	ANNEXURE 2													
	Name of the corporate debtor: Date of commencement of liquidation: List of stakeholders as on :													
List of unsecured financial creditors														
Sl. No.	Name of creditor	Identification No.	Details of claim received		Details of claim admitted			l		Amount of				
			Date of receipt	Amount claimed	Amount of claim admitted	Nature of claim	Amount covered by guarantee	% share in total amount of claims admitted	contingent	any mutual dues, that may be set- off	claim	Amount of claim under verification	Kemarks, if	
1	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	
2	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	Not applicable	
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