List of operational creditor (Employees)

1	No.	•	SI.
1	authori sed repres entativ e, if any	o <u>f</u>	Name
1		Employee	Name of
ı	Date of receipt	received	Details of claim
1	Amount claimed		
	Amount of claim admitted		
•	Nature of claim		Details of claim admitted
	Whether related party?		
	% voting share in CoC, if applicable		
1	nt claim	of	Amount
I		of any	Amount Amount
1	under verificatio n	of claim	Amount
ı	not admitted	of claim	Amount
1	if any	Damarka	

