>P.O. 660317</u> <u>Dallas, Texas 75266-0317</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>6,234.06</u>
	Date or dates debt was incurred <u>3/15/18-6/30/18</u> Last 4 digits of account number <u>2 1 9 5</u>	Basis for the claim: <u>Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor \_\_\_\_\_ Name \_\_\_\_\_ Case number (if known) \_\_\_\_\_

**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 NONPRIORITY creditors exist, do not fill out or submit this page. Amount of claim

<b>337</b>	Nonpriority creditor's name and mailing address <u>Valley Fruit &amp; Produce</u>  Dept LA24461 Pasadena, CA 91185-4461	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 <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: <u>Invoices; A/R</u>	\$ <u>622,999.81</u>
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
<b>338</b>	Nonpriority creditor's name and mailing address <u>Wells Fargo Vendor Finance Service</u>  PO Box 3072 Cedar Rapids, IA 52406-3072	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Lease</u>	\$ <u>776.29</u>
	Date or dates debt was incurred <u>6/17/18-7/17/18</u> Last 4 digits of account number <u>8 0 9 8</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>339</b>	Nonpriority creditor's name and mailing address <u>Westrock C.P. LLC</u>  185 N. Smith Street Corona, CA 92880-1738	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Invoice</u>	\$ <u>21,633.97</u>
	Date or dates debt was incurred <u>4/12/18-6/12/18</u> Last 4 digits of account number <u>7 0 2 1</u>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
<b>340</b>	Nonpriority creditor's name and mailing address <u>Worldwide Produce</u>  P.O. Box 54399 Los Angeles, CA 90054	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Invoices; A/R</u>	\$ <u>21,310.03</u>
	Date or dates debt was incurred <u>5/29/18-6/15/18</u> Last 4 digits of account number <u>S F R E</u>	Is the claim subject to offset? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
<b>341</b>	Nonpriority creditor's name and mailing address <u>Richard Wise</u>  2031 Bay Street Los Angeles, CA 90021	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____	\$ <u>137,000.00</u>
	Date or dates debt was incurred _____ Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor

Custom Fresh Cuts, Inc.  
Name

Case number (if known) 2:18-bk-18625

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

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

		Total of claim amounts
5a. Total claims from Part 1	5a.	\$ <u>0.00</u>
5b. Total claims from Part 2	5b. +	\$ <u>1,256,163.14</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	\$ <u>1,256,163.14</u>