Annexure-5

Name of the corporate debtor: M/s Trueweight Wellness Private Limited; Date of comn

List of operational creditors (W

Sl. No.	Name of authorised representative, if any	Name of workman	Details of claim received		Details of claim admitted		
			Date of receipt	Amount claimed	Amount of claim admitted	Nature of claim	Whether related party?
	NA	NA	NA	NA	NA	NA	NA
	TOTAL			**0.00**	**0.00**		

nencement of CIRP:20.07.2026; List of creditors as on: 26.08.2026

Vorkmen)

% of voting share in CoC	Amount of contingent claim	Amount of any mutual dues, that may be set-off	Amount of claim under verification	Amount of claim not admitted	Remarks, if any
NA	NA	NA	NA	NA	NA
	0.00		**0.00**	**0.00**	NA