Γ	Annexure-2 Name of the corporate debtor: CARE STATIONERS & AGENCIES PRIVATE LIMITED (UNDER CIRP); Date of commencement of CIRP; 13/12/2019														
	List of Operational Creditor (Government Dues) (Amount in ₹)														
Sl. No		Details of received	claim	Details of claim admitted						Amount of contingent	Amount of any Mutual dues,	claim not	Amount of claim under		
		Date of receipt		Amount of claim admitted	Nature of claim	Amount covered by security interest	Amount covered by guarantee	Whether related party?	% of voting share in CoC		that may be set- off	admitted	verifica- tion		
1	Employee State Insurance Corporation		2,43,072		perational Credito		0	No	NA	0	0	0	0		
_2	2 Employee Provident Fund Organization		12,241 2,55,313	12,241 2,55,313	perational Credito	0	0	No	NA	0	0	0	0		Н