

**Fill in this information to identify the case:**

Debtor Borrego Community Health Foundation

United States Bankruptcy Court for the: Southern District of California  
(State)

Case number 22-02384

**Official Form 410  
Proof of Claim**

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense. Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

**Part 1: Identify the Claim**

1. Who is the current creditor?	<u>Gabriel Martinez</u> Name of the current creditor (the person or entity to be paid for this claim)	
	Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent?	Where should payments to the creditor be sent? (if different)
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	<u>Gabriel Martinez</u> <u>1549 E Holt Ave</u> <u>Pomona, CA 91767, United States</u>	
	Contact phone <u>909469-6967</u>	Contact phone _____
	Contact email <u>ladopomona1549@gmail.com</u>	Contact email _____
	Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____	
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on _____ MM / DD / YYYY	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor?  No  
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: \_\_\_\_\_

7. How much is the claim? \$ 60000. Does this amount include interest or other charges?  
 No  
 Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  
Limit disclosing information that is entitled to privacy, such as health care information.  
services rendered

9. Is all or part of the claim secured?  No  
 Yes. The claim is secured by a lien on property.  
**Nature or property:**  
 Real estate: If the claim is secured by the debtor's principle residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  
 Motor vehicle  
 Other. Describe: \_\_\_\_\_  
**Basis for perfection:** \_\_\_\_\_  
Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)  
**Value of property:** \$ \_\_\_\_\_  
**Amount of the claim that is secured:** \$ \_\_\_\_\_  
**Amount of the claim that is unsecured:** \$ \_\_\_\_\_ (The sum of the secured and unsecured amount should match the amount in line 7.)  
**Amount necessary to cure any default as of the date of the petition:** \$ \_\_\_\_\_  
**Annual Interest Rate** (when case was filed) \_\_\_\_\_ %  
 Fixed  
 Variable

10. Is this claim based on a lease?  No  
 Yes. Amount necessary to cure any default as of the date of the petition. \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff?  No  
 Yes. Identify the property: \_\_\_\_\_

12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

No

Yes. Check all that apply:

	Amount entitled to priority
<input type="checkbox"/> Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$ _____
<input type="checkbox"/> Up to \$3,350* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).	\$ _____
<input type="checkbox"/> Wages, salaries, or commissions (up to \$15,150*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).	\$ _____
<input type="checkbox"/> Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).	\$ _____
<input type="checkbox"/> Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).	\$ _____
<input type="checkbox"/> Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.	\$ _____

\* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)?

No

Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ \_\_\_\_\_

**Part 3: Sign Below**

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 11/15/2022  
MM / DD / YYYY

/s/Gabriel G Martinez  
Signature

Print the name of the person who is completing and signing this claim:

Name Gabriel G Martinez  
First name Middle name Last name

Title Owner

Company Martinez and Zermeno II, A Professional Dental Corporation  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address \_\_\_\_\_

Contact phone \_\_\_\_\_ Email \_\_\_\_\_

<b>Debtor:</b> 22-02384 - Borrego Community Health Foundation		
<b>District:</b> Southern District of California, San Diego Division		
<b>Creditor:</b> Gabriel Martinez 1549 E Holt Ave  Pomona, CA, 91767 United States <b>Phone:</b> 909469-6967 <b>Phone 2:</b>  <b>Fax:</b> 909469-6957 <b>Email:</b> ladopomona1549@gmail.com	<b>Has Supporting Documentation:</b> Yes, please mail physical supporting documentation <b>Related Document Statement:</b>	
	<b>Has Related Claim:</b> No <b>Related Claim Filed By:</b>	
	<b>Filing Party:</b> Creditor	
<b>Other Names Used with Debtor:</b>	<b>Amends Claim:</b> No <b>Acquired Claim:</b> No	
<b>Basis of Claim:</b> services rendered	<b>Last 4 Digits:</b> No	<b>Uniform Claim Identifier:</b>
<b>Total Amount of Claim:</b> 60000	<b>Includes Interest or Charges:</b> No	
<b>Has Priority Claim:</b> No	<b>Priority Under:</b>	
<b>Has Secured Claim:</b> No <b>Amount of 503(b)(9):</b> No <b>Based on Lease:</b> No <b>Subject to Right of Setoff:</b> No	<b>Nature of Secured Amount:</b> <b>Value of Property:</b> <b>Annual Interest Rate:</b> <b>Arrearage Amount:</b> <b>Basis for Perfection:</b> <b>Amount Unsecured:</b>	
<b>Submitted By:</b> Gabriel G Martinez on 15-Nov-2022 2:01:48 p.m. Eastern Time <b>Title:</b> Owner <b>Company:</b> Martinez and Zermeno II, A Professional Dental Corporation		

**Additional Supporting  
Documents Received on  
11/23/2022**

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220238422112300000000004

Fill in this information to identify the case:

Debtor Borrego Community Health Foundation  
United States Bankruptcy Court for the Southern District of California  
Case number 22-02384

The Debtor has listed your claim as Disputed on Schedule F (E/F, Part 2) as a General Unsecured claim. If you believe that you have a claim against the Debtor, please complete and return this form accordingly.

Official Form 410  
Proof of Claim

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed.

Part 1: Identify the Claim

NameID: 15089594

1. Who is the current creditor? Gabriel Martinez  
Name of the current creditor (the person or entity to be paid for this claim)  
Other names the creditor used with the debtor NONE

2. Has this claim been acquired from someone else?  No  
 Yes. From whom? \_\_\_\_\_

3. Where should notices and payments to the creditor be sent? Gabriel Martinez  
1549 E Holt Ave  
Pomona, CA 91767  
Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)  
Where should notices to the creditor be sent?  
Where should payments to the creditor be sent? (if different)  
Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
City State ZIP Code \_\_\_\_\_  
Address \_\_\_\_\_  
Contact phone (909) 469-6967  
Contact email ladopomona1549@gmail.com  
Uniform claim identifier for electronic payments in chapter 13 (if you use one): \_\_\_\_\_  
*RECEIVED*  
*NOV 23 2022*  
*KURTZMAN CARSON CONSULTANTS*  
*PUT E-MAIL*

4. Does this claim amend one already filed?  No  
 Yes. Claim number on court claims registry (if known) \_\_\_\_\_ Filed on \_\_\_\_\_ MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?  No  
 Yes. Who made the earlier filing? \_\_\_\_\_



**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor?  No  
 Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: \_\_\_\_\_

7. How much is the claim? \$ 60,000 Does this amount include interest or other charges?  
*Power la cantidad que le debe*  No  
 Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim? Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  
 Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  
 Limit disclosing information that is entitled to privacy, such as health care information.  
Services Rendered

9. Is all or part of the claim secured?  No  
 Yes. The claim is secured by a lien on property.  
 Nature of property:  
 Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.  
 Motor vehicle  
 Other. Describe: \_\_\_\_\_

Basis for perfection: \_\_\_\_\_  
 Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

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Value of property: \$ \_\_\_\_\_  
 Amount of the claim that is secured: \$ \_\_\_\_\_  
 Amount of the claim that is unsecured: \$ \_\_\_\_\_ (The sum of the secured and unsecured amount should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ \_\_\_\_\_

Annual Interest Rate (when case was filed) \_\_\_\_\_ %  
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 Variable

10. Is this claim based on a lease?  No  
 Yes. Amount necessary to cure any default as of the date of the petition: \$ \_\_\_\_\_

11. Is this claim subject to a right of setoff?  No  
 Yes. Identify the property: \_\_\_\_\_



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?

No

Yes. Check all that apply:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ \_\_\_\_\_

Up to \$3,350\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ \_\_\_\_\_

Wages, salaries, or commissions (up to \$15,150\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ \_\_\_\_\_

Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ \_\_\_\_\_

Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ \_\_\_\_\_

Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies. \$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)?

No

Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

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Check the appropriate box:

I am the creditor.

I am the creditor's attorney or authorized agent.

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I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on date 11 8 2022  
MM / DD / YYYY

Signature

*Gabriel Martin Garcia*

Print the name of the person who is completing and signing this claim:

Name

GABRIEL  
First name

Middle name

MARTIN GARCIA  
Last name

Title

creditor

Company

LAW AMERICAN DEBT  
Identify the corporate servicer as the company if the authorized agent is a servicer.

Address

Number Street

City

State

ZIP Code

Country

Contact phone

Email

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claim_id	provider	patient	date of birth	date of serv	correction n	submitted_d	procedures	claim_status	amount
3748522						11/5/2020	D1120,D1330,D1208	Pending Payment	\$ 100.00
3748540						11/5/2020	D0120,D0220,D0274,D	Pending Payment	\$ 110.00
3748550						11/5/2020	D2751,D0220	Pending Payment	\$ 475.00
3748560						11/5/2020	D1999,D2700	Pending Payment	\$ 5.00
3748574						11/5/2020	D0150,D0210	Pending Payment	\$ 130.00
3748588						11/5/2020	D9430,D0220	Pending Payment	\$ 100.00
3748592						11/5/2020	D5002.1	Pending Payment	\$ -
3748597						11/5/2020	D0150,D0210	Pending Payment	\$ 130.00
3748608						11/5/2020	D9430,D0220,D0230	Pending Payment	\$ 100.00
3748609						11/5/2020	D7140	Pending Payment	\$ 120.00
3748638						11/5/2020	D1999,D2332	Pending Payment	\$ 155.00
3748659						11/5/2020	D3310,D1999,D0220	Pending Payment	\$ 310.00
3748681						11/5/2020	D1110,D1330	Pending Payment	\$ 110.00
3748691						11/5/2020	D1999,D4341,D4341	Pending Payment	\$ 145.00
3748701						11/5/2020	D0150,D0210	Pending Payment	\$ 130.00
3748710						11/5/2020	D0120,D0210	Pending Payment	\$ 110.00
3748719						11/12/2020	D9430,D0220	Pending Payment	\$ 100.00
3748830						11/5/2020	D7140	Pending Payment	\$ 120.00
3748867						11/19/2020	D1999,D2393	Pending Payment	\$ 155.00
3748896						11/5/2020	D0210,D0120	Pending Payment	\$ 110.00
3748905						11/5/2020	D5002.1,D5002.1	Pending Payment	\$ -
3764997						11/12/2020	D7140	Pending Payment	\$ 120.00
3766971						11/12/2020	D3330,D1999	Pending Payment	\$ 470.00
3766992						11/12/2020	D3330,D1999	Pending Payment	\$ 470.00
3766994						11/12/2020	D1999,D3320	Pending Payment	\$ 370.00
3767008						11/12/2020	D1999,D2391	Pending Payment	\$ 155.00
3767015						11/19/2020	D1120,D1330,D1208	Pending Payment	\$ 100.00
3767020						11/12/2020	D1120,D1330,D1208	Pending Payment	\$ 100.00
3767026						11/12/2020	D1120,D1330,D1208	Pending Payment	\$ 100.00
3767031						11/12/2020	D9430,D0220	Pending Payment	\$ 100.00
3767042						11/12/2020	D1999,D4341,D4341	Pending Payment	\$ 145.00
3767044						11/12/2020	D9430,D0220	Pending Payment	\$ 100.00
3767061						11/12/2020	D1999,D2700	Pending Payment	\$ 5.00
3767068						11/12/2020	D7140	Pending Payment	\$ 120.00
3767077						11/12/2020	D0120,D0210	Pending Payment	\$ 110.00
3767081						11/12/2020	D1999,D2700	Pending Payment	\$ 5.00
3767099						11/12/2020	D0120,D0210	Pending Payment	\$ 110.00
3767102						11/12/2020	D0120,D0220,D0274,D	Pending Payment	\$ 110.00
3767110						11/12/2020	D0210,D0120	Pending Payment	\$ 110.00
3767123						11/12/2020	D0120,D0210	Pending Payment	\$ 110.00
3767132						11/12/2020	D0120,D0210	Pending Payment	\$ 110.00
3767142						11/12/2020	D2391,D2391	Pending Payment	\$ 150.00
3767159						11/12/2020	D1120,D1330,D1208	Pending Payment	\$ 100.00
3767177						11/12/2020	D1120,D1330,D1208	Pending Payment	\$ 100.00
3767184						11/12/2020	D1120,D1330,D1208	Pending Payment	\$ 100.00
3767194						11/12/2020	D1120,D1330	Pending Payment	\$ 100.00
3767222						11/12/2020	D2751,D0270	Pending Payment	\$ 475.00
3767229						11/12/2020	D1999,D2391,D2391	Pending Payment	\$ 155.00
3767244						11/12/2020	D1999,D2700	Pending Payment	\$ 5.00
3767252						11/12/2020	D2751,D0270	Pending Payment	\$ 475.00
3767280						11/12/2020	D7210,D7210,D1999	Pending Payment	\$ 190.00
3767296						11/12/2020	D5001,D5001	Pending Payment	\$ -
3767307						11/12/2020	D1999,D4341,D4341	Pending Payment	\$ 145.00
3767311						11/12/2020	D1999,D4341,D4341	Pending Payment	\$ 145.00
3767317						11/12/2020	D1999,D2700	Pending Payment	\$ 5.00
3767329						11/12/2020	D0120,D0210	Pending Payment	\$ 110.00
3767332						11/12/2020	D9430,D0220,D0270	Pending Payment	\$ 100.00
3767340						11/16/2020	D0150,D0220,D0230	Pending Payment	\$ 130.00
3767350						11/12/2020	D5003.1	Pending Payment	\$ -
3767354						11/12/2020	D1999,D2391	Pending Payment	\$ 155.00
3767401						11/12/2020	D1999,D2330,D2330	Pending Payment	\$ 155.00
3767410						11/12/2020	D1999,D4341,D4341	Pending Payment	\$ 145.00
3767435						11/12/2020	D1999,D4341,D4341	Pending Payment	\$ 145.00
3767448						11/12/2020	D5002,D5002	Pending Payment	\$ -
3772649						11/16/2020	D1110,D1330	Pending Payment	\$ 110.00
3772654						11/16/2020	D7140,D7140	Pending Payment	\$ 120.00
3772660						11/16/2020	D5003,D5003	Pending Payment	\$ -
3772666						11/16/2020	D5211	Pending Payment	\$ 360.00
3772674						11/16/2020	D1110,D1330	Pending Payment	\$ 110.00
3772679						11/16/2020	D0120,D0210,D1110,D	Pending Payment	\$ 140.00

3772685		11/16/2020	D1999,02331	Pending Payment	\$	155.00
3772693		11/16/2020	D1330,D0210,D0120,D	Pending Payment	\$	140.00
3772698		11/16/2020	D4910,D1330,D1999	Pending Payment	\$	145.00
3772704		11/16/2020	D1999,02393	Pending Payment	\$	155.00
3772708		11/16/2020	D5003.1,D5003.1	Pending Payment	\$	-
3772714		11/16/2020	D4341,D4341,D1999	Pending Payment	\$	145.00
3772717		11/30/2020	D9430,D0220,D0230	Pending Payment	\$	100.00
3772728		11/16/2020	D1999,02391	Pending Payment	\$	155.00
3772735		11/16/2020	D0120,D0210,D1110,D	Pending Payment	\$	140.00
3772749		11/16/2020	D0120,D0210,D1110,D	Pending Payment	\$	140.00
3772751		11/19/2020	D0150,D0210	Pending Payment	\$	130.00
3772763		11/16/2020	D7140	Pending Payment	\$	120.00
3772768		11/16/2020	D9930	Pending Payment	\$	50.00
3784278		11/19/2020	D1120,D1330,D1208	Pending Payment	\$	100.00
3784285		11/19/2020	D2751,D0270	Pending Payment	\$	475.00
3784308		11/19/2020	D9430,D0220	Pending Payment	\$	100.00
3784342		11/19/2020	D9430,D0220	Pending Payment	\$	100.00
3784353		11/19/2020	D7140	Pending Payment	\$	120.00
3784360		12/10/2020	D1110,D1330	Pending Payment	\$	110.00
3784365		11/30/2020	D1999,D3991	Pending Payment	\$	5.00
3784374		11/19/2020	D4910,D1999	Pending Payment	\$	145.00
3784377		11/19/2020	D0120,D0210	Pending Payment	\$	110.00
3784384		11/19/2020	D0150,D0220,D0230	Pending Payment	\$	130.00
3784390		11/19/2020	D5003.1	Pending Payment	\$	-
3784394		11/19/2020	D0120,D0210	Pending Payment	\$	110.00
3784400		11/19/2020	D1999,D4341,D4341	Pending Payment	\$	145.00
3784430		11/19/2020	D0150,D0210	Pending Payment	\$	130.00
3784434		11/19/2020	D7210,D1999	Pending Payment	\$	190.00
3784440		11/19/2020	D1999,02391	Pending Payment	\$	155.00
3784445		11/19/2020	D1999,02392	Pending Payment	\$	155.00
3784451		11/19/2020	D9430,D0220	Pending Payment	\$	100.00
3784455		11/19/2020	D7140,D7140	Pending Payment	\$	120.00
3784497		11/19/2020	D1110,D1330	Pending Payment	\$	110.00
3784500		11/19/2020	D9430,D0220	Pending Payment	\$	100.00
3784518		11/19/2020	D1110,D1330	Pending Payment	\$	110.00
3784522		11/19/2020	D0210,D2751	Pending Payment	\$	475.00
3784528		11/19/2020	D2391,D1999	Pending Payment	\$	155.00
3784547		11/19/2020	D2394,D1999	Pending Payment	\$	155.00
3784557		11/19/2020	D1999,D2700	Pending Payment	\$	5.00
3784561		11/19/2020	D1999,02393	Pending Payment	\$	155.00
3784595		11/19/2020	D2393,D1999	Pending Payment	\$	155.00
3784602		11/19/2020	D5110,D5120	Pending Payment	\$	1,270.00
3784608		11/19/2020	D0150,D0220,D0230	Pending Payment	\$	130.00
3784638		11/19/2020	D7140	Pending Payment	\$	120.00
3803293		11/30/2020	D5213	Pending Payment	\$	660.00
3807851		12/3/2020	D5213,D5214	Pending Payment	\$	1,320.00
3807856		12/3/2020	D5401.1,D5401.1	Pending Payment	\$	-
3814490		12/14/2020	D2751,D0220	Pending Payment	\$	475.00

