IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE

In re:

SC HEALTHCARE HOLDING, LLC, et al.,

Debtors.¹

Chapter 11

Case No. 24-10443 (TMH)

(Jointly Administered)

SCHEDULES OF ASSETS AND LIABILITIES FOR WESTSIDE HCO, LLC (CASE NO. 24-10555)

¹ The last four digits of SC Healthcare Holding, LLC's tax identification number are 2584. The mailing address for SC Healthcare Holding, LLC is c/o Petersen Health Care Management, LLC 830 West Trailcreek Dr., Peoria, IL 61614. Due to the large number of debtors in these Chapter 11 Cases, for which the Debtors have requested joint administration, a complete list of the Debtors and the last four digits of their federal tax identification numbers is not provided herein. A complete list of such information will be made available on a website of the Debtors' proposed claims and noticing agent at www.kccllc.net/Petersen.



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GLOBAL NOTES AND STATEMENTS OF LIMITATIONS, METHODOLOGY, AND DISCLAIMERS REGARDING DEBTORS' SCHEDULES OF ASSETS AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS

INTRODUCTION

The debtors and debtors in possession (collectively, the "<u>Debtors</u>" or the "<u>Company</u>") in the above-captioned chapter 11 cases (these "<u>Chapter 11 Cases</u>") submit their *Schedules of Assets and Liabilities* (the "<u>Schedules</u>") and *Statements of Financial Affairs* (the "<u>Statements</u>" and, together with the Schedules, the "<u>Schedules and Statements</u>") pursuant to section 521 of the Bankruptcy Code (as defined below), Rule 1007 of the Federal Rules of Bankruptcy Procedure, and Rule 1007-1 of the Local Rules of Bankruptcy Practice and Procedure of the United States Bankruptcy Court for the District of Delaware.

On March 20, 2024 (the "<u>Petition Date</u>"), the Debtors commenced these Chapter 11 Cases by filing voluntary petitions for relief under chapter 11 of title 11 of the United States Code, 11 U.S.C. §§ 101–1532 (the "<u>Bankruptcy Code</u>") with the United States Bankruptcy Court for the District of Delaware (the "<u>Court</u>"). These Chapter 11 Cases have been consolidated for procedural purposes only and are being administered jointly under case number 24-10443 (TMH). The Debtors, with the exception of certain inactive entities, are authorized to operate their business as debtors-in-possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code.²

¹ The last four digits of SC Healthcare Holding, LLC's tax identification number are 2584. The mailing address for SC Healthcare Holding, LLC is c/o Petersen Health Care Management, LLC 830 West Trailcreek Dr., Peoria, IL 61614. Due to the large number of debtors in these Chapter 11 Cases, whose cases are being jointly administered, a complete list of the Debtors and the last four digits of their federal tax identification numbers is not provided herein. A complete list of such information is available on a website of the Debtors' claims and noticing agent at www.kccllc.net/Petersen.

² Pursuant to that Order Approving Stipulation to Resolve (I) X-Caliber's (A) Motion to Dismiss, (B) 543 Motion, and (C) DIP Objection, and (II) the Debtors' MT4 Motion to Dismiss [Docket No. 340], certain of the Debtors' cases are suspended pursuant to 11 U.S.C. §305(b) and, thus, these Schedules and Statements do not reflect information from the suspended Debtors' books and records.

The Schedules and Statements have been prepared by the Debtors' management team, with the assistance of their professional advisors, with reliance upon the efforts, statements, and representations of the Debtors' personnel and the advice of the Debtors' professional advisors. The Schedules and Statements are unaudited and subject to potential adjustment. In preparing the Schedules and Statements, the Debtors relied on financial data derived from their books and records that was available at the time of preparation.

On or about October 20, 2023, Petersen became the victim of a ransomware attack by an entity named White Ninja. The attackers infiltrated many of the Petersen systems, thereby impacting the Debtors' access to historic and current billing records, other books and records, and emails (the "<u>Data Breach</u>"). The Debtors quickly contacted a consultant to assist in remedying the impact of the ransomware attack and provided notice of the attack to the Federal Bureau of Investigation. While the Debtors are back "online" with new servers, email addresses, and replacement software, a significant amount of the Debtors' books and records were lost in the attack, leading to incredible difficulty and delay in pursuit of the Debtors' accounts receivable. Additionally, as a result of the ransomware attack, retrieval of the Debtors' files and related information has proven onerous and, in some cases, impossible. Thus, throughout the Chapter 11 Cases, the Debtors have had and anticipate having difficulty providing comprehensive historical information. Such difficulty, thus, impacts the availability, accuracy, and completeness of the information in the Debtors' Schedules and Statements.

The Debtors' liquidity crisis was further hampered by a cyberattack that impacted a crucial service provider for certain of its payors' revenue processes. It was recently announced that on February 21, 2024, Change Healthcare, a division of UnitedHealth Group, began experiencing a cyber security issue which impacted its operations (the "<u>Change Cyberattack</u>"). Based on media reports regarding the Change Cyberattack, the Debtors understand that Change Healthcare processes 15 billion health care transactions annually and is involved in one in every three patient records nationwide. After the Change Cyberattack was reported in the media, the Debtors noticed reimbursements from certain payors slowing and subsequently heard affirmatively from payors that amounts owed to the Debtors were being suspended due to the Change Cyberattack. While the Debtors' timing and processing of reimbursements, which impacts the availability, accuracy, and completeness of the information in the Debtors' Schedules and Statements.

The Debtors have used commercially reasonable efforts to ensure the accuracy and completeness of such information and data; however, subsequent information, data, or discovery may result in material changes to the Schedules and Statements and inadvertent errors, omissions, or inaccuracies may exist.

The Debtors and their estates reserve all rights to amend or supplement the Schedules and Statements as may be necessary and appropriate, but expressly do not undertake any obligation to update, modify, revise, or re-categorize the information provided in the Schedules and Statements or to notify any third party should the information be updated, modified, revised, or re-categorized, except as required by applicable law or order of the Court. Nothing contained in the Schedules and Statements or these *Global Notes and Statements of Limitations, Methodology, and Disclaimers Regarding Debtors' Schedules of Assets and Liabilities and Statements of Financial Affairs* (these "Global Notes") shall constitute a waiver of any rights of the Debtors and their estates or an admission with respect to these Chapter 11 Cases, including, but not limited to, any issues involving objections to claims, setoff or recoupment, equitable subordination or

recharacterization of debt, defenses, characterization or re-characterization of contracts, leases, and claims, assumption or rejection of contracts and leases, and/or causes of action arising under the Bankruptcy Code or any other applicable laws.

The Debtors and their agents, attorneys, and financial advisors shall not be liable for any loss or injury arising out of, or caused in whole or in part by, the acts, errors, or omissions, whether negligent or otherwise, in procuring, compiling, collecting, interpreting, reporting, communicating, or delivering the information contained herein. In no event shall the Debtors or their agents, attorneys and financial advisors be liable to any third party for any direct, indirect, incidental, consequential, or special damages (including, but not limited to, damages arising from the disallowance of a potential claim against the Debtors or damages to business reputation, lost business or lost profits), whether foreseeable or not and however caused, even if the Debtors or their agents, attorneys, and financial advisors are advised of the possibility of such damages.

These Global Notes should be referred to and reviewed in connection with any review of the Schedules and Statements.

GLOBAL NOTES AND OVERVIEW OF METHODOLOGY

- 1. <u>Reservation of Rights</u>. The Debtors reserve the right to dispute or to assert setoff or other defenses to any claim reflected in the Schedules and Statements as to amount, liability, and classification. The Debtors also reserve all rights with respect to the values, amounts, and characterizations of the assets and liabilities listed in their Schedules and Statements.
- 2. <u>Basis of Presentation</u>. The Schedules and Statements reflect the separate assets and liabilities of each individual Debtor. For financial reporting purposes, the Debtors historically prepared consolidated financial statements, which included financial information for and the Debtors' business enterprise, which were audited annually. The majority of the Debtors' operations occur through Petersen Healthcare Management, LLC and/or Petersen Health Care, Inc.

The Schedules and Statements do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles ("<u>GAAP</u>"), nor are they intended to reconcile to the financial statements previously distributed to lenders, major creditors, or other parties in interest on an intermittent basis.

The Schedules and Statements have been signed by David Campbell, the Debtors' Chief Restructuring Officer. In reviewing and signing the Schedules and Statements, Mr. Campbell necessarily relied upon the efforts, statements, and representations of the accounting and non-accounting personnel who report to, or work with, Mr. Campbell, either directly or indirectly. Mr. Campbell has not, and could not have, personally verified the accuracy of each such statement and representation, including statements and representations concerning amounts owed to creditors.

3. <u>Insiders</u>. In circumstances where the Schedules and Statements require information regarding "insiders," the Debtors have included information with respect to the individuals who the Debtors believe may be included in the definition of "insider" as such term is

defined in section 101(31) of the Bankruptcy Code. Except as otherwise disclosed herein or in the Statements, payments to "insiders" are set forth on Statement 4. Persons listed as "insiders" have been included for informational purposes only, and such listing is not intended to be, nor should be construed as, a legal characterization of such person as an insider, nor does it serve as an admission of any fact, claim, right, or defense, and all such claims, rights, and defenses with respect thereto are hereby expressly reserved. The Debtors do not take any position with respect to: (a) such person's influence over the control of the Debtors; (b) the management responsibilities or functions of such individual; (c) the decision-making or corporate authority of such individual; or (d) whether such individual could successfully argue that he or she is not an "insider" under applicable law, or with respect to any theories of liability or any other purposes.

- 4. <u>Accounts Payable and Distribution System</u>. The Debtors use a consolidated cash management system through which the Debtors pay substantially all liabilities and expenses (the "<u>Cash Management System</u>"). A more complete description of the Cash Management System is set forth in the *Debtors' Motion for Entry of Interim and Final Orders (I) Authorizing the Debtors to (A) Continue to Use Their Bank Accounts, (B) Honor Prepetition Obligations Related Thereto, (C) Maintain the Refund Programs, (D) Perform Intercompany Transactions, (E) Maintain Existing Business Forms; and (II) Granting the Debtors' Cash Management System may also be found in the Fourth Interim Order (I) Authorizing the Debtors to (A) Continue to Use Their Bank Accounts, (B) Honor Prepetition Obligations Related Thereto, (C) Maintain the Refund Programs, (D) Perform Intercompany Transactions, (E) Maintain Existing Business Forms; and (II) Granting the Debtors' Cash Management System may also be found in the Fourth Interim Order (I) Authorizing the Debtors to (A) Continue to Use Their Bank Accounts, (B) Honor Prepetition Obligations Related Thereto, (C) Maintain the Refund Programs, (D) Perform Intercompany Transactions, (E) Maintain Existing Business Forms; and (II) Granting Related Relief [Docket No. 343].*
- 5. <u>Date of Valuations</u>. Except as otherwise noted in the Schedules and Statements, all liabilities are valued as of the Petition Date. Where values as of the Petition Date are not available, or where making calculations as of the Petition Date would create undue burden on, or expense to, the estates, the Debtors used values as of the most recent month-end close available to them, which was February 29, 2024. The Schedules and Statements reflect the Debtors' best effort to allocate the assets, liabilities, receipts, and expenses to the appropriate Debtor entity "as of" such dates. All values are stated in United States currency. The Debtors made reasonable efforts to allocate liabilities between the pre- and postpetition periods based on the information and research that was conducted in connection with the preparation of the Schedules and Statements. As additional information becomes available and further research is conducted, the Debtors may modify the allocation of liabilities between the pre- and postpetition periods and amend the Schedules and Statements accordingly.
- 6. <u>Book Value</u>. Except as otherwise noted, each asset and liability of each Debtor is shown on the basis of net book value of the asset or liability in accordance with such Debtor's accounting books and records. Therefore, unless otherwise noted, the Schedules and Statements are not based upon any estimate of the current market values of the Debtors' assets and liabilities, which may not correspond to book values. It would be cost prohibitive and unduly burdensome to obtain current market valuations of all of the Debtors' interests. Except as otherwise noted, the Debtors' assets are presented, in detail,

as they appear on the Debtors' accounting sub-ledgers. As such, the detail may include error corrections and value adjustments (shown as negative values or multiple line items for an individual asset). The Debtors believe that certain of their assets, including (i) goodwill and (ii) intangibles, may have been significantly impaired by, among other things, the events leading to, and the commencement of, the Debtors' Chapter 11 Cases. The Debtors have not yet formally evaluated the appropriateness of the carrying values ascribed to their assets prior to the Petition Date.

- 7. <u>Re-characterization</u>. Notwithstanding the Debtors' reasonable efforts to properly characterize, classify, categorize or designate certain claims, assets, executory contracts, unexpired leases and other items reported in the Schedules and Statements, the Debtors may, nevertheless, have improperly characterized, classified, categorized, designated or omitted certain items due to the complexity and size of the Debtors' business. Accordingly, the Debtors reserve all of their rights to re-characterize, reclassify, re-categorize, re-designate, add or delete items reported in the Schedules and Statements at a later time as is necessary or appropriate as additional information becomes available, including, without limitation, whether contracts or leases listed in the Schedules and Statements were deemed executory or unexpired as of the Petition Date and remain executory or unexpired postpetition.
- 8. <u>Property and Equipment</u>. Nothing in the Schedules and Statements is, or shall be construed as, an admission as to the determination of the legal status of any lease (including, without limitation, whether any lease is a true lease or a financing arrangement, and whether such lease is unexpired), and the Debtors and their estates reserve all rights with respect to such issues.
- 9. <u>Causes of Action</u>. The Debtors have made their best efforts to set forth known causes of action against third parties as assets in their Schedules and Statements. The Debtors reserve all of their rights with respect to causes of action they may have (including, but not limited to, causes of action arising under the Bankruptcy Code or any other applicable laws), whether disclosed or not disclosed, and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any such causes of action, or in any way waive, prejudice, impair, or otherwise affect the assertion of such claims and causes of action.
- 10. <u>Materialman's/Mechanic's Liens</u>. The assets listed in the Schedules and Statements are presented without consideration of any materialman's or mechanic's liens.
- 11. <u>Litigation</u>. Certain litigation actions (collectively, the "<u>Litigation Actions</u>") reflected as claims against a particular Debtor may relate to other Debtors. The Debtors have made reasonable efforts to accurately record the Litigation Actions in the Schedules and Statements of the Debtor(s) that is the party to the Litigation Action. The inclusion of any Litigation Action in the Schedules and Statements does not constitute an admission by the Debtors of liability, the validity of any Litigation Action, or the amount of any potential claim that may result from any claims with respect to any Litigation Action, or the amount and treatment of any potential claim resulting from any Litigation Action currently pending or that may arise in the future.

- 12. <u>Credits and Adjustments</u>. In the ordinary course of their business, the Debtors apply credits against amounts otherwise due to vendors. Certain of these credits are subject to change. Claims of vendors and creditors are listed in the amounts entered on the Debtors' books and records, and may not reflect certain credits, allowances, or other adjustments due from such vendors or creditors to the Debtors. The Debtors and their estates reserve all rights with regard to any such credits, allowances, and other adjustments, including, without limitation, the right to assert claims, objections, setoffs, and recoupments with respect to the same.
- 13. <u>Executory Contracts and Unexpired Leases</u>. The Debtors have not set forth executory contracts and unexpired leases as assets in the Schedules and Statements, even though these contracts and leases may have some value to the Debtors' estates. Rather, executory contracts and unexpired leases have been set forth solely on Schedule G. The Debtors' rejection of executory contracts and unexpired leases may result in the assertion of rejection damages claims against the Debtors and their estates; however, the Schedules and Statements do not reflect any claims for rejection damages. The Debtors and their estates reserve all rights with respect to the assertion of any such claims.
- 14. <u>Claims</u>. Certain of the Debtors' Schedules list creditors and set forth the Debtors' estimate of the claims of creditors as of the Petition Date. The claim amounts reflected on the Schedules may include the Debtors' estimates for vendor charges not yet invoiced. By estimating certain invoices, the Debtors are not representing that they have sought to identify and estimate all un-invoiced vendor charges. While the Debtors have made their best efforts to reflect the claims by vendor, excluding these various adjustments, the actual unpaid claims of creditors that may be allowed in these Chapter 11 Cases may differ from the amounts set forth in the Schedules and Statements.

The Debtors intentionally have not included "non-cash" accruals (*i.e.*, accruals to recognize expense or liability over multiple periods where no specific obligation to perform is established, such as accruals to equalize lease payments) in the Schedules and Statements.

- 15. <u>First Day Orders</u>. Pursuant to various "first day" orders and any supplements or amendments to such orders entered by the Court, the Debtors and their estates are authorized to pay certain prepetition claims, including, without limitation, certain claims relating to employee wages and benefits, claims for taxes and fees, and claims of specific vendors.
- 16. <u>Classifications and Claims Descriptions</u>. Any failure to designate a claim listed on a Debtor's Schedule as "disputed," "contingent," or "unliquidated" does not constitute an admission by the Debtors that the claim is not "disputed," "contingent," or "unliquidated." Likewise, listing a claim (a) on Schedule D as "secured," (b) on Schedule E/F as "unsecured priority," or "unsecured non-priority," or (c) listing a contract or lease on Schedule G as "executory" or "unexpired," does not constitute an admission by the Debtors and their estates of the legal rights of any claimant, or a waiver of the rights of the Debtors and their estates to amend these Schedules and Statements to recharacterize or reclassify any claim or contract. The Debtors and their estates reserve the right to (i) object to, or otherwise dispute or assert setoff rights, cross-claims, counterclaims or defenses to, any

claim reflected on the Schedules on any grounds, including, without limitation, amount, liability, validity, priority, or classification, or (ii) otherwise designate subsequently any claim as "disputed," "contingent," or "unliquidated."

- 17. <u>Addresses of Employees, Residents, and Resident Contacts</u>. Consistent with the Debtors' Motion for Entry of an Order (I) Authorizing the Debtors to File (A) a Consolidated Master List of Creditors and (B) a Consolidated List of the Debtors' 40 Largest General Unsecured Creditors, (II) Authorizing the Debtors to Redact Personally Identifiable Information for Certain Individual Creditors and Parties in Interest, (III) Authorizing Procedures to Maintain and Protect Confidential Resident Information, and (IV) Granting Related Relief [Docket No. 3], the Debtors have attempted to list each of their current employees', Residents', and Resident Contacts' names and addresses as "Available Upon Request," where reasonably possible, in order to protect their privacy. The Debtors have served and will continue to serve all necessary notices, including notice of the claims bar date, to the actual address of each of the Debtors' employees, residents, and resident contacts.
- 18. <u>Estimates</u>. The Debtors were required to make certain estimates and assumptions that affect the reported amounts of assets and liabilities and reported revenue and expenses. The Debtors and their estates reserve all rights to amend the reported amounts of assets, liabilities, revenue, and expenses to reflect changes in those estimates and assumptions.

SPECIFIC ADDITIONAL DISCLOSURES WITH RESPECT TO SCHEDULES

Schedule A/B

Item 3: The balances scheduled on Schedule A/B 3 are as of March 27, 2024, as those are the balances available to the Debtors and match the reporting provided by the Debtors in these Chapter 11 Cases.

Item 11: Negative accounts receivable balances are related to overpayments made to the Debtors by Medicaid or Medicare and certain private payments collected from residents while their Medicaid status is approved.

Due to the Data Breach, parsing accounts receivable by age (90 days old or less and over 90 days old) is not possible. As a result, the Debtors have listed the aggregate accounts receivable on Schedule A/B 11a.

<u>Item 39 & 40</u>: The Debtors are unable to parse between office furniture, fixtures, and other equipment ("<u>FF&E</u>") because all FF&E is booked in the aggregate. As a result, the Debtors have scheduled all FF&E in the aggregate at Item 39.

Item 62: The Debtors are scheduling certain licenses required to operate their business. These licenses are not traded on an open market and as a result the Debtors have scheduled their value as "undetermined." Notwithstanding that fact, the licenses are extremely valuable to the Debtors as they would be unable to operate their business without them.

Item 71: The reference to "See SOFA 3" is intended to highlight that certain loans made to, and taken from, Mark Petersen are described in SOFA 3 and thus not scheduled at Item 71.

Items 74 and 75: In the ordinary course of business, the Debtors typically pursue their current and former residents' past due balances through legal action. Because of the Data Breach, among other reasons, the Debtors have yet to complete a review the full scope of pursuable claims.

Despite their commercially reasonable efforts to identify all known assets, the Debtors may not have listed all of their respective causes of action or potential causes of action against third parties as assets in Schedule A/B, Part 11, Items 74 and 75, including, but not limited to, causes of action arising under the Bankruptcy Code or any other applicable laws (including, but not limited to, potential preference actions and/or fraudulent transfer action). The Debtors and their estates reserve all rights with respect to any claims and causes of action that they may have, and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any such claims and causes of actions, or in any way waive, prejudice, impair, or otherwise affect the assertion of such claims and causes of action.

Schedule D

Except as otherwise ordered by the Court or agreed pursuant to a stipulation, the Debtors reserve their rights to dispute or challenge the validity, perfection, or immunity from avoidance of any lien purported to be granted or perfected in any specific asset for the benefit of a secured creditor listed on a Debtor's Schedule D. Moreover, although the Debtors may have scheduled claims of various creditors as secured claims for informational purposes, the Debtors reserve all rights to dispute or challenge the secured nature of any such creditor's claim or the characterization of the structure of any such transaction or any document or instrument (including without limitation, any intercompany agreement) related to such creditor's claim.

Except as specifically stated herein, real property lessors, utility companies, and other parties which may hold security deposits have not been listed on Schedule D. The Debtors have not included parties that may believe their claims are secured through setoff rights or inchoate statutory lien rights.

For all claims secured by property, the Debtors have listed balances as February 23, 2024. Where the precise date a debt was incurred is unavailable, the Debtors have listed the effective date of the applicable loan documents (including amendments).

Schedule E/F

The Debtors reserve their right to dispute or challenge whether claims owing to various taxing authorities are entitled to priority and the listing of any claim on Schedule E/F, Part 1 does not constitute an admission that such claim is entitled to priority treatment pursuant to section 507 of the Bankruptcy Code.

In certain instances, a Debtor may be a guarantor with respect to scheduled claims of other Debtors. No claim set forth on the Schedule E/F of any Debtor is intended to acknowledge claims of creditors that may be otherwise satisfied or discharged.

The Debtors have continued to pay Employee Compensation and Benefits, as defined in, and in accordance with, the *Final Order (I) Authorizing the Debtors to (A) Pay Prepetition Wages, Salaries, Other Compensation, and Reimbursable Expenses and (B) Continue Employee Benefits Programs and (II) Granting Related Relief* [Docket No. 216]. As a result, Schedule E/F, Part 2 does not include any potential Employee Compensation and Benefits amounts accrued but unpaid as of the Petition Date.

The Debtors have listed their known creditors in Schedule E/F. To the extent attorneys have entered appearances on behalf of such creditors, those appearances are noted on the docket of the Debtors' Chapter 11 Cases and are not separately listed in Item 4.

Third parties should not anticipate that the relationship of aggregate asset values and aggregate liabilities set forth in the Schedules will reflect their ultimate recoveries in these Chapter 11 Cases. Actual assets and liabilities may deviate from the amounts shown in the Schedules due to various events that occur throughout the duration of these Chapter 11 Cases.

Schedule G

The Debtors' business is complex, and the Data Breach have made the compilation and review of the Debtors' contracts difficult and time-consuming. While every effort has been made to ensure the accuracy of Schedule G, inadvertent errors or omissions may have occurred. The Debtors continue to search their records for potential contracts that may not have been included in the Schedules. If any such contracts are discovered, the Debtors reserve their right to amend and/or supplement the Schedules as necessary. The contracts, agreements, and leases listed on Schedule G may have expired or may have been modified, amended, or supplemented from time to time by various amendments, restatements, waivers, estoppel certificates, letter and other documents, instruments and agreements that may not be listed therein. Relationships between the Debtors and their vendors are occasionally governed by a master services agreement, under which vendors also place work and purchase orders, which may be considered executory contracts. The Debtors believe that disclosure of all of these purchase and work orders would be impracticable and unduly burdensome. Likewise, in some cases, the same supplier or provider may appear multiple times in Schedule G.

Unless otherwise specified on Schedule G, each executory contract or unexpired lease listed thereon shall include all final exhibits, schedules, riders, modifications, declarations, amendments, supplements, attachments, restatements, or other agreements made directly or indirectly by any executed agreement, instrument, or other document that in any manner affects such executory contract or unexpired lease, without respect to whether such agreement, instrument, or other document is listed thereon.

The Debtors and their estates hereby reserve all of their rights, claims, and causes of action to (i) dispute the validity, status, or enforceability of any contracts, agreements, or leases set forth in Schedule G, (ii) dispute or challenge the characterization of the structure of any transaction, document, or instrument related to a creditor's claim, including, but not limited to, the agreements listed on Schedule G; and (iii) amend or supplement such Schedule as necessary.

Schedule H

Due to their voluminous nature, and to avoid unnecessary duplication, the Debtors have not included on Schedule H debts for which more than one Debtor may be liable if such debts were already reflected on Schedule G for the respective Debtors subject to such debt. There may be certain contracts in which multiple Debtors are parties, and while the Debtors have made every effort to list co-Debtors appropriately in such instances, inadvertent errors or omissions may have occurred. Because nearly all of the Debtors' administrative processes are handled at the Debtors' corporate headquarters, the Debtors have listed 830 West Trailcreek Dr., Peoria, IL 61614 for each Debtor on Schedule H.

SPECIFIC ADDITIONAL DISCLOSURES WITH RESPECT TO STATEMENTS

<u>Question 3</u>: At times, the Debtors reimbursed certain employees when such employees used personal credit cards to pay for goods and/or services that would normally have been paid directly by the Debtors but, due to liquidity constraints, were not.

Question 4: Mark Petersen, as the owner and Chief Executive Officer of the Debtors and their affiliates since 2002, has overseen the expansion of the Debtors' enterprise over the last twenty plus years. For a large portion of that time, and for at least the past ten years, Mr. Petersen has not taken a salary for his role as Chief Executive Officer. In lieu of a salary, Mr. Petersen occasionally paid certain of his personal expenses out of the Debtors' accounts. Such payments were, at all times, accurately recorded as dividends and have been listed in Question 4. In certain instances, Mr. Petersen acted as an intermediary between certain Debtors wherein he would receive a disbursement from one Debtor entity and then immediately deposited such disbursement with another Debtor entity or non-Debtor affiliate as a method of intercompany cash management. Those disbursements to Mr. Petersen are reflected in Question 4, but due in part to the Data Breach, the records of the corresponding deposits back into the enterprise are not readily available in the Debtors books at this time and, thus, are not represented in these Schedules and Statements. The Debtors are in the process of engaging a third-party accounting firm to review and locate the appropriate matching transactions. In certain instances, payments were made to Mr. Petersen to pay down credit cards that were used for business expenses in the ordinary course. Those payments have been marked with an asterisk in Question 4.

The Debtors routinely made intercompany disbursements from Debtor to Debtor and from Debtor to non-Debtor affiliate. Disbursements to other Debtors or to non-Debtor affiliates are reflected in Question 4 and marked with an asterisk ("*"), but because of the Data Breach, the records of any corresponding deposits from Debtor to Debtor or from non-Debtor affiliate to Debtor are not available to the Debtors at this time and not represented in these Schedules and Statements. As noted above, the Debtors are in the process of engaging a third-party accounting firm to review and generate the appropriate matching transactions.

Question 6: The Debtors are subject to certain Medicaid setoffs based on various regulatory fees and taxes. The Debtors have used their best efforts to reflect such setoffs where known; however, there are instances where certain setoffs equal or surpass the amount that the Debtors are owed from Medicaid.

<u>**Question 7**</u>: The Debtors are subject to certain ordinary course audits by certain regulatory authorities, including, but not limited to audits of certain payroll reports and Illinois Department of Public Health facility audits, as applicable. Such ordinary course audits have not been listed.

Question 10: For all losses on property, the Debtors have listed such losses at the Debtor entity that owns the property. In the ordinary course of business, insurance payments may be processed through a separate operating Debtor entity. In such cases, insurance payments have been listed at the operating Debtor entity.

Question 20: Other than the location listed for off-premise storage, Mark Petersen maintains a storage facility that does not hold any property of the Debtors to the best of their knowledge.

Question 21: The Debtors maintain and manage bank accounts which hold residents' funds (the "<u>Resident Trust Accounts</u>") at their facilities. The money held in the Resident Trust Accounts is not property of the Debtors or their estates and is held solely for the benefit of the residents' use. The Debtors never have the ability to take ownership over Resident Trust Account funds. In the event that a resident leaves a facility and their Resident Trust Account funds cannot be returned, those funds are turned over to the state in which that facility operates. More information related to the Resident Trust Accounts can be found in the *Debtors' Motion for Entry of Interim and Final Orders (I) Authorizing the Debtors to (A) Continue to Use Their Bank Account, (B) Honor Prepetition Obligations Related Thereto, (C) Maintain the Refund Programs, (D) Perform Intercompany Transactions, (E) Maintain Exiting Business Forms; and (II) Granting Related Relief [Docket No. 41].*

In the ordinary course of business, the Debtors may hold personal belongings of residents after they leave a facility for various reasons. Such property is held until the resident or their designated contact retrieves the subject property.

Petersen Health Care, Inc. is party to a lease agreement for copiers which are held at various Debtor locations.

Question 26a: Debtor Petersen Health Care Management, LLC maintains the books and records for all of the Debtors and has been listed to reflect that in the Schedules and Statements. Specific names have been provided in the Statements of Petersen Health Care Management, LLC.

Question 26d: The Debtors' financial statements are maintained and distributed from Petersen Health Care Management, Inc. From time to time, the Debtors provide financial statements in the ordinary course of business to certain parties for business, statutory, credit, financing, and other reasons. Recipients may include regulatory and tax agencies, financial institutions, investment banks, vendors, debtholders, and their legal and financial advisors. Additionally, the Debtors contacted various parties in connection with the Debtors' efforts to market and sell their assets. The Debtors shared certain financial information under confidentiality agreements to certain of those parties through Walker & Dunlop Investment Sales, LLC, the Debtors' retained Investment Sales Broker. The identity of such parties has not been individually disclosed herein based on confidentiality.

Question 31: Until 2021, certain Debtors were members of a consolidated group for tax purposes wherein such Debtors did not file tax returns and were accounted for within the personal tax returns

of Mark Petersen. As of 2021, those Debtors are no longer part of such consolidated group. The Debtors maintain that during the time in which such Debtors were members of a consolidated group for tax purposes, such Debtors were not required to file any tax return because they generated no income.

[Remainder of page left intentionally blank]

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Official Form 206Sum Summary of Assets and Liabilities for Non-Individuals 12/15 Part 1: Summary of Assets 1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B) 1a. Real property: \$ 0.00 1a. Real property: Copy line 88 from Schedule A/B \$ 0.00 \$ 0.00 1b. Total personal property: \$ 0.00 1b. Total personal property: Copy line 91A from Schedule A/B \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 \$ 0.00 1c. Total of all property: \$ 0.00 1c. Total of all property: \$ 0	Fill in this information to identify the case: Debtor Name: In re : Westside HCO, LLC United States Bankruptcy Court for the: District of Delaware Case number (if known): 24-10555 (TMH)	Check if this is an amended filing
Part 1: Summary of Assets 1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B) a. Real property: Copy line 88 from Schedule A/B Total personal property: Copy line 91A from Schedule A/B It. Total personal property: Copy line 91A from Schedule A/B It. Total personal property: Copy line 91A from Schedule A/B It. Total of all property: Copy line 92 from Schedule A/B Schedule A/B Part 2: Summary of Liabilities Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from 10:e 3 of Schedule D Schedule E/F: Creditors Who Have Unsecured Claims: Copy the total claim amounts of priority unsecured claims: Copy the total claim amount of claims from Part 1 from line 5a of Schedule E/F Soredule E/F: Soredule E/F Sore	Official Form 206Sum	
1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B) 1a. Real property: Copy line 88 from Schedule A/B 1b. Total personal property: Copy line 91A from Schedule A/B 1c. Total of all property: Copy line 92 from Schedule A/B 1c. Total of all property: Copy line 92 from Schedule A/B 1c. Total of all property: Copy line 92 from Schedule A/B 1c. Total of all property: Copy line 92 from Schedule A/B 1c. Total of all property: Copy line 92 from Schedule A/B 1c. Total of all property: Copy line 92 from Schedule A/B 1c. Total of all property: Copy line 92 from Schedule A/B 1c. Total of all property: Copy line 92 from Schedule B/E Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims: Copy the total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F 3b. Total amount of claims from Part 2 from line 5b of Schedule E/F + \$	Summary of Assets and Liabilities for Non-Individuals	12/15
1a. Real property: Copy line 88 from Schedule A/B \$	Part 1: Summary of Assets	
Copy line 88 from Schedule A/B \$ 0.00 1b. Total personal property: \$ 2,004,904,90 1c. Total of all property: \$ 2,004,904,90 Copy line 92 from Schedule A/B \$ 2,004,904,90 Part 2: Summary of Liabilities 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) \$ 3,933,640,78 3. Schedule D: Creditors Who Have Unsecured Claims: \$ 0.00 3. Schedule E/F: Creditors Who Have Unsecured Claims: \$ 0.00 3. Total claim amounts of priority unsecured Claims: \$ 0.00 3b. Total amount of claims from Part 1 from line 5a of Schedule E/F \$ 0.00 3b. Total amount of claims from Part 2 from line 5b of Schedule E/F \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)	
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Copy line 91A from Schedule A/B \$ 2,004,904.90 1c. Total of all property: \$ 2,004,904.90 Copy line 92 from Schedule A/B \$ 2,004,904.90 Part 2: Summary of Liabilities 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) \$ 3,933,640.78 Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D \$ 3,933,640.78 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) \$ 0.00 3a. Total claim amounts of priority unsecured claims: \$ 0.00 Copy the total claims from Part 1 from line 5a of Schedule E/F \$ 0.00 3b. Total amount of claims from Part 2 from line 5b of Schedule E/F \$ 594,893.00 4. Total liabilities \$ 4528,533.78	1b. Total personal property:	
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Copy line 92 from Schedule A/B \$ 2,004,904.90 Part 2: Summary of Liabilities 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) \$ 3,933,640.78 Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D \$ 3,933,640.78 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) \$ 0.00 3a. Total claim amounts of priority unsecured claims: \$ 0.00 Copy the total claims from Part 1 from line 5a of Schedule E/F \$ 0.00 3b. Total amount of claims of nonpriority amount of unsecured claims: \$ 594,893.00 Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F \$ 594,893.00 4. Total liabilities \$ 4,598,593.78		
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim,from line 3 of Schedule D		\$2,004,904.90
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim,from line 3 of Schedule D		
Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D \$ 3,933,640.78 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) 3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F \$ 0.00 3b. Total amount of claims of nonpriority amount of unsecured claims: \$ 994,893.00 Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F \$ 594,893.00 4. Total liabilities \$ 1628,533.78	Part 2: Summary of Liabilities	
Copy the total dollar amount listed in Column A, Amount of claims, from line 3 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F) 3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F 3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F 4. Total liabilities	2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)	
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Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
Copy the total claims from Part 1 from line 5a of Schedule E/F 3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F 4. Total liabilities	3a. Total claim amounts of priority unsecured claims:	
Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F	Copy the total claims from Part 1 from line 5a of Schedule E/F	\$0.00
4. Total liabilities	3b. Total amount of claims of nonpriority amount of unsecured claims:	
¢ 452852378	Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F	+ \$594,893.00
¢ 452852378	4 Total liabilities	
		\$ 4,528,533.78

Fill in this information to identify the case:

Debtor Name: In re : Westside HCO, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 24-10555 (TMH)

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1:	Cash and cash equivalents				
1. Do	es the debtor have any cash or cash equiv	alents?			
	No. Go to Part 2.				
\checkmark	Yes. Fill in the information below.				
All	cash or cash equivalents owned or cor	ntrolled by the debto	r	Current valu	e of debtor's interest
2. Ca	sh on hand				
	2.1 None			\$	
3. Ch	ecking, savings, money market, or financia	al brokerage accounts	s (Identify all)		
Nar	ne of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number		
	3.1 PNC Bank	Commercial	3012	\$	0.00
	3.2 PNC Bank	Government	4162	\$\$	0.00
	3.3 PNC Bank	Operating	3899	\$	0.00
4. Oth	ner cash equivalents (Identify all)				
	4.1 Non-Critical Repair Reserve			\$	23,142.83
	4.2 Property Insurance Escrow			\$\$	11,145.20
	4.3 Real Estate Tax Escrow			\$\$	29,997.54
	al of Part 1 lines 2 through 4 (including amounts on a	ny additional sheets).	Copy the total to line 80.	\$	64,285.57

Debtor:	Westside HCO, LLC	Case number (if known):	24-10555
	Name		
Part 2:	Deposits and prepayments		
6. Does	the debtor have any deposits or prepayments?		

□ No. Go to Part 3.

 \boxdot Yes. Fill in the information below.

	Current valu	e of debtor's interest
7. Deposits, including security deposits and utility deposits		
Description, including name of holder of deposit		
7.1 None	\$	
8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent		
Description, including name of holder of prepayment		
8.1 Prepaid Insurance	\$	92,651.71
9. Total of Part 2.		
Add lines 7 through 8. Copy the total to line 81.	\$	92,651.71

		Case 24-104	43-TMH	Doc 418	Filed 05/31/24 Pag	e 17 of	52	
Debtor	Westside HCO, LLC				Case number		24-10555	
	Name					_		
Part 3:	Accounts receivab	le						
10. Doe s	s the debtor have any	accounts receivat	ole?					
	No. Go to Part 4.							
\checkmark	Yes. Fill in the informat	ion below.						
							Current value interest	of debtor's
11. Acco	ounts receivable							
		Description	face amount		doubtful or uncollectible accounts			
11a.	90 days old or less:	Accounts Receivables	\$	1,830,806.44	\$	= →	\$	1,830,806.44
	Note: See Global N	lotes						
11b.	Over 90 days old:	Accounts Receivables	\$		\$	= →	\$	
	Note: See Global N	lotes						

12. Total of Part 3.

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$_____

1,830,806.44

De	ebtor:	Case 24-10443-TMH Down	c 418 Filed (05/31/24 Page 18 Case number (if known	
Part	: 4:	Investments			
13.	Does t	the debtor own any investments?			
	⊠ No	b. Go to Part 5.			
	🗆 Ye	es. Fill in the information below.			
				Valuation method used for current value	Current value of debtor's interest
14.	Mutua	I funds or publicly traded stocks not included in Part 1			
	Name	of fund or stock:			
					\$
		ublicly traded stock and interests in incorporated and unin- ling any interest in an LLC, partnership, or joint venture	corporated business	25,	
	Name	of entity: %	of ownership:		
					_\$
		rnment bonds, corporate bonds, and other negotiable and r iments not included in Part 1	on-negotiable		
	Descri	be:			
					\$
17.	Total	of Part 4.			
	Add lir	nes 14 through 16. Copy the total to line 83.			\$0.00

or:	Westside HCO, LLC	

D	ebtor:	Wests	side HCO, LLC			Case number (if known): 24-	10555
		Name	9				
Part	t 5:	Inve	entory, excluding agricultu	re assets			
18.	Does	s the de	ebtor own any inventory (excludi	ng agriculture assets)?		
	\mathbf{A}	No. Go	to Part 6.				
		Yes. Fil	Il in the information below.				
	Gene	eral des	scription	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw	/ materi	ials				
					\$		\$
20.	Worl	k in pro	-				
					_ \$		\$
21	Finis	shed ar	oods, including goods held for re	salo			
21.	1 1113	shea ga			\$		\$
					_ `		_ `
22.	Othe	er inver	ntory or supplies				
					\$		\$
23.		al of Pa					
	Add	l lines 19	9 through 22. Copy the total to line	84.			\$0.00
24.			e property listed in Part 5 perisha	able?			
		165					
25.	Has	any of	the property listed in Part 5 been	purchased within 20	days before the bankruptcy v	was filed?	
		No					
		Yes. D	escription Book val	ue\$	Valuation method	Current valu	ie \$
26	Hae	any of	the property listed in Part 5 been	annraised by a profe	ssional within the last year?		
∠0.			the property listed in Fall 5 been	appraised by a profe	solonal within the last year?		
	<u> </u>	-					

□ Yes

24-10555 Case number (if known):

7. Does the debtor own or lease any farm	ning and fishing-related asse	ts (other than titled motor	vehicles and land)?	
No. Go to Part 7.				
Yes. Fill in the information below.				
General description	inte	book value of debtor's rest ere available)	Valuation method used for current value	Current value of debtor's interes
Crops—either planted or harvested				
· · ·	\$			\$
Farm animals Examples: Livestock, pou	•			\$
	Ψ			_ *
Farm machinery and equipment (Othe	r than titled motor vehicles)			
	\$\$			\$\$
Farm and fishing supplies, chemicals				\$
	φ			\$
Other farming and fishing-related prop	perty not already listed in Par	t 6		
	\$			\$\$
Total of Part 6.			Γ	
Add lines 28 through 32. Copy the total	to line 85.			\$0.
			L	
Is the debtor a member of an agricultu □ No	Iral cooperative?			
 No Yes. Is any of the debtor's property : 	stored at the cooperative?			
	·			
□ Yes				
Has any of the property listed in Part	6 been purchased within 20 d	ays before the bankruptcy	v was filed?	
□ No	<u>^</u>			•
Yes. Description Bo	ok value ^{\$}	Valuation method	I Cur	rrent value ^{\$}
2000npilon 20				
2000,pilo.i				
	ar any of the property listed in	Port 62		
Is a depreciation schedule available fo	or any of the property listed ir	n Part 6?		

- 37. Has any of the property listed in Part 6 been appraised by a professional within the last year?
 - □ No
 - □ Yes

Debto	Case 24-10443-TMH	Doc 418	Filed 05/	-	52 4-10555
	Name				
Part 7	7: Office furniture, fixtures, and equipment; a	nd collectib	les		
38. D	oes the debtor own or lease any office furniture, fixtures	, equipment, or	collectibles?		
	No. Go to Part 8.				
\checkmark	Yes. Fill in the information below.				
G	eneral description	Net book valu interest (Where availab		Valuation method used for current value	Current value of debtor's interest
39. O	ffice furniture				
	39.1 Total FFE from Balance Sheet	\$	15,620.68	Net Book Value	\$\$
40. O	ffice fixtures				
	40.1 See Schedule A/B 39	\$			\$\$
	ffice equipment, including all computer equipment and ommunication systems equipment and software				
	41.1 See Schedule A/B 39	\$			\$\$
bo	ollectibles <i>Examples:</i> Antiques and figurines; paintings,print poks, pictures, or other art objects; china and crystal; stamp, ard collections; other collections, memorabilia, or collectibles				
	42.1 None	\$			\$\$
	otal of Part 7. dd lines 39 through 42. Copy the total to line 86.				\$15,620.68
44. Is	a depreciation schedule available for any of the propert	y listed in Part	7?		
\checkmark	No				
	Yes				
45. H	as any of the property listed in Part 7 been appraised by	a professional	within the last	year?	

☑ No

□ Yes

Debtor:	Westside HCO, LLC

	Name			
Part	8: Machinery, equipment, and vehicles			
46.	Does the debtor own or lease any machinery, equipment, o	or vehicles?		
	□ No. Go to Part 9.			
	☑ Yes. Fill in the information below.			
	General description	Net book value of debtor's interest	Valuation method used	Current value of debtor's interes
	Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	(Where available)	for current value	
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled	farm vehicles		
	47.1 None	\$		\$
49.	48.1 None Aircraft and accessories 49.1 None	\$ \$		\$ \$
50.	Other machinery, fixtures, and equipment (excluding farm	machinery and equipment)		
	50.1 See Schedule A/B 39	\$		\$
51.	Total of Part 8.			
	Add lines 47 through 50. Copy the total to line 87.			\$0.00
52.	Is a depreciation schedule available for any of the property	y listed in Part 8?		
	☑ No			
	Yes			
53.	Has any of the property listed in Part 8 been appraised by	a professional within the last	year?	

🗹 No

□ Yes

24-10555

Case number (if known):

Debtor: Westside HCO, LLC

Name

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☑ No. Go to Part 10.
- □ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value o debtor's intere	
55.1		\$		\$	
Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries f	rom any additional shee	ts. Copy the total to line 88	3.	\$	0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

□ No

56.

□ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- 🗆 No
- □ Yes

Case number (if known):

Westside HCO, LLC	

Name

Debtor:

	t 10: Intangibles and intellectual property Does the debtor have any interests in intangibles or intellectual	I property?		
00.	 No. Go to Part 11. 			
	 ✓ Yes. Fill in the information below. 			
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
	60.1 None	\$		\$
61.	Internet domain names and websites			
	61.1 None	\$		\$
62.	Licenses, franchises, and royalties State of Illinois Department of Public Health License, 62.1 Permit, Certification, Registration	\$Undetermined		\$Undetermined
63.	Customer lists, mailing lists, or other compilations			
	63.1 Customer / patient list	\$0.00		\$ Undetermined
64.	Other intangibles, or intellectual property			
	64.1 None	\$		\$
65.	Goodwill			
	65.1 None	\$\$		\$
66.	Total of Part 10.		ſ	
	Add lines 60 through 65. Copy the total to line 89.			\$0.00
67.	Do your lists or records include personally identifiable informa	tion of customers (as defined in	L 11 U.S.C. §§ 101(41A) ar	nd 107) ?

☑ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

⊠ No

□ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

⊠ No

□ Yes

Case number (if known): 24-10555

	11: All other assets							
	Does the debtor own any other assets that have				i			
	nclude all interests in executory contracts and une.	xpired leases not	previously i	reported on th	ils form.			
	\checkmark Yes. Fill in the information below.							
							Current va	lue of debtor's
							interest	
	Notes receivable							
•	Description (include name of obligor)	Total face amour	ot	doubtful or u	ncollectible accounts			
	71.1 Employee Advances / Loans	\$	1,540.50		Undetermined		\$	1,540.5
		Ψ	1,040.00	_	Undetermined		φ	1,040.0
	Description (include name of obligor)	Total face amour	nt		ncollectible accounts			
	71.2 None	\$		- \$		_= +	\$	
	Tax refunds and unused net operating losses (NOLs)						
	Description (for example, federal, state, local)		_					
	72.1 None			Tax year			\$	
•	Interests in insurance policies or annuities							
	73.1 None						\$	
	74.1 See Global Notes Nature of claim						\$	
	Amount requested	\$						
5.	Other contingent and unliquidated claims or ca every nature, including counterclaims of the de set off claims	auses of action o abtor and rights	of to					
	75.1 None						\$	
	Nature of claim							
	Amount requested	\$						
	Trusts, equitable or future interests in property							
•	76.1 None						\$	
							•	
	Other property of any kind not already listed <i>Es</i> country club membership	<i>kamples</i> : Season	tickets,					
	77.1 None						\$	
						_		
5.	Total of Part 11.							
	Add lines 71 through 77. Copy the total to line 90.						\$	1,540
						1		

□ Yes

24-10555

Case number (if known):

Debtor: Westside HCO, LLC
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

mr	art 12 copy all of the totals from the earlier parts of the form.				
	Type of property	 rent value of sonal property	Current propert	t value of real ty	
80.	Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 64,285.57			
81.	Deposits and prepayments. Copy line 9, Part 2.	\$ 92,651.71			
32.	Accounts receivable. Copy line 12, Part 3.	\$ 1,830,806.44			
33.	Investments. Copy line 17, Part 4.	\$ 0.00			
34.	Inventory. Copy line 23, Part 5.	\$ 0.00			
85.	Farming and fishing-related assets. Copy line 33, Part 6.	\$ 0.00			
86.	Office furniture, fixtures, and equipment; and collectibles.	\$ 15,620.68			
	Copy line 43, Part 7.				
7.	Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 0.00			
38.	Real property. Copy line 56, Part 9	 →	\$	0.	00
39.	Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0.00			
90.	All other assets. Copy line 78, Part 11.	\$ 1,540.50			
91.	Total. Add lines 80 through 90 for each column91a.	\$ 2,004,904.90	+ 91b. \$	0.	00
92.	Total of all property on Schedule A/B. Lines 91a + 91b = 92.	 			

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

Debtor Name: In re : Westside HCO, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 24-10555 (TMH)

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

□ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

☑ Yes. Fill in all of the information below.

alphabetical order a d claim, list the credit			red cla	aims. If a cr	editor has mor	e than one	Amo Do n	umn A bunt of claim not deduct the e of collateral.	Val	<i>lumn B</i> ue of collateral th oports this claim
Creditor's name			Des	cribe debto	or's property t	hat is subject to a	a lien			
Ecapital			Nor	nRE Propert	y and all Accou	unts	\$	3,933,640.78	\$	Undetermined
Creditor's Name Creditor's mailing	address									
			Des	scribe the li	ien					
Notice Name			Nor	nReal Estate	e and Financial					
20807 Biscayne Bl	'd		_							
Street										
Suite 203			_		an insider or	related party?				
			\checkmark	No						
Aventura FL		33180		Yes						
tity Sta	ite	ZIP Code								
ountry			ls a	anyone else	liable on this	claim?				
Creditor's email a	ddress, if	known		No						
			\checkmark	Yes. Fill ou	ut Schedule H:	Codebtors(Official	I Form 206H).		
ate debt was inc	urred		-							
Last 4 digits of ac number	count			ck all that a		the claim is:				
				Contingen	it					
Do multiple credit same property?	ors have a	an interest in the		Unliquidat	ed					
same property?				Disputed						
☑ No			_	•						
 Yes. Have yo relative priori 	u already	specified the								
🗆 No. Speci	y each cre	editor, including this ive priority.								
□ Yes. The specified		iority of creditors is	-							

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

3,933,640.78

\$

Check if this is an

amended filing

12/15

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address			On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
			Line	
Name				
Notice Name				
Street				
City	tate	ZIP Code		
Country				

Fill in this information to identify the case:

Debtor Name: In re : Westside HCO, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 24-10555 (TMH)

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Assets - Real and Personal Property (Official Form 206A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1:	List All Creditors with PRIORITY Unsecured Claims
1. Do a i	ny creditors have priority unsecured claims? (See 11 U.S.C. § 507).
⊠ N	No. Go to Part 2.

- □ Yes. Go to Line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
Priority creditor's name and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	\$\$
Creditor Name	Contingent		
	Unliquidated		
Creditor's Notice name	Disputed		
Address	Basis for the claim:		
		-	
City State ZIP Code			
Country	-		
Date or dates debt was incurred			
Last 4 digits of account number	_	Is the claim sul □ No	pject to offset?
Specify Code subsection of PRIORITY unsecur	ed	□ Yes	
claim: 11 U.S.C. § 507(a) ()			

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

				Amount of claim	
		nd mailing address	As of the petition filing date, the claim is:	\$	1,976.37
Abbott EMS of Creditor Name	f Illinois		Check all that apply.		
Creditor Marile					
			Unliquidated		
Creditor's Notice	name		□ Disputed		
PO Box 84719	99		Basis for the claim:		
Address			Trade Payable	-	
Dallas	TX	75284-7199			
City	State	ZIP Code			
Country					
Date or date	es debt was incurr	ed	Is the claim subject to offset?		
Various			☑ No		
Last 4 digits	s of account				
Accurate Biom Creditor Name		nd mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	44.50
			Unliquidated		
Creditor's Notice	name		Disputed		
500 Dark Baul	loverd		Basis for the claim:		
500 Park Boul Address	levalu		Trade Payable		
Suite 1260				-	
Itasca	IL	60143			
City	State	ZIP Code			
Country					
Date or date	es debt was incurr	ed	Is the claim subject to offset?		
Various			☑ No		
Last 4 digits	s of account				
number					

Debtor: Westside HCO, LLC

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Name				
3.3 Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is: \$	1,699.94
American Health Associates			Check all that apply.	
Creditor Name			Contingent	
Creditor's Notice	e name			
			Disputed	
671 Ohio Pike Address	e		Basis for the claim:	
			Trade Payable	
Suite K				
Cincinnati	ОН	452452136		
City	State	ZIP Code		
Ony		2 0000		
Country				
Date or date	es debt was incurr	ed	Is the claim subject to offset?	
Various			☑ No	
Last 4 digits	s of account			
number				
3.4 Nonpriority	creditor's name a	nd mailing address	As of the petition filing date, the claim is: $\$$	2,651.08
Biotech X- Ra Creditor Name	ay Inc		Check all that apply.	
Creditor Name			□ Contingent	
			Unliquidated	
Creditor's Notice	e name		Disputed	
1065 Executiv	ve Parkway Drive		Basis for the claim:	
Address			Trade Payable	
Suite 220				
St Louis	MO	631416367		
City	State	ZIP Code		
Country				
Date or date	es debt was incurr	ed	Is the claim subject to offset?	
Various			☑ No	
Last 4 digits	s of account			
number				

tor: Westside HCO, LLC Name 5 Nonpriority creditor's name and mailing address			Case number (if known):	2	4-10555	
			As of the petition filing date, the claim is:	\$		222.0
Cape Radiology Group			Check all that apply.			
			Contingent			
			Unliquidated Disputed Basis for the claim: Trade Payable			
Creditor's Notice name						
PO Box 1330						
Address				_		
	МО	63702-1330				
City	State	ZIP Code				
Country						
		1	Is the claim subject to offset?			
Date or dates debt	t was incurred	1				
Date or dates debt Various Last 4 digits of acc number		1	☑ No □ Yes			
Various Last 4 digits of acc number Nonpriority credito	count or's name and			\$		21,340.0
Various Last 4 digits of acc number	count or's name and		Yes As of the petition filing date, the claim is: Check all that apply.	\$		21,340.0
Various Last 4 digits of acc number Nonpriority credito Constellation New En	count or's name and		 Yes As of the petition filing date, the claim is: Check all that apply. Contingent 	\$		21,340.0
Various Last 4 digits of acc number Nonpriority credito Constellation New En	count or's name and		 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated 	\$		21,340.0
Various Last 4 digits of acc number Nonpriority credito Constellation New En Creditor's Notice name	count or's name and		 Yes As of the petition filing date, the claim is: Check all that apply. Contingent 	\$		21,340.0
Various Last 4 digits of acc number Nonpriority credito Constellation New En Creditor Name	count or's name and		 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: 	\$		21,340.0
Various Last 4 digits of acc number Nonpriority credito Constellation New En Creditor's Notice name Gas Division LLC	count or's name and		 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed 	\$		21,340.0
Various Last 4 digits of acc number Nonpriority credito Constellation New En Creditor's Notice name Gas Division LLC Address PO Box 5473	count or's name and		 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: 	\$		21,340.0
Various Last 4 digits of acc number Nonpriority credito Constellation New En Creditor's Notice name Gas Division LLC Address PO Box 5473 Carol Stream	count or's name and hergy	d mailing address	 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: 	\$		21,340.0
Various Last 4 digits of acc number Nonpriority credito Constellation New En Creditor's Notice name Gas Division LLC Address PO Box 5473 Carol Stream	count or's name and lergy IL	d mailing address	Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: Trade Payable	\$		21,340.0
Various Last 4 digits of acc number Nonpriority credito Constellation New En Creditor's Notice name Gas Division LLC Address PO Box 5473 Carol Stream City	count or's name and lergy IL State	d mailing address	 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: 	\$		21,340.0

tor: Westside HCO, LLC			Case number (if known):	24-10	555
Name					
7 Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is:	\$	327.1
DIRECTV			Check all that apply.		
Creditor Name					
			Unliquidated		
Creditor's Notice	name		 Disputed Basis for the claim: Trade Payable 		
PO Box 5006					
Address					
				-	
		004075000			
Carol Stream	<u>IL</u>	601975006			
City	State	ZIP Code			
Country					
Date or dates debt was incurred					
	s debt was incur	red	Is the claim subject to offset?		
Date or date Various Last 4 digits number		red	✓ No ✓ Yes		
Various Last 4 digits number	of account	red	☑ No	\$	2,026.9
Various Last 4 digits number Nonpriority	of account		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply.	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax Creditor Name	of account creditor's name a		 ✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent 	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax	of account creditor's name a		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax Creditor Name dba Sumner C Creditor's Notice	of account creditor's name a		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax Creditor Name dba Sumner C Creditor's Notice PO Box 5180	of account creditor's name a		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim:	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax Creditor Name dba Sumner C Creditor's Notice	of account creditor's name a		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax Creditor Name dba Sumner C Creditor's Notice PO Box 5180 Address	of account creditor's name a one name	and mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim:	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax Creditor Name dba Sumner C Creditor's Notice PO Box 5180 Address St Louis	of account creditor's name a		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim:	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax Creditor Name dba Sumner C Creditor's Notice PO Box 5180 Address	of account creditor's name a name	and mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim:	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax Creditor Name dba Sumner C Creditor's Notice PO Box 5180 Address St Louis	of account creditor's name a name	and mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim:	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax Creditor Name dba Sumner C Creditor's Notice PO Box 5180 Address St Louis City Country	of account creditor's name a name	and mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim: Trade Payable □ Is the claim subject to offset?	\$	2,026.9
Various Last 4 digits number Nonpriority Datamax Creditor Name dba Sumner C Creditor's Notice PO Box 5180 Address St Louis City Country	of account creditor's name a one name	and mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim: Trade Payable	\$	2,026.5

r: Westside HCO, LLC		Case number (if known):	24-10555	24-10555	
Name					
Nonpriority creditor's name and mailing Direct Supply Inc	g address	As of the petition filing date, the claim is: Check all that apply.	\$	651.	
Creditor Name		Contingent			
		Unliquidated Disputed Basis for the claim:			
Creditor's Notice name					
Box 88201					
Address		Trade Payable			
	288 ^o Code				
Country					
Date or dates debt was incurred		Is the claim subject to offset?			
Various		☑ No			
Last 4 digits of account					
number Nonpriority creditor's name and mailing	g address	As of the petition filing date, the claim is:	\$	3,000.0	
Dr. Asif Habib	J	Check all that apply.	•		
Creditor Name		Contingent			
		Unliquidated			
Creditor's Notice name		Disputed			
Address not available at time of filing		Basis for the claim:			
Address		Trade Payable			
City State ZIF	^o Code				
·					
Country					
Date or dates debt was incurred		Is the claim subject to offset?			
		-			
Various Last 4 digits of account		☑ No □ Yes			

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or: Westside HCO, LLC				Case number (if known):		24-10555	
Name							
1 Nonpriority creditor's name and mailing address			nd mailing address	As of the petition filing date, the claim is:	\$	3,	500.00
Dr. Robert Parks				Check all that apply.			
Creditor Na	Creditor Name			Contingent			
				Unliquidated			
Creditor's N	Notice name	e		Disputed			
Address	on File			Basis for the claim:			
Address				Trade Payable	_		
City		State	ZIP Code				
Country							
Date or	dates d	ebt was incurr	ed	Is the claim subject to offset?			
Various				☑ No			
Last 4 d	ligits of	account					
number							
2 Nonpric	ority cre	ditor's name a	nd mailing address	As of the petition filing date, the claim is:	\$:	376.7
Flynn Sa		vice Inc		Check all that apply.			
Creditor Na	ame			Contingent			
				Unliquidated			
Creditor's N	Notice name	e		Disputed			
1286 Fra	1286 Franks Road			Basis for the claim:			
Address				Trade Payable	_		
Jackson	ville	IL	62650				
City		State	ZIP Code				
Country							
Date or dates debt was incurred			ed	Is the claim subject to offset?			
Various				☑ No			
Last 4 d	Last 4 digits of account						
number	number						

otor: Westside HCO, LLC			Case number (if known):	24-	10555
Name					
13 Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is:	\$	1,236.75
Franklin Hospital			Check all that apply.		
Creditor Name					
			Unliquidated		
Creditor's Notice n	ame		□ Disputed Basis for the claim:		
201 Bailey Lane	e				
Address			Trade Payable	-	
Benton	<u>IL</u>	62812			
City	State	ZIP Code			
Country			le the claim subject to offect?		
	s debt was incurr	red	Is the claim subject to offset? ☑ No		
Various			№ NO □ Yes		
	reditor's name a	and mailing address	As of the petition filing date, the claim is:	\$	329.5
Frontier Creditor Name			Check all that apply.		
			Contingent		
			Unliquidated		
Creditor's Notice n	ame		□ Disputed		
PO Box 740407	7		Basis for the claim:		
Address			Trade Payable	-	
Cincinnati	ОН	452740407			
City	State	ZIP Code			
Country					
Date or dates debt was incurred Various			Is the claim subject to offset?		
			✓ No		
Last 4 digits	of account				
number					

or: Westside H	ICO, LLC		Case number (if known):	24-1	0555
Name					
		and mailing address	As of the petition filing date, the claim is:	\$	886.8
Gem Medical S Creditor Name	Supplies LLC		Check all that apply.		
Creater Hame					
			Unliquidated		
Creditor's Notice	name		Disputed		
730 Anthony T	Frail		Basis for the claim:		
Address			Trade Payable		
Northbrook	IL	60062			
City	State	ZIP Code			
Country					
Date or date	es debt was incuri	red	Is the claim subject to offset?		
Various			No		
Last 4 digits	of account				
number					
Nonpriority	creditor's name a	and mailing address	As of the petition filing date, the claim is:	\$	12,947.4
Herrin Hospita	al		Check all that apply.		
Creditor Name			Contingent		
			Unliquidated		
Creditor's Notice	name		Disputed		
Southern I L H	lospital Services		Basis for the claim:		
Address			Trade Payable		
201 South 14t	h Street			-	
Herrin	IL	62948			
City	State	ZIP Code			
Country					
Date or date	es debt was incuri	red	Is the claim subject to offset?		
Various			✓ No		
Last 4 digits	of account		□ Yes		
number					

or: Westside H	CO, LLC		Case number (if known):	24-10555	
Name					
[•] Nonpriority o	creditor's name a	ind mailing address	As of the petition filing date, the claim is:	\$	450.0
Illinois State Po	olice		Check all that apply.		
Creditor Name			Contingent		
Creditor's Notice r	name		Disputed		
Bureau of Inve	stigation		Basis for the claim:		
Address			Trade Payable		
206 North Chic	cago Street				
loliot		604224072			
Joliet	IL State	604324072			
City	State	ZIP Code			
Country			Is the claim subject to offset?		
	s debt was incuri	red	☑ No		
Various Last 4 digits	of account		Yes		
Last 4 digits					
number					
Nonpriority	creditor's name a	nd mailing address	As of the petition filing date, the claim is:	\$	Undetermine
Law Office of J	leffrey Krumpe		Check all that apply.		
Creditor Name			Contingent		
			☑ Unliquidated		
Creditor's Notice r	name		 ☑ Disputed		
110 SW Jeffere	eson		Basis for the claim:		
Address			Litigation		
Suite 410					
Peoria	IL	61602			
City	State	ZIP Code			
Country					
Date or date	s debt was incuri	red	Is the claim subject to offset?		
2/6/2024			☑ No		
Last 4 digits	of account				
-					

tor: Westside HC	D, LLC		Case number (if known):		24-10555	
Name				-		
9 Nonpriority cr	editor's name a	and mailing address	As of the petition filing date, the claim is:	\$_		300.00
Litton Enterprise Creditor Name	s Inc		Check all that apply.			
Creditor Name						
			Unliquidated			
Creditor's Notice na	me		Disputed			
3305 West Com	mercial Road		Basis for the claim:			
Address			Trade Payable	_		
Marion	<u>IL</u>	62959				
City	State	ZIP Code				
Country						
	debt was incur	red	Is the claim subject to offset?			
Various			⊠ No			
Last 4 digits o	f account					
number						
0 Nonpriority cr	editor's name a	and mailing address	As of the petition filing date, the claim is:	\$		164,135.77
Martin Bros Creditor Name			Check all that apply.			
Creditor Name			Contingent			
			Unliquidated			
Creditor's Notice na	me		□ Disputed			
406 Viking Road	1		Basis for the claim:			
Address			Trade Payable	_		
Cedar Falls	ΙΑ	50613				
City	State	ZIP Code				
Country						
	debt was incur	red	Is the claim subject to offset?			
Various			✓ No			
Last 4 digits o	f account					
number						

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ebtor: Westside HC	O, LLC		Case number (if known):	24-10555	5
Name					
		and mailing address	As of the petition filing date, the claim is:	\$	32,236.55
Mc Kesson Med	lical- Surgical		Check all that apply.		
Creditor Name			Contingent		
			Unliquidated		
Creditor's Notice na	ime		Disputed		
PO Box 630693			Basis for the claim:		
Address			Trade Payable		
Cincinnati		452620602			
Cincinnati	OH State	452630693			
City	State	ZIP Code			
Country			Is the claim subject to offset?		
	debt was incur	red			
Various	of account		№ No Yes		
Last 4 digits o					
number					
3.22 Nonpriority c	reditor's name a	and mailing address	As of the petition filing date, the claim is:	\$	13,113.53
	tal of Carbondale		Check all that apply.		
Creditor Name			Contingent		
			Unliquidated		
Creditor's Notice na	ime		Disputed		
Southern IL Hos	spital Services		Basis for the claim:		
Address	<u>p</u>		Trade Payable		
405 West Jacks	on Street				
Carbondale	IL	62901462			
City	State	ZIP Code			
Country					
Date or dates	debt was incur	red	Is the claim subject to offset?		
Various			✓ No		
Last 4 digits o	of account		□ Yes		
number					

r: Westside HC	JO, LLC		Case number (if known):	24-10555	
Name					
Nonpriority c	reditor's name a	and mailing address	As of the petition filing date, the claim is:	\$	33,242.
Omnicare Creditor Name			Check all that apply.		
Creditor Name					
			Unliquidated		
Creditor's Notice n	ame		Disputed		
Department781	668		Basis for the claim:		
Address			Trade Payable		
PO Box 78000				-	
Detroit	MI	482781668			
City	State	ZIP Code			
,					
Country			Is the claim subject to offset?		
	debt was incuri	red			
Date or dates Various Last 4 digits		red	□ Yes		
Various		red	☑ No		
Various Last 4 digits number	of account	red	☑ No	\$	9,670.
Various Last 4 digits number Nonpriority c PEL/VIP	of account		✓ No □ Yes	\$	9,670.
Various Last 4 digits number Nonpriority c	of account		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply.	\$	9,670.
Various Last 4 digits number Nonpriority c PEL/VIP	of account		 ✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent 	\$	9,670.
Various Last 4 digits number Nonpriority c PEL/VIP	of account reditor's name a		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated	\$	9,670.
Various Last 4 digits number Nonpriority c PEL/VIP Creditor's Notice n	of account reditor's name a		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed	\$	9,670.
Various Last 4 digits of number Nonpriority c PEL/VIP Creditor Name	of account reditor's name a		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim:	\$	9,670.
Various Last 4 digits of number Nonpriority c PEL/VIP Creditor Name Creditor's Notice no 9840 Southwes	of account reditor's name a		✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed	\$	9,670.
Various Last 4 digits number Nonpriority c PEL/VIP Creditor's Notice n 9840 Southwes Address	of account reditor's name a ^{ame}	Ind mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim:	\$	9,670.
Various Last 4 digits number Nonpriority c PEL/VIP Creditor's Notice n 9840 Southwes Address Oak Lawn	of account reditor's name a ame it Highway	and mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim:	\$	9,670.
Various Last 4 digits number Nonpriority c PEL/VIP Creditor's Notice n 9840 Southwes Address	of account reditor's name a ^{ame}	Ind mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim:	\$	9,670.
Various Last 4 digits number Nonpriority c PEL/VIP Creditor's Notice n 9840 Southwes Address Oak Lawn	of account reditor's name a ame it Highway	and mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim: Trade Payable	\$	9,670.
Various Last 4 digits number Nonpriority c PEL/VIP Creditor's Notice n 9840 Southwes Address Oak Lawn City Country	of account reditor's name a ame it Highway	and mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim: Trade Payable □ Is the claim subject to offset?	\$	9,670.
Various Last 4 digits number Nonpriority c PEL/VIP Creditor's Notice n 9840 Southwes Address Oak Lawn City Country	of account areditor's name a ame at Highway	and mailing address	✓ No □ Yes As of the petition filing date, the claim is: Check all that apply. □ Contingent □ Unliquidated □ Disputed Basis for the claim: Trade Payable	\$	9,670.

Case 24-10443-TMH Doc 418 Filed 05/31/24 Page 42 of 52

tor: Westside HCO, LLC			Case number (if known):	24-10555	
Name					
25 Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is:	\$1,32	
Presto- X			Check all that apply.		
Creditor Name			□ Contingent		
			Unliquidated		
Creditor's Notice r	name				
PO Box 14095	i		Basis for the claim:		
Address			Trade Payable		
Reading	PA	19612			
City	State	ZIP Code			
Country					
Date or dates	s debt was incuri	red	Is the claim subject to offset?		
Various			✓ No		
Last 4 digits	of account				
RecoverCare L		nd mailing address	As of the petition filing date, the claim is: S Check all that apply.	\$4,51	
Creditor Name			Contingent		
dba Joerns LL(С		Unliquidated		
Creditor's Notice r	name				
PO Box 93644	6		Basis for the claim:		
Address	<u> </u>		Trade Payable		
Atlanta	GA	31193-6446			
City	State	ZIP Code			
Country					
Date or dates	s debt was incuri	red	Is the claim subject to offset?		
Various			✓ No		
Last 4 digits	of account				
number					

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or: Westside HC	CO, LLC		Case number (if known):	24	-10555
Name					
Nonpriority c RehabCare	reditor's name a	and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	128,812.9
Creditor Name			Contingent		
Creditor's Notice n	iame		Disputed		
PO Box 71985			Basis for the claim:		
Address			Trade Payable		
Chicago	IL	60694-1985			
City	State	ZIP Code			
Country					
	s debt was incurr	red	Is the claim subject to offset? ☑ No		
Various	of account		U Yes		
number					
Nonpriority c	creditor's name a	and mailing address	As of the petition filing date, the claim is:	\$	9,724.6
Rend Lake Plur	mbing & Heating Ind		Check all that apply.	·	
Creditor Name			Contingent		
			Unliquidated		
Creditor's Notice n	iame		□ Disputed		
PO Box 25			Basis for the claim:		
Address			Trade Payable		
Bonnie	IL	62816			
City	State	ZIP Code			
Country					
	s debt was incurr	red	Is the claim subject to offset?		
Various			✓ No		
Last 4 digits					

or: Westside HCO, LLC	Case number (if known):	:	24-10555	
Name		_		
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$_		3,000.0
S I H Medical Group Creditor Name	Check all that apply.			
Creator Name	□ Contingent			
Creditor's Notice name	Disputed			
PO Box 3988	Basis for the claim:			
Address	Trade Payable	_		
Carbondale IL 62901				
City State ZIP Code				
Country				
Date or dates debt was incurred	Is the claim subject to offset?			
Various	☑ No			
Last 4 digits of account	Yes			
number		<u>,</u>		100 577
number Nonpriority creditor's name and mailing address Select Rehabilitation LLC	As of the petition filing date, the claim is: Check all that apply.	\$_		138,577.
number Nonpriority creditor's name and mailing address		\$_		138,577.
number Nonpriority creditor's name and mailing address Select Rehabilitation LLC Creditor Name	Check all that apply.	\$_		138,577.
number Nonpriority creditor's name and mailing address Select Rehabilitation LLC	Check all that apply.	\$_		138,577.
number Nonpriority creditor's name and mailing address Select Rehabilitation LLC Creditor Name	Check all that apply. Contingent Unliquidated	\$_		138,577.
number Nonpriority creditor's name and mailing address Select Rehabilitation LLC Creditor Name Creditor's Notice name	Check all that apply. Contingent Unliquidated Disputed	\$_		138,577.
number Nonpriority creditor's name and mailing address Select Rehabilitation LLC Creditor Name Creditor's Notice name PO Box 71985	Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$_		138,577.
number Nonpriority creditor's name and mailing address Select Rehabilitation LLC Creditor Name Creditor's Notice name PO Box 71985	Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$_		138,577.
number Nonpriority creditor's name and mailing address Select Rehabilitation LLC Creditor Name Creditor's Notice name PO Box 71985 Address	Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$_		138,577.
number Nonpriority creditor's name and mailing address Select Rehabilitation LLC Creditor Name Creditor's Notice name PO Box 71985 Address	Check all that apply. Check all that apply. Contingent Unliquidated Disputed Basis for the claim: Trade Payable	\$_		138,577.
Nonpriority creditor's name and mailing address Select Rehabilitation LLC Creditor Name Creditor's Notice name PO Box 71985 Address Chicago IL Chicago IL State ZIP Code	Check all that apply. Check all that apply. Contingent Unliquidated Basis for the claim: Trade Payable Is the claim subject to offset?	\$_		138,577.
Nonpriority creditor's name and mailing address Select Rehabilitation LLC Creditor Name Creditor's Notice name PO Box 71985 Address Chicago IL Chicago IL City State Country Google Country	Check all that apply. Check all that apply. Contingent Unliquidated Disputed Basis for the claim: Trade Payable	\$_		138,577.

Name Nonpriority creditor's name Shadow Fax Projects Creditor Name Creditor's Notice name PO Box 347 Address Sullivan IL City State Country Date or dates debt was incur	<u>61951</u> ZIP Code	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: Trade Payable Is the claim subject to offset?	\$	730.1
Shadow Fax Projects Creditor Name Creditor's Notice name PO Box 347 Address Sullivan IL City State	<u>61951</u> ZIP Code	Check all that apply. Check all that apply. Contingent Unliquidated Basis for the claim: Trade Payable Is the claim subject to offset?	\$	730.
Creditor Name Creditor's Notice name PO Box 347 Address Sullivan IL City State Country	ZIP Code	Contingent Unliquidated Basis for the claim: Trade Payable Is the claim subject to offset?	_	
PO Box 347 Address Sullivan IL City State Country	ZIP Code	Unliquidated Disputed Basis for the claim: Trade Payable Is the claim subject to offset?	_	
PO Box 347 Address Sullivan IL City State Country	ZIP Code	Disputed Basis for the claim: Trade Payable Is the claim subject to offset?	_	
PO Box 347 Address Sullivan IL City State Country	ZIP Code	Basis for the claim: Trade Payable Is the claim subject to offset?	-	
Address Sullivan IL City State Country	ZIP Code	Trade Payable	_	
Sullivan IL City State Country	ZIP Code	Is the claim subject to offset?	-	
City State Country	ZIP Code			
City State Country	ZIP Code			
	rred			
	rred			
Various		☑ No		
Last 4 digits of account				
Nonpriority creditor's name Shadow Fax Projects#2	and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	154
Creditor Name		Contingent		
		□ Unliquidated		
Creditor's Notice name		□ Disputed		
Medical Waste Account		Basis for the claim:		
Address		Trade Payable		
PO Box 5473			-	
Sullivan IL	61951			
City State	ZIP Code			
Country				
Date or dates debt was incu	rred	Is the claim subject to offset?		
Various		☑ No		
Last 4 digits of account				

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ebtor:	Westside HC	O, LLC		Case number (if known):	:	24-10555	
	Name						
			and mailing address	As of the petition filing date, the claim is:	\$		6.14
	outhern Illinois	Medical Services		Check all that apply.			
U	reallor Marine						
_							
С	reditor's Notice na	ame		Disputed			
D	r Shannon Rid	ler		Basis for the claim:			
A	ddress			Trade Payable			
<u>P</u>	O Box 3988				_		
	Carbondale	IL	62902				
	lity	State	ZIP Code				
C	Country						
D	ate or dates	debt was incur	red	Is the claim subject to offset?			
V	arious			☑ No			
L	ast 4 digits o	of account					
	umber						
		reditor's name a pedic Associates	and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$		368.02
	reditor Name	Sedic Associates					
C	reditor's Notice na	ame		Unliquidated			
-				Disputed			
	10 Lincoln Driv	/e		Basis for the claim:			
A	ddress			Trade Payable	_		
_							
Н	lerrin	IL	62948				
С	lity	State	ZIP Code				
C	Country						
D	ate or dates	debt was incur	red	Is the claim subject to offset?			
	arious			☑ No			
L	ast 4 digits o	of account					
n	umber						

or: Westside HCO, LLC	Case number (if known):	24-10555		
Name				
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$	926	
The Home Depot Pro Creditor Name	Check all that apply.			
Creditor's Notice name	Disputed			
13924 Collection Center Drive	Basis for the claim:			
Address	Trade Payable	-		
Chicago IL 60693-0126				
City State ZIP Code				
Country	Is the claim subject to offset?			
Date or dates debt was incurred				
Mariana	✓ No			
Various Last 4 digits of account number	☑ No □ Yes			
Last 4 digits of account number Nonpriority creditor's name and mailing address	 Yes As of the petition filing date, the claim is: 	\$	390	
Last 4 digits of account number	 Yes As of the petition filing date, the claim is: Check all that apply. 	\$	390	
Last 4 digits of account number Nonpriority creditor's name and mailing address Tri State Fire Protection Inc	 Yes As of the petition filing date, the claim is: Check all that apply. Contingent 	\$;	390	
Last 4 digits of account number Nonpriority creditor's name and mailing address Tri State Fire Protection Inc	 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated 	\$	390	
Last 4 digits of account number Nonpriority creditor's name and mailing address Tri State Fire Protection Inc Creditor Name Creditor's Notice name	 Yes As of the petition filing date, the claim is: Check all that apply. Contingent 	\$;	390	
Last 4 digits of account number Nonpriority creditor's name and mailing address Tri State Fire Protection Inc Creditor Name	 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed 	\$	390	
Last 4 digits of account number Nonpriority creditor's name and mailing address Tri State Fire Protection Inc Creditor Name Creditor's Notice name PO Box 70	 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: 	\$	390	
Last 4 digits of account number Nonpriority creditor's name and mailing address Tri State Fire Protection Inc Creditor Name Creditor's Notice name PO Box 70	 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: 	\$	<u>39(</u>	
Last 4 digits of account number Nonpriority creditor's name and mailing address Tri State Fire Protection Inc Creditor Name Creditor's Notice name PO Box 70 Address	 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: 	\$	390	
Last 4 digits of account number Nonpriority creditor's name and mailing address Tri State Fire Protection Inc Creditor Name Creditor's Notice name PO Box 70 Address	Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: Trade Payable	\$	390	
Last 4 digits of account number Nonpriority creditor's name and mailing address Tri State Fire Protection Inc Creditor Name PO Box 70 Address Newburgh IN 47629-0070 City State ZIP Code	 Yes As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: 	\$	390	

art 3	:	List Others to Be	Notified About Un	secured Claims		
4.	colle If no	ection agencies, assi	ignees of claims list	ed above, and attorneys f	isted in Parts 1 and 2. Examples of entities t or unsecured creditors. o not fill out or submit this page. If additiona	-
	Nam	e and mailing addre	SS		On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
					Line	
	Name)			Not Listed.Explain	
	Notice	e Name				
	Street	t				
	City		State	ZIP Code		
	Coun	itry				

Ρ

Part 4	Total Amounts of the Priority and Nonpriority Unsecured Claims			
5. Add	the amounts of priority and nonpriority unsecured claims.			
			Total of c	laim amounts
5a. T	otal claims from Part 1	5a.	\$	0.00
5b. T	otal claims from Part 2	5b. +	\$	594,893.00
	ines 5a + 5b = 5c.	5c.	\$	594,893.00

Debtor Name: In re : Westside HCO, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 24-10555 (TMH)

Check if this is an amended filing

Official Form 206G Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- 🗵 No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Assets Real and Personal Property (Official Form 206A/B).

2.	List all contracts and unexpired leases	State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease					
	State what the contract or lease is for and the nature of the debtor's interest	Name					
		Notice Name					
	State the term remaining	Address					
	List the contract number ofany government contract						
		City State ZIP Code					
		Country					

Debtor Name: In re : Westside HCO, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 24-10555 (TMH)

Official Form 206H

Schedule H: Codebtors

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

□ Yes

 In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

	Column 1: Codebtor				Column 2: Creditor	
	Name	Mailing address			Name	Check all schedules that apply:
2.1						
		Street				
						□ E/F
						□G
		City	State	ZIP Code		
		0.1.7		2 0000		
		Country	-			

Check if this is an amended filing

12/15

Debtor Name: In re : Westside HCO, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 24-10555 (TMH)

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration

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

Executed on 05/31/2024

MM / DD / YYYY

★ / s / David R. Campbell

Signature of individual signing on behalf of debtor

David R. Campbell

Printed name

Authorized Signatory

Position or relationship to debtor

IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF DELAWARE

In re:

SC HEALTHCARE HOLDING, LLC, et al.,

Debtors.¹

Chapter 11

Case No. 24-10443 (TMH)

(Jointly Administered)

STATEMENT OF FINANCIAL AFFAIRS FOR WESTSIDE HCO, LLC (CASE NO. 24-10555)

¹ The last four digits of SC Healthcare Holding, LLC's tax identification number are 2584. The mailing address for SC Healthcare Holding, LLC is c/o Petersen Health Care Management, LLC 830 West Trailcreek Dr., Peoria, IL 61614. Due to the large number of debtors in these Chapter 11 Cases, for which the Debtors have requested joint administration, a complete list of the Debtors and the last four digits of their federal tax identification numbers is not provided herein. A complete list of such information will be made available on a website of the Debtors' proposed claims and noticing agent at www.kccllc.net/Petersen.

Debtor Name: In re : Westside HCO, LLC

United States Bankruptcy Court for the: District Of Delaware

Case number (if known): 24-10555 (TMH)

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1:	Income
---------	--------

1. Gross revenue from business

□ None

Identify the beginning and may be a calendar year	dates of the debtor's fis	Sources of revenue Gross revenue Check all that apply (before deductions and exclusions)						
From the beginning of the fiscal year to filing date:	From	1/1/2024 MM / DD / YYYY	to	Filing date	☑	Operating a business Other	\$	614,065.36
For prior year:	From	1/1/2023 MM / DD / YYYY	to	12/31/2023 MM / DD / YYYY	_ _ _	Operating a business Other	\$	3,395,152.52
For the year before that:	From	1/1/2022 MM / DD / YYYY	to	12/31/2022 MM / DD / YYYY		Operating a business Other	\$	2,588,655.98

Case number (if known):

Name

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. Non-business income may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

□ None

					Description of sources of revenue	Gross revenue source (before deduction exclusions)	
From the beginning of the fiscal year to filing date:	From	1/1/2024 MM / DD / YYYY	to	Filing date	Interest	\$	1.75
For prior year:	From	1/1/2023 MM / DD / YYYY	to	12/31/2023 MM / DD / YYYY	Interest	\$	4.93
For the year before that:	From	1/1/2022 MM / DD / YYYY	to	12/31/2022 MM / DD / YYYY	Interest	\$	568.63

24-10555 Case number (if known):

Name

Debtor:

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers-including expense reimbursements-to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

□ None

	Creditor's name an	d address		Dates	Total amount or value	Reasons for payment or transfer Check all that apply			
3.1	See SOFA 3 Attachr	ment			\$		Secured debt		
	Creditor's Name						Unsecured loan repayments		
							Suppliers or vendors		
	Street						Services		
							Other		
	-								
	City	State	ZIP Code						
	Country								

Payments or other transfers of property made within 1 year before filing this case that benefited any insider 4.

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7.575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. Insiders include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

□ None

2

Insider's Name	and Address		Dates	Total amount or value	Reason for payment or transfer
	reference Global Notes for additional tion related to Intercompany nts/Transfers			\$	
Insider's Name					
Street			_		
			_		
City	State	ZIP Code	_		
Country			_		
Relationship to	Debtor				

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☑ None					
Creditor's Name and	Address		Description of the Property	Date	Value of property
5.1 Creditor's Name					\$
Street					
City	State	ZIP Code	_		
Country			_		

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

□ None

Creditor's Nan	ne and Add	ress	Description of the action creditor took	Date action was taken	Amount	
Bed Tax Creditor's Name			Offset with Medicaid		\$	211,186.37
Street			Last 4 digits of account number: XXXX-		-	
City	State	ZIP Code	-			
Country			-			

24-10555 Case number (if known):

Name

□ None

Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity-within 1 year before filing this case.

	Case title	Nature of case	Court or agency's	Status of case			
7.1 <u>S</u> e	ee SOFA 7 Attachment		Name				Pending On appeal
			Street				Concluded
	Case number						
_			City	State	ZIP Code		
			Country				

Assignments and receivership 8.

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☑ None

	Custodian's nam	ne and addre	SS	Description of the Property		Value			
8.1					\$	6			
	Custodian's name				Court name and address				
				Case title					
	Street					Name			
				Case number		Street			
	City	State	ZIP Code						
	Country			Date of order or assignment		City		State	ZIP Code
				Date of order of assignment					
						Country			

Part 4: Certain Gifts and Charitable Contributions

- 9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000
 - $\ensuremath{\boxtimes}$ None

	Recipient's name	and addres	SS	Description of the gifts or contributions	Dates given	Value
9.1						\$
	Creditor's Name					
	Street			-		
	City	State	ZIP Code	-		
	Country Recipient's relation	onship to de	btor	-		
	Recipient's relation	onship to de	btor			

Part 5:	Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

None

	Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss		Value of property lost	
10.1	A ransomware cyber attack which occurred in October 2023, ultimately led to the loss of large quantities of data and signficant consulting fees	None	10/2023	\$	Undetermined	

24-10555 Case number (if known):

Name

Debtor:

Part 6: **Certain Payments or Transfers**

Payments related to bankruptcy 11.

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

\checkmark	None
--------------	------

	Who was paid or v	vho received t	he transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1						\$
	Address					
	Street					
	City	State	ZIP Code			
	Country					
	Email or website a	ddress				
	Who made the pay	/ment, if not de	ebtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device. Do not include transfers already listed on this statement.

☑ None

	Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
12.1				\$
	Trustee			

13. Transfers not already listed on this statement

List any transfers of money or other property - by sale, trade, or any other means - made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☑ None

1

	Who received trar	isfer?		Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
8.1						\$
	Address					
	Street					
	City	State	ZIP Code			
	Country					
	Relationship to De	ebtor				

Debtor:	We	estside HCO, L	Case 24-10443-TMH	Doc 418-1		Page 11 mber (if known):	of 26 24-10555			
	Nam	ne								
Part 7	7:	Previous Lo	ocations							
14.	Pre	evious addre	esses							
	List	t all previous	addresses used by the debtor w	ithin 3 years before fili	ng this case and the dat	es the address	ses were used.			
	☑ Does not apply									
		Address			Dates of occupancy					
	14.1				From		То			
		Street								
	-									
	-	City	State	ZIP Code						
	-	Country								

24-10555 Case number (if known):

Name

Part 8: **Health Care Bankruptcies**

15. Health Care bankruptcies

- Is the debtor primarily engaged in offering services and facilities for:
- diagnosing or treating injury, deformity, or disease, or
 providing any surgical, psychiatric, drug treatment, or obstetric care?
- □ No. Go to Part 9.
- \boxdot Yes. Fill in the information below.

	Facility Name and Address			Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1	1 Westside Rehabilitation & Care Center Facility Name		e Center	Skilled Nursing Facility	1,398
	601 North Columbia St. Street			Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept? Check all that apply:
	West Frankfort City	IL State	62896 ZIP Code	-	Paper

Country

Debtor:	Westside HCC	Case 24-10443-TMH	Doc 418-1	Filed 05/31/24 Page 13 of 26 Case number (if known): 24-10555	
	Name				_
Part 9	Personal	ly Identifiable Information			
16.	Does the deb	tor collect and retain personally i	dentifiable inform	nation of customers?	
I	🗆 No.				
I	Yes. State	the nature of the information collect	ed and retained.	Medical and Billing Information	_
	Doe	s the debtor have a privacy policy at	oout that informatio	on?	
		No			
	\checkmark	Yes			
	pension or pro	ofit-sharing plan made available b		e debtor been participants in any ERISA, 401(k), 403(b), or ot n employee benefit?	her
v	Z Yes. Does	the debtor serve as plan administra	tor?		
	⊠ N	o. Go to Part 10.			
		es. Fill in below:			
		Name of plan		Employer identification number of the plan	
	17.	1		EIN:	
		Has the plan been terminated?			

□ Yes

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☑ None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1	Name	XXXX	Checking		\$
	Street	-	Money market		
	City State ZIP Code	-			

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

$\ensuremath{\boxtimes}$ None

	Depository institut	ion name and addı	ess	Names of anyone with access to it	Description of the contents	Does debtor still have it?
9.1						□ No
	Name					
	<u></u>					□ Yes
	Street					
				Address		
	City	State	ZIP Code			
	Country					

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

□ None

	Facility name and	address		Names of anyone with access to it	Description of the contents	Does debtor still have it?
20.1	See Global Notes	;				□ No
	Name				·	-
						□ Yes
	Street					
				_		
				Address		
	City	State	ZIP Code			
	Country				-	

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

□ None

	Owner's name and add	ress	Location of the property	Description of the property	Value
21.1	See Global Notes				\$
	Street		-		
	City State	ZIP Code	-		
	Country		-		

Case number (if known): 24-10555

Name

Debtor:

Part 12: **Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- . Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

☑ No

□ Yes. Provide details below.

	Case title	Court or agency	/ name and addre	SS	Nature of the case	Sta	tus of case
22.1		Name					Pending On appeal
		Street					Concluded
	Case Number						
		City	State	ZIP Code			
		Country					

- Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of 23. an environmental law?
 - ☑ No
 - □ Yes. Provide details below.

	Site name and	address		Governmenta address	al unit name a	nd	Environmental law, if known	Date of notice
23.1	Name			Name				
	Street			Street				
	City	State	ZIP Code	City	State	ZIP Code		
	Country			Country				

ebtor:	West	side HCO,		10443-TMF	H Doc	418-1	Filed 05/31		Page 18		
55101.	Name							Case ne		24 10000	
4.	Has th	ne debtor	notified any	governmental ur	nit of any r	elease of h	azardous materia	?			
	⊠ No)									
	□ Ye	es. Provid	e details below								
		Site nan	ne and addres	s	Governme	ental unit na	ame and address	Envir	onmental law	, if known	Date of notice
	24.1										
		Name			Name						
		Street			Street						
		City	State	ZIP Code	City	State	ZIP Code				
		Country			Country						

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☑ None

	Business name	and address	3	Describe the nature of the business		f ication number ocial Security number or ITIN	1.
5.1					EIN:		
	Name				Dates business	existed	
				_	From	То	
	Street			-			
				-			
	City	State	ZIP Code	-			
	City	Sidle	ZIF Code				
				-			
	Country						

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

Name and Addre	ess		Dates of service				
1.1 Petersen Health (Name 830 West Trailcre	Care Management, LLC		From	То			
Street			-				
Peoria	IL	61614					
City	State	ZIP Code	_				
Country			_				

List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

	lone
--	------

□ None

l	Name and Address				of service		
-	Petersen Healthcare Management, Mark Petersen Name				12/22/2011	То	Present
-	830 West Trailcreek Dr. Street						
	Peoria	IL	61614				
	City	State	ZIP Code				

Wes	tside HCO, LLC	e 24-10443-1	MH Doc 418-1	Filed		Page 20 0 nber (if known): 2	4-10555
Name							
26b	.2 Ginoli & Compa	any		From	2002	То	Present
	Name			_			
	7625 N Univers	sity St.					
	Street			_			
	Peoria	IL	61614	_			
	City	State	ZIP Code	_			
	Country			_			
26b	.3 Clifton, Larson,	Allen		From	2012	То	Present
	Name						
	301 SW Adams	s St.					
	Street			_			
	Suite 1000						
	Peoria	IL	61602	_			
	City	State	ZIP Code	_			
	Country			_			
l ist a	ll firms or individu	als who were in pos	session of the debtor's boo	oks of acc	ount and records	when this case	is filed
u							

Name and address			If any books of account and records are unavailable, explain why
6c.1 Getzler Henrich and Associates			
Name			
295 Madison Ave			
Street			
Floor 20			
New York	NY	10023	
City	State	ZIP Code	
Country			
Name and address			If any books of account and records are unavailable, explain why
6c.2 Ginoli & Company			
Name			
7625 N University St.			
Street			
Peoria	IL	61614	
City	State	ZIP Code	
Country			

r: Wes	Case 24-10443-1MH Doc 418-1 Filed 05/31/24 Page 21 01 26 Westside HCO, LLC Case number (if known): 24-10555							
Name								
	Name and address			If any books of account and records are unavailable, explain why				
26c.3	Petersen Healthcare Management, Mark P	etersen						
	Name							
	830 West Trailcreek Dr.							
	Street			-				
	Peoria	IL	61614	-				
	City	State	ZIP Code	-				
	Country			-				
	Name and address			If any books of account and records are unavailable, explain why				
26c.4	Clifton, Larson, Allen							
	Name							
	301 SW Adams St.							
	Street			_				
	Suite 1000			-				
	Peoria	IL	61602	_				
	City	State	ZIP Code					
	Country			-				

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

Non	ne		
	Name and address		
	Name		
	Street	 	
	City	 State	ZIP Code
	Country		

Debtor:	Westside HCO,	Case 24-10443-TMH	Doc 418-1		Page 22 mber (if known):	of 26 24-10555
	Name					
27. In	ventories					
H	ave any invento	pries of the debtor's property been t	taken within 2 years	before filing this case?		
V	1 No					
	Yes. Give the	e details about the two most recent	inventories.			

Name	of the person who supervised	the taking of the inventory	Date of Inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
				\$\$
Name a record		o has possession of inventory		
.1				
Name				
Street			_	
City	State	ZIP Code	_	
Country				

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and Nature of any interest	% of interest, if any
28.1 Mark B. Petersen	830 West Trailcreek Dr. , Peoria, IL 61614	Member	1%
28.2 SABL, LLC	830 West Trailcreek Dr. , Peoria, IL 61614	Manager	99%

- 29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?
 - 🗹 No
 - \Box Yes. Identify below.

	Name	Address	Position and Nature of any interest	Period during which interest was held	ch position or
29.1				From	То

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- 🗆 No
- ✓ Yes. Identify below.

		Name and address o	of recipient		Amount of money or description and value of property	Dates	Reason for providing the value
	30.1	See SOFA Question	4				
		Name					
		Street					
		City	State	ZIP Code			
		Country					
		Relationship to debt	tor				
31.	Withir	6 years before filin	ng this case, ha	as the debtor b	peen a member of any	y consolidated group for	tax purposes?
	⊠ No						

□ Yes. Identify below.

	Name of the parent corporation	Employer Identification number of the parent corporation
31.1		EIN:

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☑ No	
□ Yes. Identify below.	
Name of the pension fund	Employer Identification number of the pension fund
32.1	EIN:

Part 14: Signature and Declaration Case 24-10443-TMH Doc 418-1 Filed 05/31/24 Page 24 of 26

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C.§§ 152, 1341, 1519, and 3571.

I have examined the information in this Statement of Financial Affairs and any attachments and have a reasonable belief that the information is true and correct.

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

Executed on 05/31/2024

MM / DD / YYYY

X / s / David R. Campbell

Printed name David R. Campbell

Signature of individual signing on behalf of the debtor

Position or relationship to debtor Authorized Signatory

Are additional pages to Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy (Official Form 207) attached?

□ No

⊠ Yes

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In re: Westside HCO, LLC Case No. 24-10555 Attachment 3

Certain payments or transfers to creditors within 90 days before filing this case

Creditor's name	Address 1	Address 2	City	State	Zip	Date	Total amount or value	Reason for payment or transfer (e.g. Secured debt, Unsecured Ioan repayments, Suppliers or vendors, Services, or Other)
SIH Medical Group	PO Box 3988		Carbondale	IL	62901	1/3/2024	\$1,500.00	Vendor
SIH Medical Group	PO Box 3988		Carbondale	IL	62901	1/17/2024	\$1,500.00	Vendor
SIH Medical Group	PO Box 3988		Carbondale	IL	62901	2/5/2024	\$1,000.00	Vendor
SIH Medical Group	PO Box 3988		Carbondale	IL	62901	2/29/2024	\$4,500.00	Vendor

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In re: Westside HCO, LLC

Case No. 24-10555 Attachment 7

Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

Case Title	Case number	Nature of case	Court name	Court address 1	Court City	Court State	Court Zip	Status of case (e.g. Pending, On appeal, Concluded)
SELECT REHABILITATION, LLC PLAINTIFF V. MIDWEST HEALTH OPERATIONS, LLC; PETERSEN HEALTH CARE - FARMER CITY, LLC; PETERSEN HEALTH CARE - ILLINI, LLC; PETERSEN HEALTH CARE • OZARK, LLC; PETERSEN HEALTH CARE - WESTSIDE, LLC; PETERSEN HEALTH CARE - WESTSIDE, LLC; PETERSEN HEALTH CARE - ROSEVILLE, LLC; PETERSEN HEALTH CARE V, LLC; PETERSEN HEALTH CARE VII, LLC; PETERSEN HEALTH CARE, INC.; PETERSEN HEALTH ENTERPRISES, LLC; PETERSEN HEALTH CARE - ROSEVILLE, LLC; PETERSEN HEALTH CARE V, LLC; PETERSEN HEALTH CARE VII, LLC; PETERSEN HEALTH CARE, INC.; PETERSEN HEALTH ENTERPRISES, LLC; PETERSEN HEALTH OPERATIONS, LLC; PETERSEN HEALTH QUALITY, LLC; PETERSEN MANAGEMENT COMPANY, LLC; SJL HEALTH SYSTEMS, INC.; ALEDO HCO, LLC; CARCOLA HCO, LLC; CASEY HCO, LLC; CHARL ESTON HCO, LLC; COLLINSVILLE HCO, LLC; CUMBERLAND HCO, LLC; CASEY HCO, LLC; CARL ESTON HCO, LLC; COLLINSVILLE HCO, LLC; CUMBERLAND HCO, LLC; CASEY HCO, LLC; CASEY HCO, LLC; MAVANA HCO, LLC; PETERSEN HEALTH BUSINESS, LLC; PETERSEN HEALTH JUNCTION, LLC; PETERSEN HEALTH RESOURCES, LLC; PETERSEN HEALTH & WELLNESS, LLC; PIPER HCO, LLC; PLEASANT VIEW HCO, LLC; PRAIRIE CITY HCO, LLC; ROBINGS HCO, LLC; ROSICLARE HCO, LLC; SHELBYVILLE HCO, LLC; SULLIVAN HCO, LLC; SWANSEA HCO, LLC; TARKIO HCO, LLC; TUSCOLA HCO, LLC; SHAN GRI LA HCO, LLC; WANSEA HCO, LLC; WATSEKA HCO, LLC; AND WESTSIDE HCO, LLC, DEFENDANTS			10th Judicial Circuit Court of					
	2024-LA-0000030	Undeterminable	Ш	324 Main St. Ste. 215	Peoria	IL	61602	Pending