Case 22-02384-LT11 Filed 12/17/24 Entered 12/17/ CSD 1001A [07/01/18](Page 1) Name, Address, Telephone No. & I.D. No.	/24 10:47:02 Doc 1521 Pg. 1 of Docket #1521 Date Filed: 12/17/2024
Name, Address, Telephone No. & I.D. No. Samuel R. Maizel (Bar No. 189301) Tania M. Moyron (Bar No. 235736) DENTONS US LLP 601 South Figueroa Street, Suite 2500 Los Angeles, CA 90017-5704 Telephone: 213/623-9300 Attorneys for Post-Effective Date Debtor and the Co-Liquidating Trustee Jeffrey N. Pomerantz (Bar No. 143717)	Order Entered on December 17, 2024 by Clerk U.S. Bankruptcy Court Southern District of California
Steven W. Golden (Admitted Pro Hac Vice) PACHULSKI STANG ZIEHL & JONES LLP 10100 Santa Monica Blvd., 13th Floor Los Angeles, CA 90067 Telephone: 310/277-6910	
Attorneys for the Co-Liquidating Trustee	
UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF CALIFORNIA 325 West F Street, San Diego, California 92101-6991	
In Re BORREGO COMMUNITY HEALTH FOUNDATION,	BANKRUPTCY NO. 22-02384-LT11
Debtor.	

#### **ORDER ON**

#### STIPULATION BY AND AMONG THE POST-EFFECTIVE DATE DEBTOR, THE LIQUIDATING TRUSTEE, THE CO-LIQUIDATING TRUSTEES AND SURAJ SHARMA/VM DENTAL REGARDING CLAIM NO. 73

The court orders as set forth on the continuation pages attached and numbered 2 through 2 with exhibits, if any, for a total of 23 pages. Stipulation Docket Entry No. 1517.

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DATED: December 17, 2024

Judge, United States Bankruptcy Court



## Case 22-02384-LT11 Filed 12/17/24 Entered 12/17/24 10:47:02 Doc 1521 Pg. 2 of CSD 1001A [07/01/18](Page 2) 23 ORDER ON STIPULATION BY AND AMONG SURAJ SHARMA/VM DENTAL REGARDING CLAIM NO. 73

#### DEBTOR: BORREGO COMMUNITY HEALTH FOUNDATION

CASE NO: 22-02384-LT11

On December 16, 2024, Borrego Community Health Foundation (the Post-Effective Date Debtor), The Liquidating Trustee, the Co-Liquidating Trustees and Suraj Sharma/VM Dental filed a *Stipulation By and Among the Post-Effective Date Debtor, The Liquidating Trustee, The Co-Liquidating Trustees And Suraj Sharma/VM Dental Regarding Claim No. 73* [Docket No. 1517] (the "Stipulation").

#### IT IS HEREBY ORDERED:

1. That the Stipulation, attached hereto as **Exhibit 1**, is approved in its entirety.

2. That the terms and conditions of the Stipulation shall be binding upon the parties and are hereby fully incorporated into this Order by this reference.



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# **EXHIBIT 1**

Case	22-02384-LT11	Filed 12/10/24	Entered 20	12/18/24	10:46:02	Doc 1521	Pg. 4 of
1 2 3 4 5 6 7 8 9 10 11 12 13 14	samuel.maizel( TANIA M. MC tania.moyron(a) DENTONS US 601 South Figu Los Angeles, C Telephone: 21 Facsimile: 21 Attorneys for th Debtor and the Jeffrey N. Pom Steven W. Gol PACHULSKI 10100 Santa M Los Angeles, C Telephone: 310 Facsimile: 310 Email: jpomera sgolden(a)pszjl	DYRON (Bar No dentons.com LLP leroa Street, Sui California 90017 3 623-9300 3 623-9300 3 623-9924 he Post-Effectiv Co-Liquidating lerantz (Bar No. den (Admitted F STANG ZIEHL conica Blvd., 13 CA 90067 0-277-6910 -201-0760 antz@pszjlaw.co aw.com he Co-Liquidati UNITED ST	<ul> <li>b. 235730</li> <li>te 2500</li> <li>-5704</li> <li>e Date</li> <li>Trustee</li> <li>143717)</li> <li>Pro Hac V</li> <li>&amp; JONE</li> <li>th Floor</li> <li>om</li> <li>ng Trustee</li> </ul>	5) ZS LLP Se BANKRU			
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18	HEALTH FOU	JNDATION,	Ju	dge: Hon	orable La	ura S. Taylo	or
19	Debtor a Possessie	nd Debtor in on.				AND AM	
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DENTONS US LLP 601 South Figueroa STREET, Suite 2500 Los ANGELES, California 90017-5704 (213) 623-9300

### Case 22-02384-LT11 Filed 12/10/24 Entered 12/10/24 10:40:02 Doc 1521 Pg. 8 of 20

1 Borrego Community Health Foundation, the debtor and debtor in possession 2 (prior to the effective date of the Plan (defined below), the "Debtor," and after the 3 effective date, the "Post-Effective Date Debtor") in the above-captioned chapter 11 4 5 bankruptcy case, the Liquidating Trustee (the "Liquidating Trustee") of the Borrego 6 Community Health Foundation Liquidating Trust (the "Liquidating Trust"), the Co-7 Liquidating Trustees of the Liquidating Trust (the "Co-Liquidating Trustees") and 8 9 Suraj Sharma/VM Dental (the "Claimant", and collectively with the Post-Effective 10 Date Debtor, the Liquidating Trustee, and the Co-Liquidating Trustees, the 11 "Parties") hereby enter into this Stipulation By and Among the Post-Effective Date 12 13 Debtor, the Liquidating Trustee, the Co-Liquidating Trustees and Suraj 14 Sharma/VM Dental Regarding Claim No. 73. 15

#### **RECITALS**

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

WHEREAS, on or about November 9, 2022, Claimant filed Proof of Claim
No. 73 in the amount of \$27,800.00 ("<u>Claim 73</u>"), a copy of which is attached
hereto as **Exhibit A**;

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

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

WHEREAS, the Post-Effective Date Debtor has reviewed its books and
records and believes that Claim 73 relates to dental services performed by the
Claimant on behalf of the Debtor; and

WHEREAS, after the Post-Effective Date Debtor's professionals reviewed Claim 73, the Parties have agreed to resolve any issues regarding Claim 73 as set forth herein.

#### **STIPULATION**

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

1. Claim 73 shall be reduced and allowed as a general unsecured claim in the amount of \$10,000.00 (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 tothe Plan.

In consideration of the agreements with and value provided herein and 3. 16 other good and valuable consideration, the Parties hereby waive, remise, release 17 and forever discharge the other, including each of their respective former and 18 current predecessors, successors, assigns, affiliates, subsidiaries, parent companies, 19 officers, 20 shareholders, partners, members, managers, investors directors, accountants, attorneys, employees, agents, representatives and servants of, from and 21 against any and all claims, actions, causes of action, suits, proceedings, defenses, 22 counterclaims, contracts, judgments, damages, accounts, reckonings, executions, 23 and liabilities whatsoever of every name and nature, whether known or unknown, 24 whether or not well-founded in fact or in law, and whether in law, at equity or 25 otherwise, which either Party ever had or now has for or by reason of any matter, 26 cause or anything whatsoever to this date relating to or arising out of the Parties' 27 prior business relationship, or the Chapter 11 Case. 28

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#### Case 22-02384-LT11 Filed 12/16/24 Entered 12/16/24 10:46:02 Doc 1521 Pg. 4 of

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
 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]

6. The terms, covenants, conditions, and provisions of this Stipulation
 cannot be altered, changed, modified, or added to, or deleted from, except in a
 writing signed by all parties hereto.

7. This Stipulation may be executed in counterparts each of which shall
be deemed an original, but all of which together shall constitute one and the same.

8. The Court shall retain jurisdiction over all matters relating to the interpretation and enforcement of this Stipulation.

Dated: December 12, 2024 DENTONS US LLP 9 SAMUEL R. MAIZEL TANIA M. MOYRON 10 11 By /s/ Tania M. Moyron Tania M. Moyron 12 Attorneys for the Post-Effective Date 13 Debtor and the Co-Liquidating Trustee 14 Dated: December 12, 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 12 15, 2024 20 21 By Suraj Sharma 22 VM Dental 23 24 By 25 Suraj Sharma PRESIDENT Its: 26 27 28 4862-2741-0430.1 10283.00003 5

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# **EXHIBIT** A

Fill in this info	ormation to identify the case:		
Debtor	Borrego Community Hea	1th Foundation	
United States Ba	Inkruptcy Court for the: Southerr	District of California	r.
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 Clain	
1.	Who is the current creditor?	Suraj Sharma/VM DENTAL         Name of the current creditor (the person or entity to be paid for this claim)         Other names the creditor used with the debtor       Premier Health
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)         Suraj Sharma/VM DENTAL       5515 Van Buren Blvd         Riverside, CA 92503, United States       Contact phone         Ontact phone       9515348889         Contact email       partha7588@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?
(	Official Form 410	Proof of Claim 2202384221019011833000412

page 1 Signed by Judge Laura Stuart Taylor December 17, 2024

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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?	<ul> <li>\$ 27,800</li> <li>Does this amount include interest or other charges?</li> <li>No</li> <li>Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Resluments; Eule 2004(a)(2)(4)</li> </ul>
8.	What is the basis of the claim?	charges required by Bankruptcy Rule 3001(c)(2)(A).         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 performed by Dental Clinic
9.	Is all or part of the claim secured?	<ul> <li>No</li> <li>Yes. The claim is secured by a lien on property.</li> <li>Nature or property:         <ul> <li>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.</li> <li>Motor vehicle</li> <li>Other. Describe:</li> </ul> </li> <li>Basis for perfection:         <ul> <li>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.)</li> </ul> </li> <li>Value of property:         <ul> <li>\$</li></ul></li></ul>
10	Is this claim based on a lease?	Amount necessary to cure any default as of the date of the petition:  Amnual Interest Rate (when case was filed)% Fixed Variable 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		No	
	entitled to priority under 11 U.S.C. § 507(a)?		Yes. Check all that apply:	Amount entitled to priority
	A claim may be partly priority and partly		Domestic support obligations (including alimony and child support) under $11 \text{ U.S.C. }$ 507(a)(1)(A) or (a)(1)(B).	\$
	nonpriority. For example, 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).	\$
			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	$\square$	No	
	pursuant to 11 U.S.C. § 503(b)(9)?		Yes. Indicate the amount of your claim arising from the value of any goods rece days before the date of commencement of the above case, in which the goods the ordinary course of such Debtor's business. Attach documentation supportin	have been sold to the Debtor in
			\$	

# Part 3: Sign Below The person completing this proof of claim must sign and date it Check the appropriate box:

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	I am the trust I am a guaran I understand that a the amount of the I have examined the I declare under pe	litor's attorney or authorized an tee, or the debtor, or their auth ntor, surety, endorser, or other an authorized signature on this claim, the creditor gave the de the information in this <i>Proof of</i> analty of perjury that the forego	orized agent. Bankruptcy F r codebtor. Bankruptcy Ruk <i>Proof of Claim</i> serves as a btor credit for any payment <i>Claim</i> and have reasonable	e 3005. an acknowledgement that when calculat	5
3571.		RMA / DD / YYYY RMA	ing and signing this claim		
	Name Title Company Address	SURAJ SHARMA First name OWNER WM_Denta Wentify the corporate servicer as t	Middle name he company if the au horized ag		_
	Contact phone	-		Email	_

## Case 22-02384-LT11 Filed 12/16/24 Entered 12/16/24 10:46:02 Doc 1521 Pg. 10 of 20

Debtor:	
22-02384 - Borrego Community Health Foundati	ion
District:	
Southern District of California, San Diego Divisio	n
Creditor:	Has Supporting Documentation:
Suraj Sharma/VM DENTAL	Yes, supporting documentation successfully uploaded
5515 Van Buren Blvd	Related Document Statement:
Riverside, CA, 92503	Has Related Claim:
United States	No
Phone:	Related Claim Filed By:
9515348889	Filing Party:
Phone 2:	Creditor
9513525838	
Fax:	
Email:	
partha7588@gmail.com	
Other Names Used with Debtor:	Amends Claim:
Premier Health	No
	Acquired Claim:
	No
Basis of Claim:	Last 4 Digits: Uniform Claim Identifier:
services performed by Dental Clinic	No
Total Amount of Claim:	Includes Interest or Charges:
27,800	No
Has Priority Claim:	Priority Under:
No	
Has Secured Claim:	Nature of Secured Amount:
No	Value of Property:
Amount of 503(b)(9):	Annual Interest Rate:
No	Arrearage Amount:
Based on Lease:	-
No	Basis for Perfection:
Subject to Right of Setoff:	Amount Unsecured:
No	
Submitted By:	
SURAJ SHARMA on 09-Nov-2022 3:32:40 p.m.	. Eastern 11me
Title:	
OWNER	
Company:	
VM Dental	

TIME 10:15 AM Case 22-		7 <b>527</b> 7 <b>527</b> 7 <b>527</b> 7 <b>527</b> 7 <b>527</b>	217/24 10:47:02	2 Doc 1521	Pg. 14 11/8/2022
Approx: 27	600 OUTSTANDI	NG CLAIMS BY AG outstanding for 90 da	ING CATEGORY		J. J
<u> </u>		All insurance compar All providers	nies		
Insurance Patient Company ID / Name	Birth		Date # Days Tol		Amt Daid Status
Borrego (619)444-5704	Date	Sec Of Service	Sent Out Subm	itted Est	Paid Status
Patient -					
Policy Holder -		1		50.00 \$0.00	\$0.00 Open
Employer			ID Policy Holder By: M	ember ID	
NEA Status: None					
Claim History:					
11/23/2020	Insurance Claim from November 20	), 2020 was Submitted t	o Prim. Insurance Compa	ny: Borrego	
Notes:					
Patient -					\$0.00 Open
Policy Holder -		1	10.0.00000 000 000 000 000	00.00 \$40.00	\$0.00 Open
Employer			ID Policy Holder By:		
NEA Status: None					
Claim History:					
11/23/2020	Insurance Claim from November 1	9, 2020 was Submitted t	o Prim. Insurance Compa	ny: Borrego	
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Patient -		4	1/23/2020 715 \$1,2	00.00 \$960.00	\$0.00 Open
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Employer			D Toney Holder By. In		
NEA Status: None					
Claim History:					
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Patient -		1	1/23/2020 715 \$5	66.00 \$452.80	\$0.00 Open
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Employe					-
NEA Status: None					
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Employe					
NEA Status: None					
Claim History: 11/23/2020	Insurance Claim from November 1	1 2020 was Submitted t	o Prim. Insurance Compa	nv: Borrego	
				,	
Notes:				40.00 0450 50	
Patient		1		13.00 \$156.50	\$0.00 Open
Policy Holder			ID Policy Holder By: M		
NEA Status: None Claim History:					
11/23/2020	Insurance Claim from November 1	1, 2020 was Submitted t	o Prim. Insurance Compa	ny: Borrego	
Notes:					
			1/23/2020 715 \$7	92.00 \$633.60	\$0.00 Open
Patient Roligy Holder			ID Policy Holder By: M	10.00	
Policy Holder Employe					
NEA Status: None					
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			Claims		All providers		;				
nsurance C <u>ompany</u>	Patient ID / Name			Prim/ Sec	Date Of Service	Date Sent		lotal omitted	Amt <u>Est</u>	Arnt Paid	Status
Borrego (619	9)444-5704										
Policy H E	mploy					11/23/2020 ID Policy	715 Holder By:	\$313.00 Member		\$0.00	Open
NEA Sta Claim His											
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	atus: None					•					
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P	atient -					11/18/2020	720	\$162.00	\$129.60	<u>\$0</u> .00	Open
Policy H	Holder -					ID Policy	Holder By:	Member	ID -		
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	tatus: None										
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	Patient -					11/18/2020	720	\$0.00	\$0.00	\$0.00	Open
Policy	Holder - Employe						y Holder By	: Membe	er ID -		
	itatus: None										
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	11/18/2020	Insurance Cla	im from November 1	8, 2020	) was Submitt	ed to Prim. Ins	urance Con	npany: B	orrego		
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1	Patient -					11/18/2020	720	\$0.00	\$0.00	\$0.00	Open
	Holder - Employe					ID Polic	y Holder By	: Membe	er ID -		
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		Insurance Cla	m from November 1	8, 2020	) was Submitt	ed to Prim. Ins	urance Con	npany: B	orrego		
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		14	laims outst	LAIMS BY A anding for 90 surance comp All providers	days or more panies				
Insurance Patient Company ID / Name		-	irth Prim/ late Sec	Date Of Service	Date <u>Sent</u>		Total bmitted	Amt <u>Est</u>	Amt Paid Status
Borrego (619)444-5704									
Patient -					11/23/2020	715	\$313.00	\$156.50	\$0.00 Open
Policy Holder -					ID Policy	y Holder By	: Member	ID -	
Employe									
NEA Status: None Claim History:									
11/23/2020	Insurance Claim	from Novemb	per 17, 2020	was Submitte	d to Prim. Insi	urance Con	npany: Bor	тедо	
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Patient -					11/18/2020	720	\$0.00	\$0.00	\$0.00 Open
Policy Holder -						y Holder By			
Employe									
NEA Status: None									
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Patient - Policy Holder -					11/18/2020	720 y Holder By	\$162.00 Member	\$129.60	\$0.00 Open
Employe					10 1 0110	, 1101001 07			
NEA Status: None									
Claim History:					the latest stat				
11/18/2020	Insurance Claim	from Novemb	per 19, 2020	was Submitte	d to Prim. Insi	urance Con	npany: Bor	rrego	
Notes:									
Patient -					11/18/2020	720	\$150.00	\$150.00	\$0.00 Open
Policy Holder - Employe						y Holder By	. Member		
NEA Status: None									
Claim History:									
11/18/2020	Insurance Claim	from Novemb	per 19, 2020	was Submitte	d to Prim. Ins	urance Con	npany: Boi	rrego	
Notes:									
Patient					11/18/2020	720	\$150.00	\$0.00	\$0.00 Open
Policy Holder					ID Policy	y Holder By	: Member	ID -	
Employe NEA Status: None									
Claim History:									
11/18/2020	Insurance Claim	from Novemb	er 18, 2020	was Submitte	d to Prim. Ins	urance Con	npany: Bo	rrego	
Notes:									
Patient -					11/18/2020	720	\$0.00	\$0.00	\$0.00 Open
Policy Holder -					ID Policy	y Holder By	: Member	ID -	
Employe NEA Status: None									
Claim History:									
11/18/2020	Insurance Claim	from Novemb	er 18, 2020	was Submitte	d to Prim. Ins	urance Con	npany: Bo	rrego	
Notes:									
Patient -					11/18/2020	720	\$0.00	\$0.00	\$0.00 Open
Policy Holder -					research and street	y Holder By			
Employe									
NEA Status: None									
Claim History: 11/18/2020	Insurance Claim	from Novemb	er 18, 2020	was Submitte	to Prim. Insi	urance Con	npany: Bo	rrego	
Notes									

IME 10:15 AM	02384-LT11 Filed 12/17/24 Entered 12/17/24 10:47:02 Doc 1521 Pg. 17 Suraj Pal Sfazita, D.D.S.
	OUTSTANDING CLAIMS BY AGING CATEGORY
	Claims outstanding for 90 days or more All insurance companie <del>s</del> All providers
surance Patient company ID / Name	Birth Prim/ Date Date # Days Total Amt Amt Date Sec Of Service Sent Out Submitted Est Paid Status
orrego (619)444-5704	
Patient - Policy Holder - Employe	11/17/2020 721 \$0.00 \$0.00 \$0.00 Open ID Policy Holder By: Member ID -
NEA Status: None Claim History:	
11/17/2020	Insurance Claim from November 17, 2020 was Submitted to Prim. Insurance Company: Borrego
Notes:	
Patient -	11/17/2020 721 \$300.00 \$150.00 \$0.00 Open
Policy Holder -	ID Policy Holder By: Member ID -
Employe	
NEA Status: None Claim History:	
11/17/2020	Insurance Claim from November 18, 2020 was Submitted to Prim. Insurance Company: Borrego
Notes:	
Patient -	11/17/2020 721 \$956.00 \$478.00 \$0.00 Open
Policy Holder -	ID Policy Holder By: Member ID
Employe	
NEA Status: None	
Claim History: 11/17/2020	Insurance Claim from November 17, 2020 was Submitted to Prim. Insurance Company: Borrego
Notes:	
	11/17/2020 721 \$313.00 \$156.50 \$0.00 Open
Patient - Policy Holder -	11/17/2020 721 \$313.00 \$156.50 \$0.00 Open ID Policy Holder By: Member ID -
Employe	
NEA Status: None	
Claim History:	Laurence Claim from Ortober 14, 2020 une Submitted to Dam. Incurrence Company, Barran
Claim History: 11/17/2020	) Insurance Claim from October 14, 2020 was Submitted to Prim. Insurance Company: Borrego
Claim History:	
Claim History: 11/17/2020 Notes: Patient -	11/16/2020 722 \$1,200.00 \$0.00 \$0.00 Open
Claim History: 11/17/2020 Notes: Patient - Policy Holder -	
Claim History: 11/17/2020 Notes: Patient -	11/16/2020 722 \$1,200.00 \$0.00 \$0.00 Open
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe	11/16/2020 722 \$1,200.00 \$0.00 \$0.00 Open
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None	11/16/2020 722 \$1,200.00 \$0.00 \$0.00 Open ID Policy Holder By: Member ID
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020	11/16/2020 722 \$1,200.00 \$0.00 \$0.00 Open ID Policy Holder By: Member ID
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020	11/16/2020 722 \$1,200.00 \$0.00 \$0.00 Open ID Policy Holder By: Member ID
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes: Patient - Policy Holder -	11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open ID Policy Holder By: Member ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes: Patient - Policy Holder - Employe	11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         ID Policy Holder By: Member ID       Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego         11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes: Patient - Policy Holder - Employe NEA Status: None	11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         ID Policy Holder By: Member ID       Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego         11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History:	11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         ID Policy Holder By: Member ID       Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego         11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020	11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open ID Policy Holder By: Member ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego       11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego       11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open ID
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Netes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020	11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open ID Policy Holder By: Member ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego       11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego       11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego       Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes.	11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open ID Policy Holder By: Member ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego       11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego       11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego       Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes: Patient	11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         ID Policcy Holder By: Member ID       ID       ID       ID       ID       ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego       11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         ID Policy Holder By: Member ID       ID       ID       ID       ID       ID       ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego       ID       ID
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes. Patient Policy Holder Employe NEA Status None	11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         ID Policy Holder By: Member ID       ID       ID       ID       ID       ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego       11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego       Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego       Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego         11/16/2020       722       \$296.00       \$0.00       \$0.00       \$0.00       \$0.00       Open
Claim History: 11/17/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes: Patient - Policy Holder - Employe NEA Status: None Claim History: 11/16/2020 Notes. Patient Patient Patient Employe	11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         ID Policy Holder By: Member ID       ID       ID       ID       ID       ID         Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company. Borrego       11/16/2020       722       \$1,200.00       \$0.00       \$0.00       Open         ID Policy Holder By: Member ID       ID </td

Case 22-02 TIME 10:15 AM	2384-LT11	Filed 12/1 <sup>-</sup>	7/24	Entered Pal Sharcha, I	12/17/2	4 10:47:	02 C	Doc 1521		18 TE 11/8/2022
		OUTSTANDII Claims	a outsta All ins	AIMS BY A anding for 90 surance comp All providers	days or more panies					
Insurance Patient Company ID / Name		Birth		Date			otal	Amt	Amt	Status
<u>Company ID / Name</u> Borrego (619)444-5704		Date	Sec	Of Service	Sent	Out Sub	mitted	Est	raid	<u>Otatus</u>
Patient -					11/17/2020	721	\$0.00	\$0.00	\$0.00	Open
Policy Holder -					•	y Holder By:				
Employe										
NEA Status: None Claim History:										
	Insurance Claim	from November 1	7, 2020	was Submitte	d to Prim. Ins	urance Com	oany: Bor	тедо		
Notes:				7						
Patient -					11/17/2020	721	\$300.00	\$150.00	<u>\$</u> 0.00	Open
Policy Holder -						y Holder By:	Member	ID		
Employ										
NEA Status: None Claim History:										
11/17/2020	Insurance Claim	from November 1	8, 2020	) was Submitte	d to Prim. Ins	urance Com	pany: Bo	педо		
Notes:										
Patient -					11/17/2020		\$956.00	\$478.00	\$0.00	Open
Policy Holder -					ID Polic	y Holder By:	Member	ID ·		
Employe NEA Status: None										
Claim History:										
11/17/2020	Insurance Claim	from November 1	7, 2020	) was Submitte	ed to Prim. Ins	surance Com	pany: Bo	rrego		
Notes:										
Patient - Policy Holder -					11/17/2020	721 by Holder By:	\$313.00 Member	\$156.50	<u>\$0</u> .00	Open
Employe						cy nonaci by.	Montes			
NEA Status: None										
Claim History: 11/17/2020	Insurance Claim	from October 14,	2020 4	use Submitted	to Prim Incu		anu: Borr	200		
			2020				iny. Dom	sgo		
Notes: Patient -					11/16/2020	722 \$	1.200.00	\$0.00	\$0.00	Open
Policy Holder -						cy Holder By			0.00	Open
Employe										
NEA Status: None										
Claim History: 11/16/2020	Insurance Claim	from November	16, 2020	0 was Submitt	ed to Prim. In	surance Con	npany: Be	orrego		
Notes:								•		
Patient -					11/16/2020	) 722 \$	51,200.00	\$0.00	\$0.00	) Open
Policy Holder -					ID Poli	cy Holder By	: Membe	r ID -		
Employe										
NEA Status: None Claim History:										
11/16/2020	Insurance Claim	from November	16, 202	0 was Submitt	ed to Prim. In	surance Cor	npany: B	orrego		
Notes										
Patient -					11/16/2020	0 722	\$296.00	\$0.00	\$0.0	0 Open
Policy Holder -					ID Pol	icy Holder By	: Membe	er ID		
Employe NEA Status: None									-	
Claim History:										
11/16/2020	Insurance Claim	n from November	12, 202	0 was Submit	ed to Prim. Ir	surance Cor	mpany: B	orrego		
Notes:										

			Case 22-02384-LT11	Filed 12/16/24 Entered 12/16/24 1	1:16:23 Doc 1517 Pg. 16				
TIME 10:15 AM ase 22-0	)2384-LT11	Filed 12/2				4 10:4	47:02	Doc 1521	PgATE911/8/20
		OUTSTAN				FEGO	RY		
			ms outst	anding for 90	days or more				
			All in:	surance com All provider					
				•			Tetal	Amt	Amt
Insurance Patient Company <u>ID / Name</u>		Birt Dat	h Prim/ e Sec	Date Of Service	Sent	# Days Out	; Total <u>Submitter</u>	-	Paid Status
Borrego (619)444-5704		Dat	000	OT OCIVICE	<u></u>	001	<u>o dominica</u>		
Patient -					11/16/2020	722	\$296.0	0 \$2 <u>35.90</u>	<u>\$0.00</u> Open
Policy Holder -							r By: Memb	1000	
Employ									
NEA Status: None									
Claim History: 11/16/2020	Incurses Claim	from Neurombou	44 2020	was Submitte	d to Drime Inc.		Componer	00000	
	Insurance Claim	i from November	11, 2020	was Submitte	ed to Prim. Inst	Jrance (	Company. c	sonego	
Notes:							0050.0	0 0170 00	\$0.00 Open
Patient -					11/11/2020	727	\$956.0 • Bu: Momb		SU.UU Open
Policy Holder Employe						rioluei	r By: Memb		
NEA Status: None									
Claim History:									
11/11/2020	Insurance Clain	n from November	r 13, 2020	was Submitte	ed to Prim. Ins	urance	Company: E	Borrego	
Notes:									
Patient					11/11/2020	727	\$956.0		\$0.00 Open
Policy Holder					ID Polic	y Holde	r By: Memb	er ID	
NEA Status: None Claim History:									
11/11/2020	Insurance Clain	n from November	r 11, 2020	was Submitte	ed to Prim. Insi	urance (	Company: E	Borrego	
Notes:									
Patient -					11/13/2020	725	\$956.0	0 \$478.00	\$0.00 Open
Policy Holder -					ID Polic	y Holde	r By: Memb	er ID	
Employe									
NEA Status: None Claim History:									
	Insurance Claim	from November	13, 2020	was Submitte	ed to Prim. Ins	urance	Company: I	Borrego	
Notes:									
Patient -					11/13/2020	725	\$956.0	0 \$478.00	\$0.00 Open
Policy Holder -					127 - 212 December 217 Dec		r By: Memb		
Employe									
NEA Status: None									
Claim History:	Insurance Claim	for an Managehou	46 2020	was Submitte	od to Drim Jos		Company	Porroad	
	Insurance Claim	I from November	10, 2020	Was Submitte		ulance	Company.	Bonego	
Notes:									
Patient -					11/13/2020	725 v Holdo	\$956.0		\$0.00 Open
Policy Holder -						y noide	r By: Memt		
Employe NEA Status: None									
Claim History:									
11/13/2020	Insurance Claim	from November	13, 2020	was Submitte	ed to Prim. Ins	urance	Company:	Borrego	
Notes:									
Patient -					11/17/2020	721	\$956.0	00 \$478.00	\$0.00 Open
Policy Holder -					ID Polic	y Holde	r By: Memt	per ID	
Employe									
NEA Status None Claim History:									
	Insurance Claim	from November	13, 2020	was Submitte	ed to Prim. Ins	urance	Company:	Borrego	
Notes									

TIME 10:15 ANCase 22-02		DATE 11/8/2022
	OUTSTANDING CLAIMS BY AGING CATEGORY	
	Claims outstanding for 90 days or more	
	All insurance companies All providers	
Insurance Patient Company ID / Name	Difui Filin Date Date # Days Total	mt aid Status
Borrego (619)444-5704		
Patient -	11/17/2020 721 \$150.00 <u>\$0.00</u> \$0	00 Open
Policy Holder -	ID Policy Holder By: Member ID -	
Employe		
NEA Status: None Claim History:		
11/17/2020	Insurance Claim from November 17, 2020 was Submitted to Prim. Insurance Company: Borrego	
Notes:		
Patient -	11/17/2020 721 \$0.00 \$0.00 \$0	.00 Open
Policy Holder -	ID Policy Holder By: Member ID	er epon
Employe		
NEA Status: None		
Claim History:		
11/17/2020	Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego	
Notes:		
Patient -		.00 Open
Policy Holder -	ID Policy Holder By: Member ID -	
Employe		
NEA Status: None Claim History:		
	Insurance Claim from November 13, 2020 was Submitted to Prim. Insurance Company: Borrego	
Notes:		
Patient -	11/13/2020 725 \$324.00 \$0.00 \$0	.00 Open
Policy Holder -	ID Policy Holder By: Member ID	
Employe		
NEA Status: None		
Claim History:		
11/13/2020	Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego	
Notes:		
Patient -		.00 Open
Policy Holder -	ID Policy Holder By: Member ID	
Employe NEA Status: None		
Claim History:		
	Insurance Claim from November 13, 2020 was Submitted to Prim. Insurance Company: Borrego	
Notes:		
Patient -	11/13/2020 725 \$0.00 \$0.00 \$0	0.00 Open
Policy Holder -	ID Policy Holder By: Member ID	
Employe		I
NEA Status: None		
Claim History:		
	Insurance Claim from November 13, 2020 was Submitted to Prim. Insurance Company: Borrego	
Notes		
Patient -		0.00 Open
Policy Holder -	ID Policy Holder By: Member ID -	
Employe NEA Status: None		
Claim History:		
1. State of the	Insurance Claim from November 16, 2020 was Submitted to Prim. Insurance Company: Borrego	
Notes		

TIME 10:15 A	MCase 22-0	2384-LT11	Filed 12/		Pal Shatena		4 10:47:02	Do	c 1521	Pg	TE 11/8/202
			OUTSTAND		of 23		FCORY			Ŭ	
						days or more					
				All in	surance com All provider						
Insurance	Patient			Prim/	Date		# Days Total		Amt Est	Amt Paid	Status
Company Borrego (619	<u>ID / Name</u> 9)444-5704		Date	Sec	Of Service	Sent	Out Submit	<u>.eo</u>	ESL	<u>i ala</u>	ound
-	atient -					11/13/2020	725 \$31	3.00 \$ <sup>r</sup>	156.50	\$0.00	Open
Policy H							/ Holder By: Mer		150.50		
	mploye										
	atus: None										
Claim Hi								_			
Netze	11/13/2020	Insurance Claim	from November	13, 2020	) was Submitte	ed to Prim. Insi	urance Company	/: Волед	0		
Notes:						-					
	atient					11/17/2020			156.50	\$0.00	Open
Policy H	mploy					ID Policy	y Holder By: Mei	nber ID -			
	atus: None										
Claim Hi											
	11/17/2020	Insurance Claim	from November	12, 2020	0 was Submitt	ed to Prim. Ins	urance Company	y: Borreg	0		
Notes:											
P	Patient -					11/17/2020	721 \$1,20	0.00 \$	960.00	\$0.00	Open
Policy H						ID Polic	y Holder By: Me	mber ID	-		
	mploye										
Claim Hi	atus: None										
	11/17/2020	Insurance Claim	from November	12, 2020	0 was Submitt	ed to Prim. Ins	urance Compan	у: Воггес	jo		
Notes:											
 P	atient					11/10/2020	728 \$	0.00	\$0.00	\$0.00	Open
Policy H	Holder					ID Polic	y Holder By: Me	mber ID	-		•
E	Employ										
	tatus: None										
Claim Hi	11/10/2020	Insurance Claim	from November	11, 2020	0 was Submitt	ed to Prim Ins	urance Compan	v: Borrec	10		
Notes:	11/10/2020			, =•=.					,•		
						11/10/2020	700 \$00	0.00 4	172.00	00.00	0
⊦ Policy P	Patient _ Holder					and the second of the state of the	728 \$29 by Holder By: Me		172.00	\$0.00	Open
							,				
	tatus: None										
Claim H											
	11/10/2020	Insurance Claim	from November	10, 202	0 was Submit	ted to Prim. Ins	surance Compar	y: Borres	go		
Notes:										-	
	Patient					11/9/2020		0.00 \$1	· · · · · · · · · · · · · · · · · · ·	S(.00	Open
Policy I						ID Polic	y Holder By: Me	mber ID			
	Employ tatus: None										
Claim H											
	11/9/2020	Insurance Claim	from November	5, 2020	was Submitte	d to Prim. Insu	Irance Company	: Borreg	0		
Notes:											
F	Patient -					11/9/2020	729	\$0.00	\$0.00	\$1.00	Open
Policy I	Holder -					ID Polic	y Holder By: Me	mber ID			
	Employe										
	tatus: None										
Claim H	11/9/2020	Insurance Claim	from October 29	). 2020 v	was Submitter	to Prim Insur	ance Company	Borreon			
Notes							and a company.	20.090	2		

TIME 10:15	AMCase 22-0	02384-LT11	Filed 12	Case 22-02384-LT1	Palshare	2411:16:23 Doc: 1517 Pg. 19	4 10:47:02	2 Do	oc 1521	DA Pg	TE 11/8/2022 . <mark>22</mark>
						AGING CAT					
			Clai		tanding for 90 Isurance com All provider						
Insurance Company	Patient ID / Name		Birt Dat	h Prim/ e Sec	Date Of Service	Date Sent	# Days Tota Out Submi		Amt <u>Est</u>	Amt Paid	Status
Borrego (61											-
Policy I	and a second sec						y Holder By: Me			\$0.00	Open
N	11/9/2020	Insurance Claim	from October 1	5, 2020 v	vas Submitted	to Prim. Insura	ince Company:	Borrego			
Notes:											
Policy I NEA S	Patient - Holder - Employe Status: None					11/9/2020 ID Policy	729 \$ y Holder By: Me	60.00 ember ID	\$0.00	\$0.00	Open
Claim H	11/9/2020	Insurance Claim	from October 1	5 2020 v	vas Submitted	to Prim Insura	ance Company:	Воггеоо			
Notes:				0, 2020 1			nice company.	Donogo			
	Patient .					11/9/2020	729	60.00	\$0.00	\$0.00	Open
Policy	Holder . Employ						y Holder By: Me				- Peri
NEA S	tatus: None										
Claim H			6 O-t	0000	. Cubailtad	Dia lasura					
	11/9/2020	Insurance Claim	from October 6	, 2020 Wa	as Suomitted I	io Prim. Insurar	ice Company: i	sorrego			
Notes:											
Policy	Patient - Holder - Employ <sub>e</sub>					11/9/2020 ID Policy	729 y Holder By: Me	\$0.00 ember ID	<u>\$0.00</u> -	<u>\$(.</u> 00	Open
	Status: None										
Claim H											
	11/9/2020	Insurance Claim	from October 5	, 2020 wa	as Submitted (	to Prim. Insurar	nce Company: I	Borrego			
Notes.											
Policy	Patient . Holder . Employ					11/9/2020 ID Policy	729 \$1,2 y Holder By: Me	00.00 ember ID	\$40.00	\$0.00	Open
	Status: None										
	11/9/2020	Insurance Claim	from Novembe	r 3, 2020	was Submitte	d to Prim. Insu	rance Company	у: Волед	lo		
Notes:											
Policy	Patient - Holder -					11/5/2020 ID Polic	733 y Holder By: M	\$0.00 ember ID	\$0.00	\$0.00	Open
	Employ <sub>e</sub> Status: None										
Claim F											
	11/5/2020	Insurance Claim	from Novembe	r 5, 2020	was Submitte	d to Prim. Insu	rance Compan	y: Borreg	30		
Notes											
	Patient -					11/5/2020	733	\$0.00	\$0.00	\$0.00	Open
	Holder -					ID Polic	y Holder By: M	ember ID	) -		
	Employe										
Claim H	Status None History:										
	11/5/2020	Insurance Claim	from October 2	8, 2020 v	vas Submitted	to Prim. Insura	ance Company	Воледа	5		
Notes									*****		

TIME 10:15 AMCase 22-(	02384-LT11		L2/175/274	of 23	<b>d.1.38</b> /17/24 10		Doc 1521	PGT 231/8/2022
			Claims outs		) days or more panies	<u>KI</u>		
Insurance Patient		E	Birth Prim		Date # Days		Amt	Amt
Company ID / Name		Į	Date Sec	Of Service	Sent Out	Submitted	Est	Paid Status
Borrego (619)444-5704							<b>60 00</b>	50.00 Occa
Patient - Policy Holder -					11/5/2020 733 ID Policy Holde	\$0.00 Rv: Membe		\$0.00 Open
Employe						n by. membe		
NEA Status: None Claim History:								
11/5/2020	Insurance Claim	from Octobe	er 15, 2020 ·	was Submitted	to Prim. Insurance Co	ompany: Borr	ego	
Notes:								
Patient -					11/5/2020 733	\$0.00		\$0.00 Open
Policy Holder - Employe					ID Policy Holde	r By: Membe	r ID -	
NEA Status: None								
Claim History:								
11/5/2020	Insurance Claim	from Octobe	er 14, 2020	was Submitted	to Prim. Insurance Co	ompany: Borre	ego	
Notes:								
Patient -					11/5/2020 733	\$956.00		\$0.00 Open
Policy Holder -					ID Policy Holde	r By: Member	r ID -	
Employe NEA Status: None								
Claim History:								
11/5/2020	Insurance Claim	from Novem	nber 5, 2020	) was Submitte	d to Prim. Insurance (	Company: Bor	rego	
Notes:								
Patient -					11/6/2020 732	\$1,005.00	\$804.00	\$0.00 Open
Policy Holder -					ID Policy Holde	r By: Membe	r ID	
Employe NEA Status: None								
Claim History:								
11/6/2020	Insurance Claim	from Novem	nber 5, 2020	) was Submitte	d to Prim. Insurance (	Company: Bor	rego	
Notes:								
Patient -					11/4/2020 734	\$516.00	\$258.00	\$0.00 Open
Policy Holder -					ID Policy Holde	er By: Membe	r ID	
Employe								
NEA Status: None Claim History:								
11/4/2020	Insurance Claim	from Novem	nber 4, 2020	) was Submitte	d to Prim. Insurance (	Company: Bo	rrego	
Notes:								
Patient -					11/4/2020 734	\$300.00	\$150.00	\$0.00 Open
Policy Holder -					ID Policy Holde			
Employe								
NEA Status: None								
Claim History: 11/4/2020	Insurance Claim	from Octobe	er 28, 2020	was Submitted	to Prim. Insurance C	ompany: Borr	eao	
Notes						enipenij. Ben	090	
Patient					11/4/2020 734	\$1 843 00	\$1,343.00	\$465.00 Open
Policy Holder					ID Policy Holde			
Employe								
NEA Status: None					_			
Claim History:		from Mr.	her 4 0000	Luca Cubart	d to Drive Lances	Demana P		
11/4/2020 12/8/2020	Prim Pmt77502		and the second		d to Prim. Insurance (	Jompany: BO	ilego	
Notes								

## Case 22-02384-LT11 Filed 12/17/24 Entered 12/17/24 10:47:02 Doc 1521-1 Pg. 1 of 1

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