Case	22-02384-LT11	Filed 12/05/24	Entered 12/05/24 13:46:06 Doc 1502 Pg. 1 of Docket #1502 Date Filed: 12/05/2024		
1 2 3 4 5 6 7 8 9 10 11 12					
13	j	he Co-Liquidati			
14 15			TATES BANKRUPTCY COURT N DISTRICT OF CALIFORNIA		
	In no	SOUTHER			
16	In re		Case No. 22-02384-11 Chapter 11 Case		
17	BORREGO CO HEALTH FOU	JNDATION,	Judge: Honorable Laura S. Taylor		
18		and Debtor in	STIPULATION BY AND AMONG THE		
19 20	Possessi	on.	POST-EFFECTIVE DATE DEBTOR, THE LIQUIDATING TRUSTEE, THE		
21			CO-LIQUIDATING TRUSTEES AND GABRIEL MARTINEZ REGARDING		
22			CLAIM NO. 99		
23					
24					
25					
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27					
28					
	4880-3419-0589.1 1028	33.00003	220238424120500000000001		

DENTONS US ILP 601 South Figueroa STREET, Suite 2500 Los ANGELES, California 90017-5704 (213) 623-9300

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Borrego Community Health Foundation, the debtor and debtor in possession (prior to the effective date of the Plan (defined below), the "Debtor," and after the effective date, the "Post-Effective Date Debtor") in the above-captioned chapter 11 bankruptcy case, the Liquidating Trustee (the "Liquidating Trustee") of the Borrego Community Health Foundation Liquidating Trust (the "Liquidating Trust"), the Co-Liquidating Trustees of the Liquidating Trust (the "Co-Liquidating Trustees") and Gabriel Martinez (the "Claimant", and collectively with the Post-Effective Date Debtor, the Liquidating Trustee, and the Co-Liquidating Trustees, the "Parties") hereby enter into this Stipulation By and Among the Post-Effective Date Debtor, the Liquidating Trustee, the Co-Liquidating Trustees and Gabriel Martinez Regarding Claim No. 99.

RECITALS

17 WHEREAS, on September 12, 2022, the Debtor filed a voluntary petition for 18 relief under chapter 11 of title 11 of the United States Code commencing Case No. 19 22-02384 (the "Chapter 11 Case") in the United States Bankruptcy Court for the 20 Southern District of California;

21 WHEREAS, on or about November 15, 2022, Claimant filed Proof of Claim 22 No. 99 in the amount of \$60,000.00 ("Claim 99"), a copy of which is attached 23 hereto as **Exhibit** A;

24 WHEREAS, the Liquidating Trust was established pursuant to the First 25 Amended Joint Combined Disclosure Statement and Chapter 11 Plan of 26 Liquidation of Borrego Community Health Foundation [Docket No. 1168] (the 27 "Plan"), confirmed by the order [Docket No. 1273] entered January 25, 2024 (the 28 "Confirmation Order"), and that certain Liquidating Trust Agreement, dated as of 17

February 14, 2024 (the "Liquidating Trust Agreement"); and

WHEREAS, after the Post-Effective Date Debtor's professionals reviewed Claim 99, the Parties have agreed to resolve any issues regarding Claim 99 as set forth herein.

STIPULATION

NOW THEREFORE, subject to the approval of the Court, the Parties
hereby agree and stipulate as follows:

8 1. Claim 99 shall be reduced and allowed as a general unsecured claim in
9 the amount of \$20,000.00 (the "<u>Allowed Claim Amount</u>").

2. Within thirty (30) days of entry of the order approving this Stipulation, the Liquidating Trust shall pay the Allowed Claim Amount to Claimant pursuant to the Plan.

In consideration of the agreements with and value provided herein and 3. 13 other good and valuable consideration, the Parties hereby waive, remise, release 14 and forever discharge the other, including each of their respective former and 15 16 current predecessors, successors, assigns, affiliates, subsidiaries, parent companies, shareholders, partners, members, managers, investors directors, 17 officers, accountants, attorneys, employees, agents, representatives and servants of, from and 18 against any and all claims, actions, causes of action, suits, proceedings, defenses, 19 counterclaims, contracts, judgments, damages, accounts, reckonings, executions, 20 and liabilities whatsoever of every name and nature, whether known or unknown, 21 whether or not well-founded in fact or in law, and whether in law, at equity or 22 otherwise, which either Party ever had or now has for or by reason of any matter, 23 cause or anything whatsoever to this date relating to or arising out of the Parties' 24 prior business relationship, or the Chapter 11 Case. 25

4. Each of the Parties to the Stipulation acknowledge that they are
familiar with California Civil Code Section 1542 and with respect to the matters
released herein, each Party expressly waives any and all rights under California

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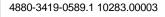
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Civil Code Section 1542 and under any other federal or state statute or law of
 similar effect. California Civil Code Section 1542 provides:

A general release does not extend to claims that the creditor or releasing party does not know or suspect to exist in his or her favor at the time of executing the release and that, if known by him or her, would have materially affected his or her settlement with the debtor or released party.

5. Claimant hereby warrants that Claimant (a) is authorized and empowered to execute this Stipulation on behalf of the Claimant, (b) has read this Stipulation in its entirety and fully understands and accepts the terms set forth herein, (c) has had an opportunity to consult with legal counsel and any other advisors of Claimant's choice with respect to the terms of this Stipulation, and (d) is signing this Stipulation on Claimant's own free will.



[Remainder of Page Intentionally Left Blank]

The terms, covenants, conditions, and provisions of this Stipulation 6. 1 2 cannot be altered, changed, modified, or added to, or deleted from, except in a writing signed by all parties hereto. 3 This Stipulation may be executed in counterparts each of which shall 4 7. be deemed an original, but all of which together shall constitute one and the same. 5 The Court shall retain jurisdiction over all matters relating to the 6 8. 7 interpretation and enforcement of this Stipulation. 8 Dated: December 5, 2024 DENTONS US LLP SAMUEL R. MAIZEL TANIA M. MOYRON 10 DENTONS US LLP 601 SOUTH FIGUEROA STREET, SUITE 2500 LOS ANGELES, CALIFORNIA 90017-5704 (213) 623-9300 11 /s/ Tania M. Moyron By Tania M. Moyron 12 Attorneys for the Post-Effective Date 13 Debtor and the Co-Liquidating Trustee 14 Dated: December 5, 2024 PACHULSKI STANG ZIEHL & JONES LLP Jeffrey N. Pomerantz Steven W. Golden 15 16 By <u>/s/ Steven W. Golden</u> Steven W. Golden 17 18 Attorneys for the Co-Liquidating Trustee 19 Dated: December 04, 2024 20 21 By **Gabriel Martinez** 22 23

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EXHIBIT A

Fill in this information to identify the case:				
Debtor	Borrego Community Health	Foundation		
United States B	ankruptcy 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.

Pa	art 1: Identify the Clair			
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		
2.	Has this claim been acquired from someone else?	 No Yes. From whom?		
3.	Where should notices and payments to the creditor be sent? 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) Gabriel Martinez 1549 E Holt Ave Pomona, CA 91767, United States Contact phone 909469-6967 Contact phone Contact email 1adopomona1549@gmail.com Uniform claim identifier for electronic payments in chapter 13 (if you use one):		
4.	Does this claim amend one already filed?	No Yes. Claim number on court claims registry (if known) Filed on		
5.	Do you know if anyone else has filed a proof of claim for this claim?	 No Yes. Who made the earlier filing? 		

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P	art 2: Give Information A	bout 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?	50000 Does this amount include interest or other charges? Image: State of the 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.		
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 inter example, a mortgage, lien, certificate of title, financing statement, or other document that shows has been filed or recorded.) Value of property: \$		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: \$		
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:		

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12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?	No No	1 - 11 46 - 6 6		Amount entitled to priority	
A claim may be partly priority and partly	Dome	k all that apply: estic support obligations (includ S.C. § 507(a)(1)(A) or (a)(1)(B	ing alimony and child support) under).		
nonpriority. For example, in some categories, the law limits the amount	Up to	\$3,350* of deposits toward pu	′ ırchase, lease, or rental of property ıousehold use. 11 U.S.C. § 507(a)(7)	\$	
entitled to priority.	days		p to \$15,150*) earned within 180 is filed or the debtor's business ends 7(a)(4).	s, \$	
	Taxes	s or penalties owed to governm	ental units. 11 U.S.C. § 507(a)(8).	\$	
	Contr	ibutions to an employee bene	fit plan. 11 U.S.C. § 507(a)(5).	\$	
	Other	Specify subsection of 11 U.S	S.C. § 507(a)() that applies.	\$	
2	* Amounts	are subject to adjustment on 4/01/2	5 and every 3 years after hat for cases beg	un on or after the date of adjustment.	
13. Is all or part of the claim	No No				
pursuant to 11 U.S.C. § 503(b)(9)?	days befor	re the date of commencement	arising from the value of any goods re of the above case, in which the good siness. Attach documentation suppor	ds have been sold to the Debtor in	
	\$	<u>.</u>			
Part 3: Sign Below					
The person completing	Check the approp	riate box:			
this proof of claim must sign and date it.	I am the cred	litor.			
FRBP 9011(b). If you file this claim	I am the cred	litor's attorney or authorized ag	ent.		
electronically, FRBP 5005(a)(2) authorizes courts	I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.				
to establish local rules specifying what a signature	l am a guara	ntor, surety, endorser, or other	codebtor. Bankruptcy Rule 3005.		
is. A person who files a	I understand that an authorized signature on this <i>Proof of Claim</i> 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.				
fraudulent claim could be fined up to \$500,000,	I have examined t	he information in this Proof of (Claim and have reasonable belief that	the information is true and correct.	
imprisoned for up to 5 years, or both.	I declare under pe	nalty of perjury that the foregoi	ng is true and correct.		
18 U.S.C. §§ 152, 157, and 3571.	Executed on date	11/15/2022 MM / DD / YYYY			
	<u>/s/Gabriel G</u> Signature	Martinez			
	Print the name of	f the person who is completi	ng and signing this claim:		
	Name	<u>Gabriel G Martinez</u> Firstname	Middle name Las	st name	
	Title	Owner			
	Company		II, A Professional Dental e company if the au horized agent is a service		

Address

Contact phone

Email

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

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Additional Supporting Documents Received on 11/23/2022

RECEIVEN

NOV 2 3 2022

KURTZMENCARSONCOASUZTANTS



Case 22-02384-LT11 Filed 12/05/24 Entered 12/05/24 13:46:06 Doc 1502 Pg. 12 of 17

Your claim can be filed electronically on KCC's website at https://epoc.kcclic.net/BorregoHealth.

ID: 25777630

PIN: 0rcE6fru

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	
Official Form 410	claim. If you believe that you have a claim against the Debtor, please complete and return this form	
Proof of Claim	accordingly.	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.

P	art 1: Ider	tify the Clain	n .	NameID: 15089594
1.	Who is the creditor?	e current	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	
2.	Has this cl acquired f someone (rom	Ves. From whom?	
3.	Where sho notices an payments creditor be	d to the	Where should notices to the creditor be sent?Whe differGabriel MartinezDEFERRE1549 E Holt AveDEFERREPomona, CA 91767Name	·
	Federal Ru Bankruptcy (FRBP) 200	Procedure		er Street State ZIP Code
	ć	Pit 6-		ry ct phone ct email
4.	Does this amend one filed?		No Yes. Claim number on court claims registry (if known)	Filed on
5.		e has filed claim for	Ves. Who made the earlier filing?	
C)fficial Form	410	Proof of Claim	

page 1

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Do you have any numb	r 🔀 No
you use to identify the debtor?	Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:
How much is the claim	
	$ \underbrace{ 0 0 0 0 }_{\text{O}} $. Does this amount include interest or other charges?
Dover la rad contratad	\$ 0 0 0 0 Does this amount include interest or other charges? Image: Source of the set of the s
what is the basis of the	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.
claim?	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
·····	
is all or part of the claim	
secured?	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
RECENTED	has been filed or recorded.)
O READER D C. CT.	
NOV 2 3 207	Value of property: \$
	Amount of the claim that is secured: \$
KURTZHEHCARSONCONS	Amount of the claim that is unsecured: \$(The sum of the secured and unsecured amount should match the amount in line amount should match the amount should match the amount in line amount should match the amount should m
	Amount necessary to cure any default as of the date of the petition: \$
	Annual Interest Rate (when case was filed)%
	Variable
0. Is this claim based on a	X No
lease?	Yes, Amount necessary to cure any default as of the date of the petition.
1. Is this claim subject to a	No
right of setoff?	Yes. Identify the property:

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12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?		Amount entitled to priority
······································	Yes. Check all that apply:	······
A claim may be partly priority and partly nonpriority. For example,	Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).	\$
in some categories, the law limits the amount	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).	\$
entitled to priority.	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).	s
	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 receindays before the date of commencement of the above case, in which the goods is the ordinary course of such Debtor's business. Attach documentation supporting \$	ived by the debtor within 20 nave been sold to the Debtor in
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 <i>Proof of Claim</i> serves as an acknowledg the amount of the claim, the creditor gave the debtor credit for any payments received tow. I have examined the information in this <i>Proof of Claim</i> and have reasonable belief that the I declare under penalty of perjury that the foregoing is true and correct. Executed on date I B 2021 MM / DD / MW Signature GAMM MAM Print the name of the person who is completing and signing this claim: Name GA&MM	ard the debt.
	Title CANADA	
	Company LAXIN MMMM DUVEN	
WEBENNE!!!		
NOV 2 3 2022	Address Number Street	
KURTZBERCARSON CENSULTAN	City State ZIP Code	3 Country

Proof of Claim page 3 2202384221019011923006547

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3772686	11/	16/2020 D1999,D2331	Pending Payment	\$	155.00
3772693	11/	16/2020 D1330,D0210,D0120,0	Pending Payment	\$	140.00
3772698	11/	16/2020 D4910,D1330,D1999	Pending Payment	\$	145.00
3772704	11/	16/2020 D1999,D2393	Pending Payment	\$	155.00
377270	11/	16/2020 D5003.1,D5003.1	Pending Payment	\$	-
3772714	11/	16/2020 D4341,D4341,D1999	Pending Payment	\$	145.00
3772717	11/	30/2020-09430,00220,00230	Pending Payment	\$	200.00
3772728	11/	16/2020 D1999,D2391	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
3784288	11/	19/2020 D2751,D0270	Pending Payment	Ş	475.00
3784308	11/	19/2020 D9430,DD220	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 D0130,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,D2391	Pending Payment	\$	155.00
3784445	11/	19/2020 D1999,D2392	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	5	110.00
3784500	11/	19/2020 D9430,D0220	Pending Payment	\$	100.00
3784516	11/	19/2020 D1110,D1330	Pending Payment	\$	110.00
3784522	11/	19/2020 D0220,D2751	Pending Payment	\$	475.00
3784526	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,D2393	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
3784636	11/	19/2020 D7140	Pending Payment	\$	120.00
3803293	11/	B0/2020 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	Ś	-
3814490	12/	14/2020 D2751,D0220	Pending Payment	s	475.00

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