

Fill in this information to identify the case:

Debtor Name Alaska Dispatch News, LLC

United States Bankruptcy Court for the: DISTRICT OF ALASKA

Case number (if known): A17-00285 GS

Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

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

1a. Real property: Copy line 88 from Schedule A/B.....	\$0.00
1b. Total personal property: Copy line 91A from Schedule A/B.....	\$11,844,040.18
1c. Total of all property Copy line 92 from Schedule A/B.....	\$11,844,040.18

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..... \$10,910,199.01

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F.....	\$0.00
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....	+ \$15,110,972.24

4. Total liabilities

Lines 2 + 3a + 3b..... \$26,021,171.25

Fill in this information to identify the case

Debtor name Alaska Dispatch News, LLC

United States Bankruptcy Court for the: DISTRICT OF ALASKA

Case number (if known) A17-00285 GS

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

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	Current value of debtor's interest
3.1. Wells Fargo Bank Credit Card ADN Account	Credit Card	0 9 6 6	\$2,605.00
3.2. Wells Fargo Bank CAPPS - postage clearing ADN Account	CAPPS - postage clearing	9 5 7 6	\$0.00
3.3. Wells Fargo Bank Checking account ADN Account	Checking account	0 6 5 0	\$0.00
3.4. Wells Fargo Bank Payroll AK Publishing Account (Non-debtor)	Payroll	0 9 3 4	\$0.00
3.5. Wells Fargo Bank Accounts Payable AK Publishing Account (Non-debtor)	Accounts Payable	5 1 5 0	\$0.00
3.6. Wells Fargo Bank General AK Publishing Account (Non-debtor)	General	5 1 4 3	\$16,474.00

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3.7.	Northrim Bank Business checking AK Publishing Account (Non-debtor)	Business checking	<u>5</u> <u>9</u> <u>0</u> <u>8</u>	<u>\$57,065.00</u>
3.8.	Northrim Bank Credit Card AK Publishing Account (Non-debtor)	Credit Card	<u>5</u> <u>0</u> <u>7</u> <u>2</u>	<u>\$0.00</u>
3.9.	Wells Fargo Bank Depository Account ADN	Depository	<u>2</u> <u>0</u> <u>0</u> <u>4</u>	<u>\$21,203.00</u>
4.	Other cash equivalents (Identify all) Name of institution (bank or brokerage firm)			
5.	Total of Part 1 Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.			<u>\$97,347.00</u>

Part 2: Deposits and prepayments

6.	Does the debtor have any deposits or prepayments? <input type="checkbox"/> No. Go to Part 3. <input checked="" type="checkbox"/> Yes. Fill in the information below.			
7.	Deposits, including security deposits and utility deposits Description, including name of holder of deposit			Current value of debtor's interest
7.1.	Item 05501 on YE 2016 Balance Sheet Chugach Electric security deposit			<u>\$1,500.00</u>
8.	Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent Description, including name of holder of prepayment			
9.	Total of Part 2. Add lines 7 through 8. Copy the total to line 81.			<u>\$1,500.00</u>

Part 3: Accounts receivable

10.	Does the debtor have any accounts receivable? <input type="checkbox"/> No. Go to Part 4. <input checked="" type="checkbox"/> Yes. Fill in the information below.			
11.	Accounts receivable			Current value of debtor's interest
11a.	90 days old or less: <u>\$838,454.46</u> face amount	—	<u>\$0.00</u> doubtful or uncollectible accounts	<u>\$838,454.46</u>
11b.	Over 90 days old: <u>\$144,991.73</u> face amount	—	<u>\$0.00</u> doubtful or uncollectible accounts	<u>\$144,991.73</u>
12.	Total of Part 3 Current value on lines 11a + 11b = line 12. Copy the total to line 82.			<u>\$983,446.19</u>

Part 4: Investments

13. **Does the debtor own any investments?**

 No. Go to Part 5.
 Yes. Fill in the information below.

Debtor Alaska Dispatch News, LLC
Name

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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:

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:

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

Describe:

17. Total of Part 4

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

\$0.00

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 MM/DD/YYYY	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				
<u>Construction in Progress</u>		<u>\$4,543,126.00</u>		<u>\$4,543,126.00</u>
21. Finished goods, including goods held for resale				
22. Other inventory or supplies				
<u>Newsprint Inventory</u>		<u>\$668,735.00</u>		<u>\$668,735.00</u>
<u>Other Inventory</u>				
<u>7/30/17 Balance Sheet</u>		<u>\$276,417.00</u>		<u>\$276,417.00</u>
<u>Total Buildings (book value before depreciation)</u>		<u>\$510,055.00</u>		<u>\$510,055.00</u>
<u>Total Newspaper Equipment (book value before depreciation)</u>		<u>\$2,500,147.00</u>		<u>\$2,500,174.00</u>
<u>Other Equipment</u>				
<u>7/30/17 Balance Sheet (before depreciation)</u>		<u>\$2,214,621.00</u>		<u>\$2,214,621.00</u>

23. Total of Part 5

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

\$10,713,128.00

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

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

27. Does the debtor own or lease any farming or 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 <i>Examples:</i> 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			
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 Office furniture is included in item 22. Other Inventory and supplies.			\$0.00
40. Office fixtures Office fixtures is included in item 22. Other Inventory and supplies.			\$0.00
41. Office equipment, including all computer equipment and communication systems equipment and software Office furniture is included in item 22. Other Inventory and supplies.			\$0.00

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

43. **Total of Part 7.**
 Add lines 39 through 42. Copy the total to line 86.

\$0.00

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

- No
 Yes

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

- No
 Yes

Part 8: Machinery, equipment, and vehicles

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

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

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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47. **Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles**

47.1. Car - Bethel - \$9,294.33			
Van - 2016 Chev EXP - \$20,700.00			
Van - 2006 GMC SAV - \$9,300.00	\$39,294.33		\$39,294.33

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

49. **Aircraft and accessories**

49.1. Drone	\$9,324.66		\$9,324.66
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50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

51. **Total of Part 8.**
 Add lines 47 through 50. Copy the total to line 87.

\$48,618.99

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

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.

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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
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55.1. 3150 C Street Anchorage, AK 3150 C Street - Lease Lessor: 3150 C Real Property Lease	Leasehold			\$0.00
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55.2. 1001 Northway Drive Anchorage, AK 1001 Northway Drive - Real Property Lease Lessor: GCI NADC LLC is Lessor c/o General Communication, Inc. 2550 Denali Street, Ste 1000 Anchorage, AK 99503	Leasehold			\$0.00
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55.3. 5900 Arctic Boulevard Anchorage, AK 5900 Arctic Boulevard - Real property lease Lessor: Arctic Partners, LLC PMB 48 6716 Eastside Drive NE, STE 1 Tacoma, WA 98422	Leasehold			\$0.00
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56. Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.	\$0.00
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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
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60. Patents, copyrights, trademarks, and trade secrets

61. Internet domain names and websites

Debtor Alaska Dispatch News, LLC Case number (if known) A17-00285 GS
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DOMAINS: 103 Domains with various 2017 and 2018 expiration dates. See attached.

WEBSITES:

adn.com
 pub.alaskadispatch.com (not as much of a website but utility site for different functions/scripting for adn.com)
 arcticnow.com
 showmealaska.net
 akcarfinder.com
 northernlove.net

Unknown

\$0.00

62. Licenses, franchises, and royalties

63. Customer lists, mailing lists, or other compilations

Customer, mailing, billing lists and information

Unknown

\$0.00

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

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

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- No
- Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- No
- Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- No
- Yes

Part 11: All other assets

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

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

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

Current value of debtor's interest

71. Notes receivable

Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit has been filed)

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- 75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims
- 76. Trusts, equitable or future interests in property
- 77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

**Alyeska Resort Management Co.
 2017 Weather Sponsorship
 Promotional Partnership Agreement**

Unknown

78. Total of Part 11.
 Add lines 71 through 77. Copy the total to line 90.

\$0.00

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

- No
- Yes

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>\$97,347.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$1,500.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$983,446.19</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$10,713,128.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$48,618.99</u>	
88. Real property. <i>Copy line 56, Part 9.</i> →		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>\$0.00</u>	
	+	
91. Total. Add lines 80 through 90 for each column. 91a.	<u>\$11,844,040.18</u>	+
		<u>\$0.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....		<u>\$11,844,040.18</u>

Fill in this information to identify the case:

Debtor name Alaska Dispatch News, LLC

United States Bankruptcy Court for the: DISTRICT OF ALASKA

Case number (if known) A17-00285 GS

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

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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	Describe debtor's property that is subject to a lien	Amount of claim	Value of collateral that supports this claim
	<u>J. Birket, Inc.</u>	<u>Columbs IN 850/Urbanite Printing Press</u>	<u>\$161,044.27</u>	<u>\$0.00</u>
	<u>Creditor's mailing address</u> <u>211 McCown Dr</u>	<u>Describe the lien</u> <u>Agreement</u>		
	<u>Lebanon TN 37087</u>	<u>Is the creditor an insider or related party?</u> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	<u>Creditor's email address, if known</u>	<u>Is anyone else liable on this claim?</u> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	<u>Date debt was incurred</u>	<u>As of the petition filing date, the claim is:</u> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	<u>Last 4 digits of account number</u>			
	<u>Do multiple creditors have an interest in the same property?</u> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.			

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

\$10,910,199.01

Debtor Alaska Dispatch News, LLC

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Part 1: Additional Page

Column A 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.

2.2 Creditor's name M&M Wiring Service, Inc. Describe debtor's property that is subject to a lien \$508,809.00 \$0.00

Creditor's mailing address 11315 Totem Rd See 2017-016885

Describe the lien Agreement

Is the creditor an insider or related party?
 No
 Yes

Anchorage AK 99516

Creditor's email address, if known _____

Date debt was incurred _____ Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number _____

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

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 _____

2.3 Creditor's name Municipality of Anchorage Describe debtor's property that is subject to a lien \$56,516.29 \$0.00

Creditor's mailing address Tax Division Personal Property Tax

Describe the lien Taxes

Is the creditor an insider or related party?
 No
 Yes

Anchorage AK 99501

Creditor's email address, if known _____

Date debt was incurred _____ Is anyone else liable on this claim?
 No
 Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number _____

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

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 _____

See DE 35

Debtor Alaska Dispatch News, LLC

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Part 1: Additional Page

Column A
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>2.4</p>	<p>Creditor's name <u>North Coast Electric Company</u></p> <p>Creditor's mailing address <u>Nancy K. Cary</u> <u>Hershner Hunter LLP</u> <u>PO Box 1475</u> <u>Eugene</u> <u>OR</u> <u>97440</u></p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred _____</p> <p>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 <u>5900 Arctic Blvd</u></p> <p>Describe the lien <u>Agreement</u></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 filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>	<p><u>\$18,829.45</u></p>	<p><u>\$0.00</u></p>
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<p>2.5</p>	<p>Creditor's name <u>Northrim Bank</u></p> <p>Creditor's mailing address <u>Midtown Financial Ctr</u> <u>3111 C Street</u> <u>PO Box 241489</u> <u>Anchorage</u> <u>AK</u> <u>99524-1489</u></p> <p>Creditor's email address, if known _____</p> <p>Date debt was incurred _____</p> <p>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 <u>personal guaranty</u></p> <p>Describe the lien <u>Agreement</u></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 type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)</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><u>\$10,165,000.00</u></p>	<p><u>\$0.00</u></p>
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Fill in this information to identify the case:

Debtor Alaska Dispatch News, LLC

United States Bankruptcy Court for the: DISTRICT OF ALASKA

Case number (if known) A17-00285 GS

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 part. If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
<div style="background-color: black; color: white; padding: 2px; margin-bottom: 5px;">2.1</div> Priority creditor's name and mailing address _____ _____ _____ _____ _____ _____ Date or dates debt was incurred _____ Last 4 digits of account number ____ _ ____ _ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(____)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	_____ _____

Debtor Alaska Dispatch News, LLC

Case number (if known) A17-00285 GS

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for 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	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$300.00</u>
	<u>360VINspin LLC</u>	<input type="checkbox"/> Contingent	
	<u>1515 W. Diane Suite B</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Ozark MO 65721</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.2	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$4,040.00</u>
	<u>Adpay/Memoriams</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 560101</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Denver CO 80256-0101</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.3	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$16,050.00</u>
	<u>AdPerfect Dynamic Advertising Inc.</u>	<input type="checkbox"/> Contingent	
	<u>601 Sixth Street Suite 410</u>	<input type="checkbox"/> Unliquidated	
	<u>New Westminister BC V3L 3C1</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.4	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$8,450.00</u>
	<u>Advanced Vision Technology Inc.</u>	<input type="checkbox"/> Contingent	
	<u>5910 Shiloh Rd. East Suite 123</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Alpharetta GA 30005</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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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

3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$9,294.17</u>
	<u>Air Land Transport Inc.</u>	<input type="checkbox"/> Contingent	
	<u>11100 Calaska Ct</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99515</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$6,455.98</u>
	<u>Alaska Airlines</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 749877</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Los Angeles CA 90074-4784</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$3,180.00</u>
	<u>Alaska On Point Service</u>	<input type="checkbox"/> Contingent	
	<u>8211 East 6th Avenue</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99504</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$3,324.20</u>
	<u>Alaska Waste</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 196097</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99519-6097</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.9	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$4,521.25</u>
	<u>Alliance for Audited Media</u>	<input type="checkbox"/> Contingent	
	<u>Dept 20-8025</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Carol Stream IL 60197-5998</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.10	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$160.00</u>
	<u>Allison Harvey</u>	<input type="checkbox"/> Contingent	
	<u>18178 E Walling Rd.</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Palmer AK 99645</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.11	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$889.69</u>
	<u>American Fast Freight</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 101833</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Pasadena CA 91189-1833</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.12	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$9,395.00</u>
	<u>Anchorage Convention Centers</u>	<input type="checkbox"/> Contingent	
	<u>550 West 5th Avenue</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Anchorage AK 99501</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.13	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$45,959.19</u>
	<u>Anchorage Printing Inc.</u>	<input type="checkbox"/> Contingent	
	<u>3110 Spenard Rd.</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Anchorage</u> <u>AK</u> <u>99503-3699</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.14	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,361.86</u>
	<u>Arctic Office Mach & Furn Co.</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 100083</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Anchorage</u> <u>AK</u> <u>99510</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.15	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$143,871.40</u>
	<u>Arctic Partners LLC</u>	<input type="checkbox"/> Contingent	
	<u>6716 Eastside Dr NE Ste 1-48</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Tacoma</u> <u>WA</u> <u>98422</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.16	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$6,201.88</u>
	<u>Arrow Marketing Group</u>	<input type="checkbox"/> Contingent	
	<u>1149 Executive Circle</u>	<input type="checkbox"/> Unliquidated	
	<u>STE A</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Cary</u> <u>NC</u> <u>27511</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.17	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$200.00</u>
	<u>Ashley Adams</u>	<input type="checkbox"/> Contingent	
	<u>540 L Street, STE 502</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99501</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.18	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,172.50</u>
	<u>Bangerter Creative</u>	<input type="checkbox"/> Contingent	
	<u>12110 Business Blvd</u>	<input type="checkbox"/> Unliquidated	
	<u>STE 6 PMG 406</u>	<input type="checkbox"/> Disputed	
	<u>Eagle River AK 99577</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.19	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$26,733.68</u>
	<u>Berkshire Hathaway Homestate Co.</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 844501</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Los Angeles CA 90084-4501</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.20	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,000.00</u>
	<u>Bethany Goodrich</u>	<input type="checkbox"/> Contingent	
	<u>500 Lincoln Street Unit B7</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Sitka AK 99835</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.21	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$30,086.81</u>
	<u>Birch Horton Bittner & Cherot</u>	<input type="checkbox"/> Contingent	
	<u>510 L Street Suite 700</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99501-1959</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.22	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$150.00</u>
	<u>Bjorn D. Olson</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 237</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Homer AK 99603</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.23	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$3,900.00</u>
	<u>Boostability Corp.</u>	<input type="checkbox"/> Contingent	
	<u>2600 W Executive Pkwy Ste 200</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Lehi UT 84043</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.24	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$118.96</u>
	<u>Boot Country</u>	<input type="checkbox"/> Contingent	
	<u>7901 Old Seward Highway</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99518</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.25	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$179.13
	<u>Carlile Transportation Systems Inc.</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 84048</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Seattle WA 98124-8448</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.26	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$51,307.56
	<u>Catalyst Paper Corp</u>	<input type="checkbox"/> Contingent	
	<u>75 Remittance Dr</u>	<input type="checkbox"/> Unliquidated	
	<u>STE 6022</u>	<input type="checkbox"/> Disputed	
	<u>Chicago IL 60674</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.27	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,305.40
	<u>CDW LLC</u>	<input type="checkbox"/> Contingent	
	<u>300 N Milwaukee Ave</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Vernon Hills IL 60061</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.28	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$52,736.51
	<u>Centro Inc.</u>	<input type="checkbox"/> Contingent	
	<u>Dept CH 10762</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Palintine IL 60055-0762</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.29	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$29.70</u>
	<u>CENVEO</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 31001-1187</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Pasadena CA 91110-1187</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.30	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$90.00</u>
	<u>Charles Wohlforth</u>	<input type="checkbox"/> Contingent	
	<u>3201 Shuttle Circle</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99517</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.31	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,666.66</u>
	<u>Chartbeat Inc.</u>	<input type="checkbox"/> Contingent	
	<u>826 Broadway 6 Fl</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>New York NY 19993</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.32	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$3,658.00</u>
	<u>ChicoCallCenter</u>	<input type="checkbox"/> Contingent	
	<u>Impact Marketing</u>	<input type="checkbox"/> Unliquidated	
	<u>PO Box 8684</u>	<input type="checkbox"/> Disputed	
	<u>Chico CA 95927-8684</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.33	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$300.00</u>
	<u>Christine Cunningham</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 2652</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Kenai</u> <u>AK</u> <u>99611</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.34	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$2,400.79</u>
	<u>Chugach Electric</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 196300</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage</u> <u>AK</u> <u>99519</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.35	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$100.00</u>
	<u>Cinthia Ritchie</u>	<input type="checkbox"/> Contingent	
	<u>3602 Arkansas Dr.</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage</u> <u>AK</u> <u>99517</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.36	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$4,793.75</u>
	<u>Circulation Technicians</u>	<input type="checkbox"/> Contingent	
	<u>459 N Gilbery Rd</u>	<input type="checkbox"/> Unliquidated	
	<u>STE 8100</u>	<input type="checkbox"/> Disputed	
	<u>Gilbert</u> <u>AZ</u> <u>85234</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.37	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,500.00</u>
	<u>Civil Co.</u>	<input type="checkbox"/> Contingent	
	<u>3115 NE Sandy Blvd. #224</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Portland</u> <u>OR</u> <u>97232</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.38	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$550.00</u>
	<u>Clark Bryan Fair</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 2773</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Homer</u> <u>AK</u> <u>99603</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.39	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,809.50</u>
	<u>Continental Bag Professional Image</u>	<input type="checkbox"/> Contingent	
	<u>1900 West Boulevard Street</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Mexico</u> <u>MO</u> <u>65265-1016</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.40	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$400.00</u>
	<u>Continuous Printing of AK</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 100760</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage</u> <u>AK</u> <u>99510</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.41 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$58.30
Check all that apply.

Cornerstone Credit Services Contingent
PO Box 92090 Unliquidated
 Disputed

Anchorage AK 99509 **Basis for the claim:**
Services/Supplies

Date or dates debt was incurred _____ **Is the claim subject to offset?**
 No
 Yes

Last 4 digits of account number _____

3.42 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$12,250.00
Check all that apply.

Coul Productions LLC Contingent
4482 Casino Dr. Unliquidated
 Disputed

Yorba Linda CA 92886 **Basis for the claim:**
Services/Supplies

Date or dates debt was incurred _____ **Is the claim subject to offset?**
 No
 Yes

Last 4 digits of account number _____

3.43 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$128.80
Check all that apply.

Creators Syndicate Inc. Contingent
737 3rd Street Unliquidated
 Disputed

Hermosa Beach CA 90254 **Basis for the claim:**
Services/Supplies

Date or dates debt was incurred _____ **Is the claim subject to offset?**
 No
 Yes

Last 4 digits of account number _____

3.44 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$43,776.65
Check all that apply.

D. John McKay Contingent
117 E. Cook Ave. Unliquidated
 Disputed

Anchorage AK 99501 **Basis for the claim:**
Services/Supplies

Date or dates debt was incurred _____ **Is the claim subject to offset?**
 No
 Yes

Last 4 digits of account number _____

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Amount of claim

3.45	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$200.00</u>
	<u>David Allan James</u>	<input type="checkbox"/> Contingent	
	<u>3047 Ester Dome Road</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Fairbanks AK 99709</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.46	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$105.00</u>
	<u>Dermot Cole</u>	<input type="checkbox"/> Contingent	
	<u>827 Gold Mine Trail</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Fairbanks AK 99712</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.47	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$162.50</u>
	<u>Dexter Jackson</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 200106</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99520</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.48	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$3,967.69</u>
	<u>Digital Direct Inc.</u>	<input type="checkbox"/> Contingent	
	<u>P.O. Box 111</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Marysville CA 95901-0111</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.49	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$650.00</u>
	<u>Done Rite Cleaning</u>	<input type="checkbox"/> Contingent	
	<u>6440 Whispering Loop #B</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99504</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.50	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$10,277.76</u>
	<u>Dow Jones & Co Inc</u>	<input type="checkbox"/> Contingent	
	<u>Wall St Jrnl or Barrons</u>	<input type="checkbox"/> Unliquidated	
	<u>PO Box 4137</u>	<input type="checkbox"/> Disputed	
	<u>New York NY 10261-4137</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.51	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$53.17</u>
	<u>Doyle E. Woody</u>	<input type="checkbox"/> Contingent	
	<u>1650 Eastridge Drive</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99501</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.52	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$58,817.34</u>
	<u>Eagle Web Press</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 12008</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Salem OR 97309</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.53	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$3,116.36</u>
	<u>Edgil</u>	<input type="checkbox"/> Contingent	
	<u>222 Rosewood Dr.</u>	<input type="checkbox"/> Unliquidated	
	<u>STE 210</u>	<input type="checkbox"/> Disputed	
	<u>Danvers</u> <u>MA</u> <u>01923</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.54	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$96.25</u>
	<u>Ediwise</u>	<input type="checkbox"/> Contingent	
	<u>2227 South Millway Suite 200</u>	<input type="checkbox"/> Unliquidated	
	<u>Mississauga ON L5L 3R6</u>	<input type="checkbox"/> Disputed	
	<u>Date or dates debt was incurred</u> _____	Basis for the claim: <u>Services/Supplies</u>	
	<u>Last 4 digits of account number</u> _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.55	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$179.12</u>
	<u>Emily Rohrbaugh</u>	<input type="checkbox"/> Contingent	
	<u>2612 Lord Baranof Dr</u>	<input type="checkbox"/> Unliquidated	
	<u>Anchorage</u> <u>AK</u> <u>95517</u>	<input type="checkbox"/> Disputed	
	<u>Date or dates debt was incurred</u> _____	Basis for the claim: <u>Services/Supplies</u>	
	<u>Last 4 digits of account number</u> _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.56	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,450.00</u>
	<u>Enjoy the City North Inc.</u>	<input type="checkbox"/> Contingent	
	<u>31 Front St</u>	<input type="checkbox"/> Unliquidated	
	<u>Binghamton</u> <u>NY</u> <u>13095</u>	<input type="checkbox"/> Disputed	
	<u>Date or dates debt was incurred</u> _____	Basis for the claim: <u>Services/Supplies</u>	
	<u>Last 4 digits of account number</u> _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.57	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$354.00</u>
	<u>Equifax Credit</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 105835</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Atlanta GA 30348-5835</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.58	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$55.13</u>
	<u>Eric E. Sain</u>	<input type="checkbox"/> Contingent	
	<u>9439 Agattu Circle</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Eagle River AK 99577</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.59	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$89.97</u>
	<u>Erica Rogers</u>	<input type="checkbox"/> Contingent	
	<u>4511 Folker St #21A</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Anchorage AK 99508</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.60	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$33.02</u>
	<u>Erik Hill</u>	<input type="checkbox"/> Contingent	
	<u>3433 Seppala Drive</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Anchorage AK 99517</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.61 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$68.95
Check all that apply.

Erin Austin Contingent
2200 Nash Circle Unliquidated
 Disputed

Basis for the claim:
Services/Supplies

Anchorage AK 99508

Date or dates debt was incurred _____
 Last 4 digits of account number

Is the claim subject to offset?
 No
 Yes

3.62 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$250.00
Check all that apply.

Erin K. Kirkland Contingent
3220 Evergreen Street Unliquidated
 Disputed

Basis for the claim:
Services/Supplies

Anchorage AK 99504

Date or dates debt was incurred _____
 Last 4 digits of account number

Is the claim subject to offset?
 No
 Yes

3.63 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$900.00
Check all that apply.

Erin McKittrick Contingent
PO Box 164 Unliquidated
 Disputed

Basis for the claim:
Services/Supplies

Seldovia AK 99663

Date or dates debt was incurred _____
 Last 4 digits of account number

Is the claim subject to offset?
 No
 Yes

3.64 Nonpriority creditor's name and mailing address **As of the petition filing date, the claim is:** \$96.37
Check all that apply.

Evelyn Elliot-Perez Contingent
904 E 12th Ave Apt 4 Unliquidated
 Disputed

Basis for the claim:
Services/Supplies

Anchorage AK 99501

Date or dates debt was incurred _____
 Last 4 digits of account number

Is the claim subject to offset?
 No
 Yes

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Amount of claim

3.65	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,075.00</u>
	<u>Events Air Cargo</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 61680</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Fairbanks AK 99706</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.66	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$60.50</u>
	<u>Express Delivery Service Inc.</u>	<input type="checkbox"/> Contingent	
	<u>701 W 41st Ave Unit D</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99503-6604</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.67	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$443.96</u>
	<u>Federal Express Corporation</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 94515</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Palatine IL 60094-4515</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.68	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$700.00</u>
	<u>Firefly Marketing Communications</u>	<input type="checkbox"/> Contingent	
	<u>4803 NW 57th Court</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Kansas City MO 64184-3771</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.69	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$463.39</u>
	<u>Fleet One</u>	<input type="checkbox"/> Contingent	
	<u>MSC 30425</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Nashville TN 37241-5000</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.70	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$6,818.76</u>
	<u>Flint Group</u>	<input type="checkbox"/> Contingent	
	<u>1455 Paysphere Circle</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Chicago IL 60674</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.71	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$68,901.31</u>
	<u>Frontline Construction LLC</u>	<input type="checkbox"/> Contingent	
	<u>8608 Emerald St</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99502</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.72	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$327.82</u>
	<u>Gary Curtis Kanakis</u>	<input type="checkbox"/> Contingent	
	<u>824 Brooks Avenue</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Soldotna AK 99669</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.73	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$36,694.00</u>
	<u>GCI</u>	<input type="checkbox"/> Contingent	
	<u>2550 Denali Street Ste 1000</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99503</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.74	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$304,393.91</u>
	<u>GCI Communications Corp</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 99001</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99509-9901</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.75	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$200.00</u>
	<u>Geoffrey Z. Kirsch</u>	<input type="checkbox"/> Contingent	
	<u>3009 Goodwin Rd</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Juneau AK 99807</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.76	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,325.01</u>
	<u>Getty Images (US) Inc.</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 953604</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>St. Louis MO 63195-3604</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.77	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$77.00
	<u>Green Connection</u>	<input type="checkbox"/> Contingent	
	<u>804 East 15th Avenue</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99501</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.78	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$300.00
	<u>Heather V. Lende</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 936</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Haines AK 99827</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.79	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$1,413.64
	<u>Innovative Systems Design</u>	<input type="checkbox"/> Contingent	
	<u>222 Bruswick Blvd</u>	<input type="checkbox"/> Unliquidated	
	<u>Ponte Claire, QC H9R 1A6</u>	<input type="checkbox"/> Disputed	
	<u>Canada</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.80	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$95.12
	<u>Jason Thane Curry</u>	<input type="checkbox"/> Contingent	
	<u>1510 Richardson Drive</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99504</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.81	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$203.82</u>
	<u>Jerod C. Gunther</u>	<input type="checkbox"/> Contingent	
	<u>1003 Hoyt Street</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99508</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.82	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$33,300.00</u>
	<u>John Hancock Life Insurance</u>	<input type="checkbox"/> Contingent	
	<u>Company (USA)</u>	<input type="checkbox"/> Unliquidated	
	<u>PO Box 894764</u>	<input type="checkbox"/> Disputed	
	<u>Los Angeles CA 90189-4764</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.83	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$50.00</u>
	<u>John Schandelmeier</u>	<input type="checkbox"/> Contingent	
	<u>HC 02 Box 7193</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Gakona AK 99586</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.84	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$250.00</u>
	<u>Joseph Robertia</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 1244</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Kasilof AK 99610</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.85	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$36,480.36</u>
	<u>Journal Graphics Inc.</u>	<input type="checkbox"/> Contingent	
	<u>2840 NW 35th</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Portland</u> <u>OR</u> <u>97210</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.86	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$162.50</u>
	<u>Kayla Anderson</u>	<input type="checkbox"/> Contingent	
	<u>6841 Weimer Rd #4</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage</u> <u>AK</u> <u>99502</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.87	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,160.68</u>
	<u>Kelsey Lindsey</u>	<input type="checkbox"/> Contingent	
	<u>300 W. 31st Ave</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage</u> <u>AK</u> <u>99503</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.88	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$22.12</u>
	<u>Kenneth Thistle</u>	<input type="checkbox"/> Contingent	
	<u>4177 Wilson St #1</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage</u> <u>AK</u> <u>99503</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.89	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$26.80</u>
	<u>Kids Across Parents Down LLC</u>	<input type="checkbox"/> Contingent	
	<u>4620 Ashford Drive</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Matteson</u> <u>IL</u> <u>60443</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.90	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$4,085.46</u>
	<u>King Features Syndicate</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 90007</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Prescott</u> <u>AZ</u> <u>86304-9007</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.91	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$370.04</u>
	<u>Legacy.com Inc.</u>	<input type="checkbox"/> Contingent	
	<u>820 Davis Street Ste 210</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Evanston</u> <u>IL</u> <u>60201</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.92	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$150.00</u>
	<u>Legal Notice Org</u>	<input type="checkbox"/> Contingent	
	<u>9901 Belward Campus Dr. Suite 175</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Rockville</u> <u>MD</u> <u>20850</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.93	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$322.50</u>
	<u>Lewis & Lewis Computer Store</u>	<input type="checkbox"/> Contingent	
	<u>405 E Fireweed St</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99503</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.94	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$682.00</u>
	<u>LexisNexis</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 894166</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Los Angeles CA 90189-4166</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.95	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$10,227.75</u>
	<u>Liberty Mutual Insurance Company</u>	<input type="checkbox"/> Contingent	
	<u>175 Berkeley Street</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Boston MA 02116</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.96	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$6,978.07</u>
	<u>Lincoln National Life Insurance Co.</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 0821</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Carol Stream IL 60132-0821</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.97	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$550.19</u>
	<u>Lisa K. Demer</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 2462</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Bethel AK 99559</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.98	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$500.00</u>
	<u>LiveIntent Inc.</u>	<input type="checkbox"/> Contingent	
	<u>100 Church St. 7th Floor</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>New York NY 10007</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.99	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$491,219.55</u>
	<u>M&M Wiring Service Inc</u>	<input type="checkbox"/> Contingent	
	<u>11315 Totem Rd</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99516</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.100	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,280.76</u>
	<u>MailFinance</u>	<input type="checkbox"/> Contingent	
	<u>Dept. 3682</u>	<input type="checkbox"/> Unliquidated	
	<u>PO Box 123682</u>	<input type="checkbox"/> Disputed	
	<u>Dallas TX 75312-3682</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.101	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$300.00</u>
	<u>Mary I. Young</u>	<input type="checkbox"/> Contingent	
	<u>8297 S Royal Lane</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Wasilla AK 99623-4964</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.102	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$3,000.00</u>
	<u>Mather Economics LLC</u>	<input type="checkbox"/> Contingent	
	<u>1215 Hightower Trail Bldg A-100</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Atlanta GA 30350</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.103	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$90.00</u>
	<u>Meghan Mackey</u>	<input type="checkbox"/> Contingent	
	<u>11720 Business Blvd</u>	<input type="checkbox"/> Unliquidated	
	<u>STE 101</u>	<input type="checkbox"/> Disputed	
	<u>Eagle River AK 99577</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.104	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$3,208.50</u>
	<u>Meyer Plastic LLC</u>	<input type="checkbox"/> Contingent	
	<u>1111 N 20th Avenue</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Yakima WA 98902</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.105	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$300.00</u>
	<u>Michael Engelhard</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 80882</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Fairbanks AK 99708</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.106	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$34.08</u>
	<u>Michele L. Bennett</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 671996</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Chugiak AK 99567-1996</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.107	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$5,474.60</u>
	<u>Millwood Transit</u>	<input type="checkbox"/> Contingent	
	<u>7810 E 32nd Ave.</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Anchorage AK 99504-4013</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.108	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$600.00</u>
	<u>Miscellaneous Advertising Refunds</u>	<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.109	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$825.61</u>
	<u>Miscellaneous Subscriber Refund</u>	<input type="checkbox"/> Contingent	
	_____	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	_____	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.110	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$10,938.96</u>
	<u>Monster Worldwide Inc.</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 740889</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	<u>Los Angeles CA 90074-0889</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.111	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$56,516.30</u>
	<u>Municipality of Anchorage</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 196040</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	<u>Anchorage AK 99519-6050</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.112	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$80.60</u>
	<u>NACM Business Credit Services</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 21966</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	<u>Seattle WA 98111-3966</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.113	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Nancy J. Lord</u>	<input type="checkbox"/> Contingent	<u>\$100.00</u>
	<u>PO Box 558</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Homer AK 99603</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.114	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>NELA USA</u>	<input type="checkbox"/> Contingent	<u>\$13,769.00</u>
	<u>610 Whitetail Blvd.</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>River Falls WI 54015</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.115	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>New Neighbor Marketing</u>	<input type="checkbox"/> Contingent	<u>\$141.20</u>
	<u>1885 Lexington Ave #6E</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>New York NY 10035-4784</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.116	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>New York State Ins Fund</u>	<input type="checkbox"/> Contingent	<u>\$60.00</u>
	<u>NYSIF Disability Benefits</u>	<input type="checkbox"/> Unliquidated	
	<u>15 Computer Drive West</u>	<input type="checkbox"/> Disputed	
	<u>Albany NY 12205-1609</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

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Amount of claim

3.117	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>New York Times Syndicated Sales</u>	<input type="checkbox"/> Contingent	_____ \$3,606.88
	<u>PO Box 392054</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Pittsburg PA 15251-9054</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.118	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>News Media Alliance</u>	<input type="checkbox"/> Contingent	_____ \$1,872.29
	<u>4401 N. Fairfax Dr</u>	<input type="checkbox"/> Unliquidated	
	<u>STE 300</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Arlington VA 22203</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.119	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Newsycle Solutions Inc.</u>	<input type="checkbox"/> Contingent	_____ \$145,914.63
	<u>7900 International Dr, 8th Fl</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Bloomington MN 55425</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.120	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Newspaper in Education Inst</u>	<input type="checkbox"/> Contingent	_____ \$250.00
	<u>Attn: Alexander Doug</u>	<input type="checkbox"/> Unliquidated	
	<u>3127 63rd Place</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Cheverly MD 20785</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.121	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$1,853.75</u>
	<u>Newspaper Subscription Service</u>	<input type="checkbox"/> Contingent	
	<u>5555 Morningside Dr. Suite 202</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Houston TX 77005</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.122	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$26,544.93</u>
	<u>North Pacific Paper Corp</u>	<input type="checkbox"/> Contingent	
	<u>Tax Dept CH1C28</u>	<input type="checkbox"/> Unliquidated	
	<u>PO Box 9777</u>	<input type="checkbox"/> Disputed	
	<u>Federal Way WA 98063-9777</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.123	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$6,004.17</u>
	<u>Olive Software Inc.</u>	<input type="checkbox"/> Contingent	
	<u>3033 South Parker Rd</u>	<input type="checkbox"/> Unliquidated	
	<u>STE 502</u>	<input type="checkbox"/> Disputed	
	<u>Aurora CO 80014</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.124	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$600.00</u>
	<u>Online Publications</u>	<input type="checkbox"/> Contingent	
	<u>55 E Long Lake Rd</u>	<input type="checkbox"/> Unliquidated	
	<u>STE 416</u>	<input type="checkbox"/> Disputed	
	<u>Troy MI 48085</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.125	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Opti Staffing Group</u>	<input type="checkbox"/> Contingent	<u>\$5,643.00</u>
	<u>2550 Denali Street STE 715</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99503</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.126	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Paul A. Veilleux</u>	<input type="checkbox"/> Contingent	<u>\$106.62</u>
	<u>3817 Sycamore Loop</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99504</u>	Basis for the claim:	
		<u>Sales Taxes</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.127	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Peninsula Airways Inc.</u>	<input type="checkbox"/> Contingent	<u>\$148.76</u>
	<u>6100 Boeing Ave</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99502</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.128	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>PIP Printing</u>	<input type="checkbox"/> Contingent	<u>\$151.87</u>
	<u>833 East 4th Avenue</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99501</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.129	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$34,871.84</u>
	<u>Ponderay Newsprint Co.</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 781933</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Philadelphia PA 19178-1933</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.130	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$262,556.99</u>
	<u>Premera Blue Cross</u>	<input type="checkbox"/> Contingent	
	<u>Attn: Payment Processing</u>	<input type="checkbox"/> Unliquidated	
	<u>PO Box 91060</u>	<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Seattle WA 98111</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.131	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$260.00</u>
	<u>Quad Graphics Marketing LLC</u>	<input type="checkbox"/> Contingent	
	<u>N61 W23044 Harry s Way</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Sussex WI 53089</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.132	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$6,639.00</u>
	<u>Quality Business Systems Inc.</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 398160</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>San Francisco CA 94139-8160</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.133	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Rapid Action Mailing Service</u>	<input type="checkbox"/> Contingent	
	<u>3850 Aircraft Drive</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99502</u>	Basis for the claim:	
	Date or dates debt was incurred _____	<u>Services/Supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

_____ **\$9,107.24**

3.134	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Rare Group Enterprises</u>	<input type="checkbox"/> Contingent	
	<u>4189 Santa Ana Street</u>	<input type="checkbox"/> Unliquidated	
	<u>Unit C</u>	<input type="checkbox"/> Disputed	
	<u>Ontario CA 91761</u>	Basis for the claim:	
	Date or dates debt was incurred _____	<u>Services/Supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

_____ **\$11,005.36**

3.135	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Ravn Alaska</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 201493</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99520</u>	Basis for the claim:	
	Date or dates debt was incurred _____	<u>Services/Supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

_____ **\$1,183.27**

3.136	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Red Wing Shoe Store</u>	<input type="checkbox"/> Contingent	
	<u>530 E Benson Blvd</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99503</u>	Basis for the claim:	
	Date or dates debt was incurred _____	<u>Services/Supplies</u>	
	Last 4 digits of account number _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

_____ **\$140.00**

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Amount of claim

3.137	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Reed Brennan Media Association</u>	<input type="checkbox"/> Contingent	_____ \$1,249.00
	<u>628 Virginia Drive</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Orlando</u> <u>FL</u> <u>32803</u>	Basis for the claim:	
	<u>Date or dates debt was incurred</u> _____	<u>Services/Supplies</u>	
	<u>Last 4 digits of account number</u> _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.138	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Rita Gelino-Beguette</u>	<input type="checkbox"/> Contingent	_____ \$140.00
	<u>825 W Lookout Drive</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Wasilla</u> <u>AK</u> <u>99654-0269</u>	Basis for the claim:	
	<u>Date or dates debt was incurred</u> _____	<u>Services/Supplies</u>	
	<u>Last 4 digits of account number</u> _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.139	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Roger P. Weinfurter</u>	<input type="checkbox"/> Contingent	_____ \$10.00
	<u>100 Showers Ave.</u>	<input type="checkbox"/> Unliquidated	
	<u>Anchorage, AK</u>	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	<u>Date or dates debt was incurred</u> _____	<u>Services/Supplies</u>	
	<u>Last 4 digits of account number</u> _____	Is the claim subject to offset?	
		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.140	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Rogoff, Alice</u>	<input type="checkbox"/> Contingent	_____ \$12,761,660.55
	<u>c/o Birch Horton Bittner Inc.</u>	<input type="checkbox"/> Unliquidated	
	<u>1127 Seventh Avenue</u>	<input type="checkbox"/> Disputed	
	_____	Basis for the claim:	
	<u>Achorage</u> <u>AK</u> <u>99501</u>	<u>Purchase Money</u>	
	<u>Date or dates debt was incurred</u> _____	Is the claim subject to offset?	
	<u>Last 4 digits of account number</u> _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

2016 Promissory Note - \$8,187,281.00
2015 Promissory Note - \$4,574,379.55

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Amount of claim

3.141	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$128.77
	<u>Rose Mason</u>	<input type="checkbox"/> Contingent	
	<u>4511 Folker St #21A</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99508</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.142	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$783.26
	<u>Serena Joseph</u>	<input type="checkbox"/> Contingent	
	<u>1021 Hace St.</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99515</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.143	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$47.78
	<u>Sizmek Technologies Inc.</u>	<input type="checkbox"/> Contingent	
	<u>500 W. 5th Street Suite 900</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Austin TX 78701</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.144	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,083.50
	<u>Social News Desk Inc.</u>	<input type="checkbox"/> Contingent	
	<u>PO Boxc 919440</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Orlando FL 32891-9440</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.145	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Software Business Systems Inc.</u>	<input type="checkbox"/> Contingent	_____ \$3,038.00
	<u>7401 Metro Blvd Ste 550</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Edina MN 55439-2313</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.146	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Southern Lithoplate Inc</u>	<input type="checkbox"/> Contingent	_____ \$12,135.62
	<u>PO Box 741887</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Atlanta GA 31374-1887</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.147	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Span Alaska Transportation Inc.</u>	<input type="checkbox"/> Contingent	_____ \$26,386.57
	<u>PO Box 101714</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Pasadena CA 91189-1714</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.148	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____
	<u>Steve Meyer</u>	<input type="checkbox"/> Contingent	_____ \$400.00
	<u>PO Box 2652</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Kenai AK 99611</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

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Amount of claim

3.149	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$244.11
	<u>Steve Vasquez</u>	<input type="checkbox"/> Contingent	
	<u>1811 Lore Rd Apt 4</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Anchorage AK 99507-2951</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.150	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$200.00
	<u>Steven H Kahn</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 236</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Port Alsworth AK 99653</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.151	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$267.31
	<u>Suburban Propane</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 12068</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Fresno CA 93776</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.152	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$46.42
	<u>Suzanna Caldwell</u>	<input type="checkbox"/> Contingent	
	<u>2115 Dawson St #1</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
	<u>Anchorage AK 99503</u>	<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Alaska Dispatch News, LLC

Case number (if known) A17-00285 GS

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

3.153	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$800.00
	<u>Synchronex LLC</u>	<input type="checkbox"/> Contingent	
	<u>371 NE Gilman Blvd Ste 250</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Issaquah WA 98027</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.154	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$232.35
	<u>Tamara Dodds</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 520905</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Big Lake AK 99652</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.155	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$4,783.00
	<u>Thomas Head & Greisen</u>	<input type="checkbox"/> Contingent	
	<u>1400 West Benson Blvd</u>	<input type="checkbox"/> Unliquidated	
	<u>STE 400</u>	<input type="checkbox"/> Disputed	
	<u>Anchorage AK 99503</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.156	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$20,700.00
	<u>Thomson Reuters (Markets) LLC</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 415983</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Boston MA 02241</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Alaska Dispatch News, LLC

Case number (if known) A17-00285 GS

Part 2: Additional Page

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Amount of claim

3.157	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____ \$631.42
	<u>Thunder Industries</u>	<input type="checkbox"/> Contingent	
	<u>530 Bush St #900</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>San Francisco</u> <u>CA</u> <u>94108</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.158	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____ \$4,801.36
	<u>Tribune Content Agency LLC</u>	<input type="checkbox"/> Contingent	
	<u>15158 Collections Center Drive</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>Chicago</u> <u>IL</u> <u>60693</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.159	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____ \$476.67
	<u>Tribune Media Services LLC</u>	<input type="checkbox"/> Contingent	
	<u>dba Gracernote</u>	<input type="checkbox"/> Unliquidated	
	<u>PO Box 415106</u>	<input type="checkbox"/> Disputed	
	<u>Boston</u> <u>MA</u> <u>02241-5106</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.160	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	_____ \$25,000.00
	<u>Trustees of Columbia U. In New York</u>	<input type="checkbox"/> Contingent	
	<u>615 W. 131st Street 3rd Floor</u>	<input type="checkbox"/> Unliquidated	
	_____	<input type="checkbox"/> Disputed	
	<u>New York</u> <u>NY</u> <u>10027</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Alaska Dispatch News, LLC

Case number (if known) A17-00285 GS

Part 2: Additional Page

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Amount of claim

3.161	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$12,500.00</u>
	<u>TSI North America LLC</u>	<input type="checkbox"/> Contingent	
	<u>4728 171st Ave SE</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Bellevue WA 98006</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.162	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$390.00</u>
	<u>Tundra & Associates Inc.</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 871354</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Wasilla AK 99687</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.163	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$651.74</u>
	<u>United Feature Syndicate</u>	<input type="checkbox"/> Contingent	
	<u>Commerce Bank</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Kansas City MO 64184-3771</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.164	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$2,628.17</u>
	<u>Universal U-Click</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 843345</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Kansas City MO 64184-3345</u>	Basis for the claim:	
		<u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Alaska Dispatch News, LLC

Case number (if known) A17-00285 GS

Part 2: Additional Page

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Amount of claim

3.165	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$30.00
	<u>Valley Transport & Storage</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 1085</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Palmer</u> <u>AK</u> <u>99645</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.166	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$2,707.77
	<u>Washington Post Writers Group</u>	<input type="checkbox"/> Contingent	
	<u>P O Box 75442</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Baltimore</u> <u>MD</u> <u>21275-5442</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.167	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$57.45
	<u>WGA Independent Contractors</u>	<input type="checkbox"/> Contingent	
	<u>PO Box 8</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Camp Hill</u> <u>PA</u> <u>17001-0008</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

3.168	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$150.00
	<u>William E. Sherwonit</u>	<input type="checkbox"/> Contingent	
	<u>2441 Tulik Drive</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	<u>Anchorage</u> <u>AK</u> <u>99517</u>	Basis for the claim: <u>Services/Supplies</u>	
	Date or dates debt was incurred _____	Is the claim subject to offset?	
	Last 4 digits of account number _____	<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Debtor Alaska Dispatch News, LLC

Case number (if known) A17-00285 GS

Part 2: Additional Page

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Amount of claim

3.169	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$11,620.00
	WP Company LLC	<input type="checkbox"/> Contingent	
	1301 K Street NW	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
	Washington DC 20071	Basis for the claim: Services/Supplies	
	Date or dates debt was incurred	Is the claim subject to offset?	
	Last 4 digits of account number	<input checked="" type="checkbox"/> No	
	_ _ _ _	<input type="checkbox"/> Yes	

Debtor Alaska Dispatch News, LLC

Case number (if known) A17-00285 GS

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

5b. Total claims from Part 2

5b. + \$15,110,972.24

5c. Total of Parts 1 and 2

5c. \$15,110,972.24

Lines 5a + 5b = 5c.

Fill in this information to identify the case:

Debtor name Alaska Dispatch News, LLC

United States Bankruptcy Court for the: DISTRICT OF ALASKA

Case number A17-00285 GS Chapter 11
(if known)

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, 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	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 _____	Real property lease 3150 C Street Contract to be REJECTED	3150 C, LLC 3150 C Street, #290 _____ Anchorage AK 99503
2.2	State what the contract or lease is for and the nature of the debtor's interest State the term remaining _____ List the contract number of any government contract _____	Promotional Partnership Agreement 2017 Weather Sponsorship Alyeska Resort Management Co. Contract to be ASSUMED	Alyeska Resort Mgmt Co 1000 Arlberg Avenue PO Box 249 _____ Girdwood AK 99587
2.3	State what the contract or lease is for and the nature of the debtor's interest State the term remaining _____ List the contract number of any government contract _____	Real property lease 5900 Arctic Boulevard Arctic Partners LLC Contract to be REJECTED	Arctic Partners, LLC PMB 48, 6716 Eastside Drive NE, STE 1 _____ Tacoma WA 98422
2.4	State what the contract or lease is for and the nature of the debtor's interest State the term remaining _____ List the contract number of any government contract _____	Real property lease 1001 Northway Drive Contract to be REJECTED	GCI NADC LLC c/o General Communication, Inc. 2550 Denali Street, Ste 1000 _____ Anchorage AK 99503

Debtor Alaska Dispatch News, LLC Case number (if known) A17-00285 GS



Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

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

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

2.5	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	Employment Contract <hr/> <hr/> <hr/>	<u>Hulen, David</u> <hr/> <hr/> <hr/>
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Fill in this information to identify the case:

Debtor name Alaska Dispatch News, LLC

United States Bankruptcy Court for the: DISTRICT OF ALASKA

Case number (if known) A17-00285 GS

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		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1 Alice Rogoff	<u>c/o Birch Horton Bittner Inc</u> <small>Number Street</small> 1127 Seventh Avenue <hr/> Anchorage AK 99501 <small>City State ZIP Code</small>	Northrim Bank	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 Alice Rogoff	<u>c/o Birch Horton Bittner Inc.</u> <small>Number Street</small> 1127 Seventh Avenue <hr/> Anchorage AK 99501 <small>City State ZIP Code</small>	3150 C, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G
2.3 Alice Rogoff	<u>c/o Birch Horton Bittner Inc.</u> <small>Number Street</small> 1127 Seventh Avenue <hr/> Achorage AK 99501 <small>City State ZIP Code</small>	Arctic Partners, LLC	<input type="checkbox"/> D <input type="checkbox"/> E/F <input checked="" type="checkbox"/> G

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**UNITED STATES BANKRUPTCY COURT
 DISTRICT OF ALASKA
 ANCHORAGE DIVISION**

In re: **Alaska Dispatch News, LLC**

CASE NO **A17-00285 GS**

CHAPTER **11**

BUSINESS INCOME AND EXPENSES

PLEASE NOTE: See page 41 - 45 of Docket 12

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:

1. Gross Income for 12 Months Prior to Filing: \$0.00

PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

2. Gross Monthly Income: \$0.00

PART C - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

3. Net Employee Payroll (Other Than Debtor): \$0.00

4. Payroll Taxes: \$0.00

5. Unemployment Taxes: \$0.00

6. Worker's Compensation: \$0.00

7. Other Taxes: \$0.00

8. Inventory Purchases (including raw materials): \$0.00

9. Purchase of Feed/Fertilizer/Seed/Spray: \$0.00

10. Rent (other than debtor's principal residence): \$0.00

11. Utilities: \$0.00

12. Office Expenses and Supplies: \$0.00

13. Repairs and Maintenance: \$0.00

14. Vehicle Expenses: \$0.00

15. Travel and Entertainment: \$0.00

16. Equipment Rental and Leases: \$0.00

17. Legal/Accounting/Other Professional Fees: \$0.00

18. Insurance: \$0.00

19. Employee Benefits (e.g., pension, medical, etc.): \$0.00

20. Payments to be Made Directly by Debtor to Secured Creditors for
 Pre-Petition Business Debts (Specify): **None**

21. Other (Specify): **None**

22. Total Monthly Expenses (Add items 3 - 21) \$0.00

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract item 22 from item 2): \$0.00

Fill in this information to identify the case and this filing:

Debtor Name	<u>Alaska Dispatch News, LLC</u>
United States Bankruptcy Court for the:	<u>DISTRICT OF ALASKA</u>
Case number (if known)	<u>A17-00285 GS</u>

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 **Business Income & Expense**

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

Executed on 09/06/2017
MM / DD / YYYY

X /s/ Alice Rogoff
Signature of individual signing on behalf of debtor

Alice Rogoff
Printed name

Manager
Position or relationship to debtor