Annexure - 7 Name of the corporate debtor: <u>SAPS Infrastructure Pvt Ltd</u>; Date of commencement of CIRP: <u>08/04/2019</u>; List of creditors as on: <u>03/06/2019</u>

## List of operational creditors (Government dues)

| Sl. No. | Details of Claimant |         |            | Details of claim received |         | Details of claim admitted Amount of Amount 1 |           |          |           |         |                     |           |          |          |            |             |  |
|---------|---------------------|---------|------------|---------------------------|---------|--|-----------|----------|-----------|---------|---------------------|-----------|----------|----------|------------|-------------|--|
|         |                     |         |            |                           |         |  |           |          |           |         |                     | Amount of |          |          | Amount     | Remarks, it |  |
| l       |                     |         |            |                           |         |  |           |          |           |         | contingent          | of any    | of claim | of claim | any        |             |  |
| i       |                     |         |            |                           |         |  |           |          |           |         |                     | claim     | mutual   | not      | under      |             |  |
| 1       |                     |         |            |                           |         |  |           |          |           |         |                     | 1         |          | admitted | verificati |             |  |
|         |                     |         |            |                           |         |  |           |          |           |         |                     |           | may be   |          | on         |             |  |
|         | Depart              | Governm | Identifica | Date of                   | Amount  | Amount                                       | Nature of | Amount   | Amount    | Whether | 0/ .6               |           | set-off  |          |            |             |  |
|         | ment                | ent     | tion No.   | receipt                   | claimed | of claim                                     | claim     | covered  | covered   | related | % of                |           |          |          |            |             |  |
|         |                     | l       |            |                           |         | admitted                                     |           | by       | by        | party?  | voting              |           |          |          |            |             |  |
|         |                     |         |            |                           |         |  |           |          | guarantee |         | share in<br>CoC, if |           |          |          |            |             |  |
|         |                     |         |            |                           |         |  |           | interest | gamanee   |         |                     |           |          |          |            |             |  |
|         |                     |         |            |                           |         |  |           |          |           |         | applicable          |           |          |          |            |             |  |
| NIL     | NIL                 | NIL     | NIL        | NIL                       | NIL     | NIL  | NIL       | NIII     |           |         |                     |           |          |          |            |             |  |
| TAL     | TAIL                | NIL     | NIL        | NIL                       | INIL    | MIL  | INIL      | NIL      | NIL       | NIL     | NIL                 | NIL       | NIL      | NIL      | NIL        | NIL         |  |
|         |                     |         |            |                           |         |  |           |          |           |         |                     |           |          |          |            |             |  |
|         |                     |         |            |                           |         |  |           |          |           |         |                     |           |          |          |            |             |  |
|         |                     |         |            |                           |         |  |           |          |           |         |                     |           |          |          |            |             |  |
|         |                     |         |            |                           |         |  |           |          |           |         |                     |           |          |          |            |             |  |
|         |                     |         |            |                           |         |  |           |          |           |         |                     |           |          |          |            |             |  |