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#### 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 PIPER HCO, LLC (CASE NO. 24-10573)

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.



# 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

# 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 "Petition Date"), 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 "Bankruptcy Code") with the United States Bankruptcy Court for the District of Delaware (the "Court"). 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.<sup>2</sup>

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.

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 "Data Breach"). 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 "Change Cyberattack"). 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 continue to assess the impact of the Change Cyberattack, the attack has affected 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. Reservation of Rights. 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.
- **Basis of Presentation.** 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 ("GAAP"), 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. Accounts Payable and Distribution System. The Debtors use a consolidated cash management system through which the Debtors pay substantially all liabilities and expenses (the "Cash Management System"). 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 Related Relief [Docket No. 41] filed on the Petition Date. Additional information regarding 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].
- Date of Valuations. 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.

- **Re-characterization.** 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, redesignate, 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. Property and Equipment.** 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.
- **Causes of Action.** 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. Executory Contracts and Unexpired Leases. 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. Classifications and Claims Descriptions. 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."
- Addresses of Employees, Residents, and Resident Contacts. 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.
- **Estimates.** 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

<u>Item 3</u>: 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.

<u>Item 11</u>: 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.
- <u>Item 62</u>: 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.

<u>Item 71</u>: 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.

<u>Items 74 and 75</u>: 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 "Resident Trust Accounts") 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.

<u>Question 26a</u>: 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.

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Fill in this information to identify the case:		
Debtor Name: In re : Piper HCO, LLC		
United States Bankruptcy Court for the: District of Delaware		Check if this is an
Case number (if known): 24-10573 (TMH)		amended filing
Official Form 206Sum		
Summary of Assets and Liabilities for N	Non-Individuals	12/15
Part 1: Summary of Assets		
Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)		
1a. Real property:		
Copy line 88 from Schedule A/B	\$_	0.00
1b. Total personal property:		
Copy line 91A from Schedule A/B		1,352,479.54
1c. Total of all property:		
Copy line 92 from Schedule A/B	\$_	1,352,479.54
Part 2: Summary of Liabilities		
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Fo	orm 206D)	
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 2068)	E/F)	
3a. Total claim amounts of priority unsecured claims:		
Copy the total claims from Part 1 from line 5a of Schedule E/F	\$ _	75,000.00
3b. Total amount of claims of nonpriority amount of unsecured claims	s:	
Copy the total of the amount of claims from Part 2 from line 5b of Sche	edule E/F + \$ _	1,087,092.98
4. Total liabilities		

Lines 2 + 3a + 3b .....

5,095,733.76

Fill in this information to identify the case:	
Debtor Name: In re : Piper HCO, LLC	
United States Bankruptcy Court for the: District of Delaware	☐ Check if thi
Case number (if known): 24-10573 (TMH)	amended fi

#### Official Form 206A/B

Part 1: Cash and cash equivalents

# 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.

	<u>-</u>				
1. <b>D</b>	Ooes the debtor have any cash or cash equiva	alents?			
	☐ No. Go to Part 2.				
v	Yes. Fill in the information below.				
A	All cash or cash equivalents owned or con	trolled by the debto	r	Current valu	e of debtor's interest
2. <b>C</b>	Cash on hand				
	2.1 None			\$	
3. <b>C</b>	Checking, savings, money market, or financia	l brokerage accounts	s (Identify all)		
N	lame of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number		
	3.1 PNC Bank	Commercial	3995		0.00
	3.2 PNC Bank	Government	3231	\$	0.00
	3.3 PNC Bank	Operating	2917	\$	0.00
4. <b>O</b>	Other cash equivalents (Identify all)				
	4.1 Non-Critical Repair Reserve			\$	36,738.36
	4.2 Property Insurance Escrow			\$	16,824.70
	4.3 Real Estate Tax Escrow			\$	12,318.14
5. <b>T</b> c	otal of Part 1				
	dd lines 2 through 4 (including amounts on an	v additional sheets).	Copy the total to line 80.	\$	65,881.20
		,			

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Debtor:	Piper HCO, LLC	Case number (if known):	24-10573
	Name		

ar	2: Deposits and prepayments	
6.	Does the debtor have any deposits or prepayments?	
	☐ No. Go to Part 3.	
	✓ Yes. Fill in the information below.	
		Current value 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	\$ 72,414.80
	8.2 Vendor Security Deposit Receivable	\$1,991.90
9.	Total of Part 2.	
	Add lines 7 through 8. Copy the total to line 81.	\$ 74,406.70

Page 17 of 58 Case 24-10443-TMH Doc 476 Filed 05/31/24 Piper HCO, LLC Case number (if known): Debtor: Name Accounts receivable Part 3: 10. Does the debtor have any accounts receivable?  $\ \square$  No. Go to Part 4.  $\ensuremath{\,\,^{\scalebox{}}}$  Yes. Fill in the information below. Current value of debtor's 11. Accounts receivable Description face amount doubtful or uncollectible accounts Accounts 11a. 90 days old or less: 1,207,758.51 - \$ 1,207,758.51 Receivables Note: See Global Notes Accounts 11b. Over 90 days old: Receivables - \$ Note: See Global Notes

12. Total of Part 3.

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

\$ 1,207,758.51

Case 24-10443-TMH Doc 476 Filed 05/31/24 Page 18 of 58

 Debtor:
 Piper HCO, LLC
 Case number (if known):
 24-10573

 Name
 24-10573

Par	t 4: Inv	restments				
13.	Does the d	ebtor own any investments?				
	☑ No. Go	to Part 5.				
	☐ Yes. Fil	I in the information below.				
				Valuation method used for current value	Current value of debtor's inte	rest
14.	Mutual fun	ds or publicly traded stocks not included in Part 1				
	Name of fun	d or stock:				
					\$	
15.		ly traded stock and interests in incorporated and uning interest in an LLC, partnership, or joint venture	incorporated businesses,			
	Name of ent	ity:	% of ownership:			
					_ \$	
16.		nt bonds, corporate bonds, and other negotiable and its not included in Part 1	I non-negotiable			
	Describe:					
				_	\$\$	
				ſ		
17.	Total of Pa				•	
	Add lines 1	4 through 16. Copy the total to line 83.			\$	0.00

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Debtor: Piper HCO, LLC 24-10573 Case number (if known):

Name

noi.			
	_		-

Inventory, excluding agriculture assets

18.	Does the debtor own any inventory (excluding agriculture assets)?  ☑ No. Go to Part 6.  ☐ Yes. Fill in the information below.				
	General description	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 materials		\$		\$
20.	Work in progress		\$\$		\$
21.	Finished goods, including goods held for re-				\$
22.	Other inventory or supplies		_ \$		\$
23.	<b>Total of Part 5.</b> Add lines 19 through 22. Copy the total to line 8	84.			\$
24.	Is any of the property listed in Part 5 perisha  ☐ No ☐ Yes	able?			
25.	Has any of the property listed in Part 5 been  □ No	purchased within 20 o	days before the bankruptcy was	s filed?	
	☐ Yes. Description Book value	ue\$	Valuation method	Current value	\$

□ No ☐ Yes

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

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Debtor: Piper HCO, LLC

Name

Case number (if known): 24-10573

Par	Farming and fishing-related assets (other	than titled motor vehicles	and land)				
27.	Does the debtor own or lease any farming and fishing-relate	ed assets (other than titled motor	r vehicles and land)?				
	No. Go to Part 7.						
	☐ 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			
28.	Crops—either planted or harvested						
		\$		<b>\$</b>			
29.	Farm animals Examples: Livestock, poultry, farm-raised fish	\$		\$\$			
30.	Farm machinery and equipment (Other than titled motor vehic	cles)					
		\$		\$			
31.	Farm and fishing supplies, chemicals, and feed	\$\$	_	\$\$			
32.	Other farming and fishing-related property not already lister	d in Part 6		\$			
		_					
33.	<b>Total of Part 6.</b> Add lines 28 through 32. Copy the total to line 85.			\$0.00			
34.	Is the debtor a member of an agricultural cooperative?  ☐ No						
	<ul><li>☐ Yes. Is any of the debtor's property stored at the cooperative</li><li>☐ No</li><li>☐ Yes</li></ul>	re?					
35	Has any of the property listed in Part 6 been purchased with	nin 20 days before the bankrunto	v was filed?				
55.	□ No	iii 20 dayo bololo illo ballia apto	y mao moa :				
	☐ Yes. Description Book value \$	Valuation method	d Cu	urrent value \$			
36.	Is a depreciation schedule available for any of the property $\hfill\Box$ $\hfill$ No	listed in Part 6?					

☐ Yes

□ No □ Yes

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

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Debtor:	Piper HCO, LLC	Case number (if known):	24-10573
	Name		

Pa	t 7: Office furniture, fixtures, and equipment; a	nd collectibles		
38.	Does the debtor own or lease any office furniture, fixtures,	equipment, or collectibles?		
	□ No. Go to Part 8.			
	☑ 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
39.	Office furniture			
	39.1 Total FFE from Balance Sheet	\$ 4,433.13	Net Book Value	\$ 4,433.13
40.	Office fixtures			
	40.1 See Schedule A/B 39	\$	-	\$
41.	Office equipment, including all computer equipment and communication systems equipment and software			
	41.1 See Schedule A/B 39	\$		\$
42.	<b>Collectibles</b> <i>Examples:</i> Antiques and figurines; paintings,prints books, pictures, or other art objects; china and crystal; stamp, card collections; other collections, memorabilia, or collectibles			
	42.1 None	\$	-	\$\$
43.	Total of Part 7.			
	Add lines 39 through 42. Copy the total to line 86.			\$ 4,433.13
44.	Is a depreciation schedule available for any of the property	listed in Part 7?		
	☑ No			
	□ Yes			
45.	Has any of the property listed in Part 7 been appraised by	a professional within the last	year?	
	☑ No			
	□ Yes			

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 Debtor:
 Piper HCO, LLC
 Case number (if known):
 24-10573

 Name
 24-10573

Part	8: Machinery, equipment, and vehicles			
46.	Does the debtor own or lease any machinery, equipment, o  ✓ No. Go to Part 9.  ✓ Yes. Fill in the information below.	or vehicles?		
	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled			\$
48.	Watercraft, trailers, motors, and related accessories Examp floating homes, personal watercraft, and fishing vessels			\$
49.	Aircraft and accessories	\$		\$
50.	Other machinery, fixtures, and equipment (excluding farm	machinery and equipment)		\$
51.	<b>Total of Part 8.</b> Add lines 47 through 50. Copy the total to line 87.		:	\$0.00
52.	Is a depreciation schedule available for any of the property  □ No □ Yes	y listed in Part 8?		
53.	Has any of the property listed in Part 8 been appraised by	a professional within the last	year?	

□ No
□ Yes

Case 24-10443-TMH Doc 476 Filed 05/31/24 Page 23 of 58 Piper HCO, LLC Case number (if known): Debtor: Name Part 9: Real property Does the debtor own or lease any real property? ☑ No. Go to Part 10.  $\hfill \hfill \hfill$ 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** Net book value of Nature and extent of Valuation method Include street address or other description such as debtor's interest Current value of Assessor Parcel Number (APN), and type of property (for debtor's interest in used for current debtor's interest property value example, acreage, factory, warehouse, apartment or office (Where available) building), if available. 55.1 56. Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88. 0.00 \$ 57. Is a depreciation schedule available for any of the property listed in Part 9? □ No □ Yes 58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

□ Yes

Case 24-10443-TMH Doc 476 Filed 05/31/24 Page 24 of 58

Debtor: Piper HCO, LLC

Name

Intangibles and intellectual property

63. Customer lists, mailing lists, or other compilations

63.1 Customer / patient list

64. Other intangibles, or intellectual property

64.1 None

Part 10:

Case number (if known): 24-10573

59.	Does the debtor have any interests in intangibles or intellectual	property?			
	□ No. Go to Part 11.				
	☑ Yes. Fill in the information below.				
	General description	Net book value of debtor 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	\$ Undetermin	ed	\$ Undetermine	ed

65.	Goodwill		
	65.1 None	\$ 	\$
36.	Total of Part 10.		
	Add lines 60 through 65. Copy the total to line 89.		\$ 0.00

0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

 $\square$  No

✓ 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 24-10443-TMH Doc 476 Filed 05/31/24 Page 25 of 58

Debtor: Piper HCO, LLC

All other assets

Part 11:

, r · · · · · · · · · · · · · · · · · ·	Case Humber (II known).	21 10070	
Namo			

70.	Does the de Include all in	ebtor own any other assets that have reterests in executory contracts and unexp	not yet been reported opired leases not previous	on this form? sly reported on this	s form.		
	□ No. Go	to Part 12.					
	✓ Yes. Fill	I in the information below.					
							Current value of debtor's interest
71.	Notes rece						
	•	<b>0</b> /	Total face amount		collectible accounts		
	71.1	None	\$	\$		_ = <b>-3</b>	<b>\$</b>
72.	Tax refund	s and unused net operating losses (N	OLs)				
	Description	(for example, federal, state, local)	_				
	72.1	None		Tax year _			\$
73.	Interests in	n insurance policies or annuities					
							\$
					_		<u> </u>
74.	Causes of	action against third parties (whether o	or not a lawsuit				
		See Global Notes					\$
	77.1				_		Ψ
		Nature of claim			=		
		Amount requested	\$		-		
75.	Other cont every natu	ingent and unliquidated claims or cau re, including counterclaims of the deb ms	uses of action of otor and rights to				
	75.1	None					\$
		Nature of claim			_		
		Amount requested	\$		_		
76.	· · ·	itable or future interests in property					
	76.1	None			_		\$
77.		erty of any kind not already listed Exa membership	amples: Season tickets,				
	77.1	None			_		\$
78	Total of Pa	rt 11				Г	
70.		1 through 77. Copy the total to line 90.					\$ 0.00
79.	Has any of	the property listed in Part 11 been app	praised by a profession	nal within the last	year?		
	✓ No						
	□ Yes						

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Debtor: Piper HCO, LLC

Name

Case number (if known): 24-10573

#### Part 12: Summary

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

	Type of property	 t value of al property		Current value of real property	
80.	Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 65,881.20			
81.	Deposits and prepayments. Copy line 9, Part 2.	\$ 74,406.70			
82.	Accounts receivable. Copy line 12, Part 3.	\$ 1,207,758.51			
83.	Investments. Copy line 17, Part 4.	\$ 0.00			
84.	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.	\$ 4,433.13			
	Copy line 43, Part 7.				
87.	Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$ 0.00	-		
88.	Real property. Copy line 56, Part 9	 		\$ 0.00	_
89.	Intangibles and intellectual property. Copy line 66, Part 10.	\$ 0.00			
90.	All other assets. Copy line 78, Part 11.	\$ 0.00			
91.	Total. Add lines 80 through 90 for each column91a.	\$ 1,352,479.54	<b>+</b> 91b.	\$ 0.00	_
92.	Total of all property on Schedule A/B. Lines 91a + 91b = 92	 			\$

ebtor Name: In re: Piper HCO, LLC nited States Bankruptcy Court for the ase number (if known): 24-10573 (Ti	e: District of Delaware							_	eck if t ended	his is an I filing
Official Form 206D		ave Cl	aims	Secured	by Pro	pert	t <b>y</b>			12/15
e as complete and accurate a	ıs possible.				-					
Do any creditors have claims:  □ No. Check this box and subr □ Yes. Fill in all of the informat	mit page 1 of this form to		ith debtor's	s other schedules.	Debtor has no	thing el	se to report on	this fo	orm.	
rt 1: List Creditors Who H	lave Secured Claims									
List in alphabetical order all cre secured claim, list the creditor sep						Amo Do no value	mn A unt of claim ot deduct the			on B of collateral that orts this claim
2.1 Creditor's name		Describe of	debtor's p	roperty that is su	bject to a lien					
Ecapital Creditor's Name Creditor's mailing addre	ess	NonRE Pr	operty and	all Accounts		\$	3,933,640.7	<u>'8</u> \$	<u> </u>	Undetermined
Notice Name		Describe NonReal B		Financial						
20807 Biscayne Blvd		- Nonkear L	-state and	Tillalicial						
Street Suite 203		Is the cre	ditor an in	sider or related	party?					
		☑ No			-					
Aventura FL State	33180 ZIP Code	☐ Yes								
Occupation		ls anyone	olco liabl	e on this claim?						
Country  Creditor's email addres	s, if known	□ No		nedule H: Codebto	rs(Official Forn	n 206H)	).			
Date debt was incurred		-			•					
Last 4 digits of account number	t	Check all t		ing date, the clai	m is:					
Do multiple creditors has same property?	ave an interest in the	_	uidated							
☑ No										
Yes. Have you alre relative priority?										
☐ No. Specify eac creditor, and its	th creditor, including this relative priority.									
☐ Yes. The relative specified on line	ve priority of creditors is									

#### 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
Name			Line	
Notice Name				
Street				
City	State	ZIP Code		
Country				

Fill in this information to identify the case:	l
Debtor Name: In re : Piper HCO, LLC	
United States Bankruptcy Court for the: District of Delaware	
Case number (if known): 24-10573 (TMH)	

#### 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 Unsecure	d Claims

- 1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).
  - ☐ 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 clain	n	Priority ar	nount
Priority creditor's name and mailing address IDPH/CMS		nd mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	25,000.00	\$	25,000.00
Creditor Name							
			☐ Unliquidated				
Creditor's Notice n	ame		_ □ Disputed				
535 West Jeffe	rson Street						
Address			Basis for the claim:				
			Taxes				
				_			
Springfield	IL	62761	_				
City	State	ZIP Code	-				
Country			_				
Date or dates	s debt was inc	urred					
Various							
Last 4 digits number	of account			Is the cl ✓ No	laim subject	to offset?	
Specify Code	subsection o	of PRIORITY unsecur	ed	□ Yes			
claim: 11 U.S	.C. § 507(a) ( <u>8</u> )						

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r: Piper HCO, LLC	Cas	e number (if known):	24-10573	
Name				
Priority creditor's name and mailing address IDPH/CMS	As of the petition filing date, the claim is: \$  Check all that apply.	25,00	90.00 \$	25,000
Creditor Name	☐ Contingent			
	☐ Unliquidated			
Creditor's Notice name	· □ Disputed			
FOE West lefferens Chroat	□ Disputed			
535 West Jefferson Street Address	Basis for the claim:			
	Taxes			
Springfield IL 62761	_			
Springfield         IL         62761           City         State         ZIP Code	-			
- ,				
Country	_			
Date or dates debt was incurred				
Various				
Last 4 digits of account	_	Is the claim sul	biect to offset?	
			.,	
number  Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)	ed	☑ No □ Yes		
Specify Code subsection of PRIORITY unsecur	As of the petition filing date, the claim is: \$ Check all that apply.	□ Yes	00.00 \$	25,000
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address	As of the petition filing date, the claim is: \$ Check all that apply.	□ Yes	00.00 \$	25,000
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS	As of the petition filing date, the claim is: \$  Check all that apply.  Contingent	□ Yes	90.00 \$	25,000
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated	□ Yes	00.00 \$	25,000
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS  Creditor Name  Creditor's Notice name	As of the petition filing date, the claim is: \$  Check all that apply.  Contingent	□ Yes	90.00 \$	25,000
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS Creditor Name  Creditor's Notice name  535 West Jefferson Street	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed	□ Yes	00.00 \$	25,000.
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS  Creditor Name  Creditor's Notice name	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:	□ Yes	90.00 \$	25,000
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS Creditor Name  Creditor's Notice name  535 West Jefferson Street	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed	□ Yes	90.00 \$	25,000
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS  Creditor Name  Creditor's Notice name  535 West Jefferson Street  Address	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:	□ Yes	90.00 \$	25,000
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS  Creditor Name  Creditor's Notice name  535 West Jefferson Street  Address  Springfield  IL  62761	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:	□ Yes	\$	25,000.
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS  Creditor Name  Creditor's Notice name  535 West Jefferson Street  Address	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:	□ Yes	90.00 \$	25,000.
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS  Creditor Name  Creditor's Notice name  535 West Jefferson Street  Address  Springfield  IL  62761	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:	□ Yes	\$	25,000.
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS Creditor Name  Creditor's Notice name  535 West Jefferson Street Address  Springfield IL State 62761 ZIP Code	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:	□ Yes	\$	25,000.
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS  Creditor Name  Creditor's Notice name  535 West Jefferson Street  Address  Springfield  LL  State  G2761  ZIP Code	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:	□ Yes	90.00 \$	25,000
Specify Code subsection of PRIORITY unsecur claim: 11 U.S.C. § 507(a) (8)  Priority creditor's name and mailing address IDPH/CMS  Creditor Name  Creditor's Notice name  535 West Jefferson Street  Address  Springfield IL State 62761  ZIP Code  Country  Date or dates debt was incurred	As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:	□ Yes		25,000.

#### 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	
Nonpriority control		nd mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	31.50
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice na	name		☐ Disputed		
500 Park Boule	word		Basis for the claim:		
Address	evalu		Trade Payable		
Suite 1260				-	
ltanan		00440			
Itasca City	State	60143 ZIP Code			
Country					
,	s debt was incurr	ed	Is the claim subject to offset?		
Various			✓ No		
Last 4 digits of	of account		☐ Yes		
Nonpriority control  American Healtle  Creditor Name		nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent	\$	607.0
			☐ Unliquidated		
Creditor's Notice na	name		☐ Disputed		
671 Ohio Pike			Basis for the claim:		
Address			 Trade Payable		
Suite K				_	
Cincinnati	ОН	452452136			
Cincinnati	OH State	452452136 ZIP Code			
City		ZIP Code	Is the claim subject to offset?		
City	State s debt was incurr	ZIP Code	Is the claim subject to offset?  ☑ No □ Yes		

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or: Piper HCO, LLC  Name				24-10573	
Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is:	\$	588.1
Biotech X- Ray Inc			Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice name			☐ Disputed		
1065 Executive Parkway Drive			Basis for the claim:		
Address			Trade Payable		
Suite 220				_	
St Louis	MO	631416367			
City	State	ZIP Code			
Country			<u></u>		
Date or dates	debt was incurr	red	Is the claim subject to offset?		
Various					
-			☑ No 		
Last 4 digits o	of account				
Last 4 digits on number  Nonpriority cr Comcast Cable		nd mailing address		\$	224.0
Last 4 digits on number  Nonpriority cr		nd mailing address	☐ Yes  As of the petition filing date, the claim is:	\$	224.0
Last 4 digits on number  Nonpriority cr Comcast Cable		nd mailing address	☐ Yes  As of the petition filing date, the claim is:  Check all that apply.	\$	224.(
Last 4 digits on number  Nonpriority cr Comcast Cable	editor's name a	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply.  □ Contingent	\$	224.0
Last 4 digits on number  Nonpriority cr Comcast Cable Creditor Name	editor's name a	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated	\$	224.(
Nonpriority cr Comcast Cable Creditor Name  Creditor's Notice na	editor's name a	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply. □ Contingent □ Unliquidated □ Disputed	\$	224.0
Nonpriority cr Comcast Cable Creditor Name  Creditor's Notice na	editor's name a	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply. □ Contingent □ Unliquidated □ Disputed  Basis for the claim:	\$	224.0
Nonpriority cr Comcast Cable Creditor Name  Creditor's Notice na	editor's name a	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply. □ Contingent □ Unliquidated □ Disputed  Basis for the claim:	\$	224.(
Last 4 digits on number  Nonpriority cr Comcast Cable Creditor Name  Creditor's Notice nate PO Box 70219  Address	editor's name a		□ Yes  As of the petition filing date, the claim is:  Check all that apply. □ Contingent □ Unliquidated □ Disputed  Basis for the claim:	\$	224.0
Last 4 digits on number  Nonpriority cr Comcast Cable Creditor Name  Creditor's Notice nate PO Box 70219 Address  Philadelphia	me PA	191760219	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim: Trade Payable	\$	224.0
Last 4 digits on number  Nonpriority cr Comcast Cable Creditor Name  Creditor's Notice nate PO Box 70219 Address  Philadelphia City  Country	me PA	191760219 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?	\$	224.0
Last 4 digits on number  Nonpriority cr Comcast Cable Creditor Name  Creditor's Notice nate PO Box 70219 Address  Philadelphia City  Country	me  PA State  debt was incurr	191760219 ZIP Code	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim: Trade Payable	\$	224.0

number

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Name   Shonpriority creditor's name and mailing address   Check all that apply.	25,685
Constellation New Energy Creditor Name    Contingent   Unliquidated     Disputed     Basis for the claim:     Trade Payable	25,685
Creditor's Notice name	
Creditor's Notice name  Gas Division LLC Address PO Box 5473    Carol Stream	
Caso Division LLC Address PO Box 5473  Trade Payable  Carol Stream IL 60197-5473 City State ZIP Code  Country  Date or dates debt was incurred Various Last 4 digits of account number  S Nonpriority creditor's name and mailing address Datamax Creditor Name  Check all that apply. Contingent  dba Sumner One Creditor's Notice name  D Disputed Basis for the claim: Trade Payable  Is the claim subject to offset? No Yes  As of the petition filing date, the claim is: \$ Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	
Gas Division LLC  Address PO Box 5473  Trade Payable  Carol Stream IL 60197-5473 City State ZIP Code  Country  Date or dates debt was incurred Various Stast A digits of account number  S Nonpriority creditor's name and mailing address Datamax Creditor Name  Creditor's Notice name PO Box 5180  Disputed  Basis for the claim: Trade Payable  Is the claim subject to offset?  No Yes  As of the petition filing date, the claim is: \$ Check all that apply. Contingent Unliquidated Disputed  Basis for the claim:	
Basis for the claim: Address PO Box 5473  Carol Stream IL 60197-5473 City State ZIP Code  Country  Date or dates debt was incurred Various Last 4 digits of account number  Nonpriority creditor's name and mailing address Datamax Creditor Name  Creditor's Notice name PO Box 5180  Basis for the claim:  Trade Payable  Na State Payable  As of the petition filing date, the claim is: \$  Check all that apply:  Contingent Unliquidated Disputed Basis for the claim:	
Address PO Box 5473  Carol Stream IL 60197-5473 City State ZIP Code   Date or dates debt was incurred Various IL No Last 4 digits of account number  Nonpriority creditor's name and mailing address Datamax Creditor Name  Creditor Name  Creditor's Notice name PO Box 5180  Trade Payable  Is the claim subject to offset?  No Yes  As of the petition filing date, the claim is: \$ Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:	
Carol Stream IL 60197-5473 City State ZIP Code    State   60197-5473	
Country  Date or dates debt was incurred  Various  Last 4 digits of account  number  Nonpriority creditor's name and mailing address Datamax Creditor Name  Creditor's Notice name  Creditor's Notice name  PO Box 5180  Is the claim subject to offset?  No  Yes  As of the petition filing date, the claim is: \$  Check all that apply.  Contingent  Unliquidated  Disputed  Disputed  Basis for the claim:	
Country  Date or dates debt was incurred  Various  Last 4 digits of account  number  Nonpriority creditor's name and mailing address Datamax Creditor Name  Creditor's Notice name  Creditor's Notice name  PO Box 5180  Is the claim subject to offset?  No  Yes  As of the petition filing date, the claim is: \$  Check all that apply.  Contingent  Unliquidated  Disputed  Disputed  Basis for the claim:	
Date or dates debt was incurred  Various  Last 4 digits of account  number  No  Nonpriority creditor's name and mailing address  Datamax  Creditor Name  dba Sumner One  Creditor's Notice name  PO Box 5180  Is the claim subject to offset?  No  Credim subject to offset?	
Various  Last 4 digits of account  number  Nonpriority creditor's name and mailing address Datamax Creditor Name  dba Sumner One Creditor's Notice name  PO Box 5180  No Nonpriority creditor account  As of the petition filing date, the claim is: \$  Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:	
Last 4 digits of account  number  Nonpriority creditor's name and mailing address Datamax Creditor Name  Creditor Name  Datamax Creditor Name  Unliquidated Creditor's Notice name  PO Box 5180  Yes  As of the petition filing date, the claim is: \$  Check all that apply.  Unliquidated  Disputed  Basis for the claim:	
Nonpriority creditor's name and mailing address  Datamax Creditor Name  Check all that apply.  Contingent  Unliquidated  Creditor's Notice name  PO Box 5180  As of the petition filing date, the claim is: \$  Check all that apply.  Unliquidated  Disputed  Basis for the claim:	
As of the petition filing date, the claim is: \$  Datamax Creditor Name Creditor's Notice name  Do Box 5180  As of the petition filing date, the claim is: \$  Check all that apply.  Check all that apply.  Unliquidated  Disputed  Basis for the claim:	
dba Sumner One Creditor's Notice name  PO Box 5180  Contingent Unliquidated Disputed  Basis for the claim:	1,804
Creditor's Notice name  Disputed  PO Box 5180  Basis for the claim:	
PO Box 5180  Basis for the claim:	
1 0 200 0100	
<u>St Louis</u> <u>MO</u> <u>63139-0180</u>	
City State ZIP Code	
Country	
Date or dates debt was incurred Is the claim subject to offset?	
<u>Various</u>	
Last 4 digits of account	
number	

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Name					
Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is:	\$	1,110.9
Direct Supply Inc			Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice name			□ Disputed		
Pay 99304			Basis for the claim:		
Box 88201 Address			 Trade Payable		
				_	
Milwaukee	WI	53288			
City	State	ZIP Code			
City	Oldic	ZIF Code			
Country					
Date or dates de	ebt was incurr	ed	Is the claim subject to offset?		
Various					
			☑ No		
Various  Last 4 digits of a number	account				
Last 4 digits of a number  Nonpriority crea  Dr. Benjamin E. Br	ditor's name a	nd mailing address		\$	9,000.0
Last 4 digits of a number  Nonpriority cred	ditor's name a	nd mailing address	☐ Yes  As of the petition filing date, the claim is:	\$	9,000.0
Last 4 digits of a number  Nonpriority crea  Dr. Benjamin E. Br	ditor's name a	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$	9,000.0
Last 4 digits of a number  Nonpriority crea  Dr. Benjamin E. Br	ditor's name a rewer	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated	\$	9,000.0
Last 4 digits of a number  Nonpriority crec Dr. Benjamin E. Br Creditor Name	ditor's name a rewer	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed	\$	9,000.0
Last 4 digits of a number Nonpriority crea Dr. Benjamin E. Br Creditor Name	ditor's name a rewer	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply. □ Contingent □ Unliquidated □ Disputed  Basis for the claim:	\$	9,000.0
Last 4 digits of a number  Nonpriority crec Dr. Benjamin E. Br Creditor Name  Creditor's Notice name  Address on File	ditor's name a rewer	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed	\$	9,000.0
Last 4 digits of a number  Nonpriority crec Dr. Benjamin E. Br Creditor Name  Creditor's Notice name  Address on File	ditor's name a rewer	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply. □ Contingent □ Unliquidated □ Disputed  Basis for the claim:	\$	9,000.0
Last 4 digits of a number  Nonpriority crec Dr. Benjamin E. Br Creditor Name  Creditor's Notice name  Address on File	ditor's name a rewer	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply. □ Contingent □ Unliquidated □ Disputed  Basis for the claim:	\$	9,000.0
Last 4 digits of a number  Nonpriority crec Dr. Benjamin E. Br Creditor Name  Creditor's Notice name  Address on File	ditor's name a rewer	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply. □ Contingent □ Unliquidated □ Disputed  Basis for the claim:	\$	9,000.0
Last 4 digits of a number  Nonpriority cree  Dr. Benjamin E. Br  Creditor Name  Creditor's Notice name  Address on File  Address	ditor's name a		□ Yes  As of the petition filing date, the claim is:  Check all that apply. □ Contingent □ Unliquidated □ Disputed  Basis for the claim:	\$	9,000.0
Last 4 digits of a number  Nonpriority cree Dr. Benjamin E. Br Creditor Name  Creditor's Notice name Address on File Address  City	ditor's name a	ZIP Code	□ Yes  As of the petition filing date, the claim is:  Check all that apply. □ Contingent □ Unliquidated □ Disputed  Basis for the claim:	\$	9,000.0
Last 4 digits of a number  Nonpriority cree  Dr. Benjamin E. Br  Creditor Name  Creditor's Notice name  Address on File  Address  City  Country	ditor's name a	ZIP Code	As of the petition filing date, the claim is:  Check all that apply.  Contingent  Unliquidated  Disputed  Basis for the claim:  Trade Payable	\$	9,000.0

number

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Name					
Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is:	\$	753.6
Flynn Sales & Service Inc Creditor Name			Check all that apply.		
Ciculoi Mante			☐ Contingent		
Creditor's Notice name			Unliquidated		
Creditor's Notice name			☐ Disputed		
1286 Franks Road			Basis for the claim:		
Address			Trade Payable	-	
Jacksonville	IL	62650			
City	State	ZIP Code			
Country					
Date or dates	debt was incurr	ed	Is the claim subject to offset?		
Various			☑ No		
Last 4 digits of account					
Last 4 digits on number	of account		□ Yes		
number		nd mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$	1,433.
number  Nonpriority contier		nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent	\$	1,433.
number  Nonpriority contier	reditor's name a	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated	\$	1,433.
number  Nonpriority confrontier  Creditor Name	reditor's name a	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed	\$	1,433.
Nonpriority of Frontier Creditor Name  Creditor's Notice na PO Box 740407	reditor's name a	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	1,433.
Nonpriority confrontier  Frontier  Creditor Name  Creditor's Notice na	reditor's name a	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed	\$	1,433.
Nonpriority Cl Frontier Creditor Name Creditor's Notice na PO Box 740407 Address	reditor's name a		As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	1,433.
Nonpriority of Frontier Creditor Name  Creditor's Notice na PO Box 740407	reditor's name a	452740407 ZIP Code	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	1,433.
Nonpriority confrontier Creditor Name  Creditor's Notice name  PO Box 740407  Address  Cincinnati	reditor's name a	452740407	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	1,433.
Nonpriority confrontier  Frontier  Creditor Name  Creditor's Notice name  PO Box 740407  Address  Cincinnati  City  Country	reditor's name a	452740407 ZIP Code	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	1,433.
Nonpriority confrontier  Frontier  Creditor Name  Creditor's Notice name  PO Box 740407  Address  Cincinnati  City  Country	ame OH State	452740407 ZIP Code	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed  Basis for the claim:  Trade Payable	\$	1,433.

number

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tor: Piper HCO,	LLC		Case number (if known): 24-10573		
Name					
Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is:	\$	25,845.9
Gale Healthcare Solutions			Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice name			□ Disputed		
C/O Paul Timo Sanisas			Basis for the claim:		
C/O Real Time Services Address			Trade Payable		
PO Box 4729				-	
Winter Park	FL	32793-4729			
City	State	ZIP Code			
Country					
Date or dates	s debt was incurr	red	Is the claim subject to offset?		
Various			☑ No		
Last 4 digits	of account		□ Yes		
number	eroditor's name a	and mailing address	As of the political filling data the claim is.	Φ	14,059.0
	Nonpriority creditor's name and mailing address Gibson Area Hospital		As of the petition filing date, the claim is: Check all that apply.	Ψ	14,059.0
Creditor Name	<u>.</u>		□ Contingent		
			☐ Unliquidated		
Creditor's Notice name			□ Disputed		
1120 North Me	lvin Street		Basis for the claim:		
Address	1120 North Melvin Street Address		Trade Payable	_	
Gibson City	<u>IL</u>	60936-1477			
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					

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Nonpriority	creditor's name a	and mailing address	As of the petition filing date, the claim is:	\$	2,931.2
Health Techno	ologies Inc		Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice	name		☐ Disputed		
8446 Page Av	enue		Basis for the claim:		
Address			Trade Payable	_	
St. Louis	MO	63130			
City	State	ZIP Code			
Country					
	es debt was incurr	·ed	Is the claim subject to offset?		
Various  Last 4 digits			⊠ No □ Yes		
	creditor's name a	and mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$	161.2
Creditor Name			☐ Contingent		
			Unliquidated		
Creditor's Notice	name		Unliquidated  Disputed		
Creditor's Notice PO Box 26719			<u> </u>		
			· □ Disputed	_	
PO Box 26719			□ Disputed  Basis for the claim:	_	
PO Box 26719	) ME	49152018	□ Disputed  Basis for the claim:	_	
PO Box 26719 Address	9	49152018 ZIP Code	□ Disputed  Basis for the claim:	_	
PO Box 26719 Address  Belfast	) ME	<del></del>	Disputed  Basis for the claim:  Trade Payable	_	
PO Box 26719 Address  Belfast City  Country	) ME	ZIP Code	Disputed  Basis for the claim:  Trade Payable  Is the claim subject to offset?	_	
PO Box 26719 Address  Belfast City  Country	ME State	ZIP Code	Disputed  Basis for the claim:  Trade Payable	_	

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tor: Piper HCO	, LLC		Case number (if known):	24-10573	
Name					
5 Nonpriority	creditor's name a	ind mailing address	As of the petition filing date, the claim is:	\$	1,410.0
Illinois State P	olice		Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice	name		□ Disputed		
Bureau of Inve	actigation		Basis for the claim:		
Address	silgation		Trade Payable		
206 North Chi	cago Street			-	
Joliet	IL	604324072			
City	State	ZIP Code			
Country					
Date or date	es debt was incurr	red	Is the claim subject to offset?		
Various			☑ No		
Last 4 digits	s of account		□ Yes		
number 6 Nonpriority	creditor's name a	and mailing address	As of the petition filing date, the claim is:	\$	1,645.0
	al Services LLC	-	Check all that apply.	·	
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice	name		□ Disputed		
1001 NW Ves	per Street		Basis for the claim:		
Address			Trade Payable	_	
Blue Springs	МО	64015-3676			
City	State	ZIP Code			
Country			lo the plaim out is at to affect?		
	es debt was incuri	red	Is the claim subject to offset?		
Various			✓ No		
Last 4 digits	s of account		□ Yes		
number					

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or: Piper HCO,	LLC		Case number (if known):	24-10573	
Name					
		and mailing address	As of the petition filing date, the claim is:	\$	547.0
Iroquois Memo	rial Hospital		Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice r	name		 ☐ Disputed		
200 Fairman A	venue		Basis for the claim:		
Address	veriue		 Trade Payable		
				-	
Watseka	IL	60970-1694			
City	State	ZIP Code			
Country					
	s debt was incuri	red	Is the claim subject to offset?		
Various			✓ No		
Last 4 digits	of account		□ Yes		
number  Nonpriority o	creditor's name a	and mailing address	As of the petition filing date, the claim is:	\$	868.0
Jeremy Haycra	ıft		Check all that apply.		
Creditor Name			☐ Contingent		
			Unliquidated		
Creditor's Notice r	name		☐ Disputed		
Address on File	Э		Basis for the claim:		
Address			Trade Payable	-	
City	State	ZIP Code			
Country					
Country	a daht waa in	d	Is the claim subject to offset?		
	s debt was incurr	reu	✓ No		
			_ 110		
Various  Last 4 digits	of account		□ Yes		

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or: Piper HCO, L	LC		Case number (if known):	24-10573	
Name					
9 Nonpriority cr	editor's name a	nd mailing address	As of the petition filing date, the claim is:	\$	Undetermine
Law Office of Je	ffrey Krumpe		Check all that apply.		
Creditor Name			☐ Contingent		
			✓ Unliquidated		
Creditor's Notice na	me		 ☑ Disputed		
110 SW Jefferes	con		Basis for the claim:		
Address	5011		 Litigation		
Suite 410					
Peoria	IL	61602			
City	State	ZIP Code			
Country					
	debt was incurr	ed	Is the claim subject to offset?		
2/6/2024					
Last 4 digits of	of account		□ Yes		
	reditor's name a	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$	105,114.:
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice na	me		☐ Disputed		
Wells Fargo			Basis for the claim:		
Address			Trade Payable		
PO Box 850781					
Minneapolis	MN	55485-0781			
City	State	ZIP Code			
Country					
Date or dates	debt was incurr	ed	Is the claim subject to offset?		
Various					
Last 4 digits of	of account		□ Yes		
number					

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Name					_
Nonpriority cre	editor's name a	nd mailing address	As of the petition filing date, the claim is:	\$	1,391.0
Loyola University Creditor Name	Med CT		Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice nam	ne		□ Disputed		
PO Box 83262			Basis for the claim:		
Address			Trade Payable		
Chicago	IL	60691			
City	State	ZIP Code			
Country					
Date or dates of	debt was incurr	ed	Is the claim subject to offset?		
Various			✓ No		
Various					
Last 4 digits of	account		□ Yes		
Last 4 digits of number		nd mailing address	<u></u>	\$	199,317.
Last 4 digits of number  Nonpriority cre		nd mailing address	☐ Yes  As of the petition filing date, the claim is:	\$	199,317.
Last 4 digits of number  Nonpriority cree Martin Bros		nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply.  □ Contingent	\$	199,317.4
Last 4 digits of number  Nonpriority cree Martin Bros	editor's name a	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply.  □ Contingent □ Unliquidated	\$	199,317.4
Last 4 digits of number  Nonpriority cree Martin Bros Creditor Name  Creditor's Notice name	editor's name a	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply.  □ Contingent □ Unliquidated □ Disputed	\$	199,317.4
Last 4 digits of number  Nonpriority cre Martin Bros Creditor Name	editor's name a	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	199,317.4
Last 4 digits of number  Nonpriority cree Martin Bros Creditor Name  Creditor's Notice nam  406 Viking Road	editor's name a	nd mailing address	□ Yes  As of the petition filing date, the claim is:  Check all that apply.  □ Contingent □ Unliquidated □ Disputed	\$	199,317.4
Last 4 digits of number  Nonpriority cre Martin Bros Creditor Name  Creditor's Notice nam  406 Viking Road Address	editor's name a		As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	199,317.
Last 4 digits of number  Nonpriority cre Martin Bros Creditor Name  Creditor's Notice nam  406 Viking Road	editor's name a	and mailing address  50613  ZIP Code	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	199,317.·
Last 4 digits of number  Nonpriority cre Martin Bros Creditor Name  Creditor's Notice nam  406 Viking Road Address  Cedar Falls	editor's name a	50613	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	199,317.
Last 4 digits of number  Nonpriority cre Martin Bros Creditor Name  Creditor's Notice nam 406 Viking Road Address  Cedar Falls City	editor's name a	50613 ZIP Code	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	199,317.
Last 4 digits of number  Nonpriority cre Martin Bros Creditor Name  Creditor's Notice nam  406 Viking Road Address  Cedar Falls City  Country	editor's name a	50613 ZIP Code	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim: Trade Payable	<b>\$</b>	199,317.

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Nonpriority credi	tor's name a	ind mailing address	As of the petition filing date, the claim is:	\$	20,011.0
Mc Kesson Medical	- Surgical		Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice name			□ Disputed		
PO Box 630693			Basis for the claim:		
Address			Trade Payable		
				•	
Cincinnati	ОН	452630693			
City	State	ZIP Code			
Country					
Date or dates del	ot was incurr	red	Is the claim subject to offset?		
Various			☑ No		
Last 4 digits of a	ccount		□ Yes		
number					
Med Solutions LLC	tor's name a	ind mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$	2,635.0
Creditor Name			☐ Contingent		
C/O Capital Busines	ss Funding		☐ Unliquidated		
Creditor's Notice name			□ Disputed		
PO Box 1813			Basis for the claim:		
Address			 Trade Payable		
71441000				•	
Spartanburg	SC	29304			
	SC State	29304 ZIP Code			
Spartanburg		<del></del> -			
Spartanburg City	State	ZIP Code	Is the claim subject to offset?		
Spartanburg City Country	State	ZIP Code	Is the claim subject to offset?  ✓ No  — Yes		

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		nd mailing address	As of the petition filing date, the claim is:	\$	87,857.9
Medical Solution Creditor Name	ons, LLC		Check all that apply.		
			☐ Contingent		
Nicholas Rudm Creditor's Notice r			Unliquidated		
Croundry of realise .			☐ Disputed		
	Street Suite 300		Basis for the claim:		
Address			Trade Payable	_	
	NE	68114			
City	State	ZIP Code			
Country					
Date or dates	s debt was incurr	red	Is the claim subject to offset?		
Various			☑ No		
Last 4 digits	of account		□ Vaa		
number	or account		□ Yes		
number  Nonpriority of		nd mailing address Services	As of the petition filing date, the claim is:  Check all that apply.	\$	2,500.0
number  Nonpriority of Midwest Environment	creditor's name a		As of the petition filing date, the claim is:	\$	2,500.0
number  Nonpriority of Midwest Environment Creditor Name	creditor's name a		As of the petition filing date, the claim is:  Check all that apply.	\$	2,500.0
number  Nonpriority of Midwest Environment	creditor's name a		As of the petition filing date, the claim is:  Check all that apply.  Contingent	\$	2,500.0
number  Nonpriority of Midwest Environment Creditor Name  Creditor's Notice of 2551 North Brid	creditor's name a onmental Consulting		As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	2,500.0
number  Nonpriority of Midwest Environment Creditor Name  Creditor's Notice of Notice	creditor's name a onmental Consulting		As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed	\$	2,500.0
number  Nonpriority of Midwest Environment Creditor Name  Creditor's Notice of 2551 North Brid Address	creditor's name a commental Consulting mame dge Street	Services	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	2,500.0
number  Nonpriority of Midwest Environment Creditor Name  Creditor's Notice of 2551 North Brid Address  Yorkville	creditor's name a commental Consulting mame dge Street	Services  60560	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	2,500.C
number  Nonpriority of Midwest Environment Creditor Name  Creditor's Notice of 2551 North Brid Address	creditor's name a commental Consulting mame dge Street	Services	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	2,500.0
number  Nonpriority of Midwest Environment Creditor Name  Creditor's Notice of 2551 North Brid Address  Yorkville	creditor's name a commental Consulting mame dge Street	Services  60560	As of the petition filing date, the claim is:  Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	2,500.0
Nonpriority of Midwest Environment Creditor Name  Creditor's Notice of 2551 North Brid Address  Yorkville City  Country	creditor's name a commental Consulting mame dge Street	Services  60560  ZIP Code	As of the petition filing date, the claim is:  Check all that apply.  Contingent  Unliquidated  Basis for the claim:  Trade Payable  Is the claim subject to offset?	\$	2,500.0
Nonpriority of Midwest Environment Creditor Name  Creditor's Notice of 2551 North Brid Address  Yorkville City  Country	creditor's name a commental Consulting mame dge Street    IL   State	Services  60560  ZIP Code	As of the petition filing date, the claim is:  Check all that apply.  Contingent  Unliquidated  Disputed  Basis for the claim:  Trade Payable	\$	2,500.0

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or: Piper HCO,	LLC		Case number (if known):	24-10573			
Name							
-	reditor's name a	nd mailing address	As of the petition filing date, the claim is:	\$	1,880.		
Nicor Gas			Check all that apply.				
Creditor Name			☐ Contingent				
			Unliquidated				
Creditor's Notice n	ame		☐ Disputed				
PO Box 5407			Basis for the claim:				
Address			Trade Payable	_			
Carol Stream	IL	60197-5407					
City	State	ZIP Code					
Country							
	debt was incurr	ed	Is the claim subject to offset?				
Various			☑ No				
Last 4 digits	of account		□ Yes				
Nonpriority c	reditor's name a	nd mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	36,164.		
Creditor Name			□ Contingent				
			☐ 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							
Date or dates	debt was incurr	red	Is the claim subject to offset?				
Various			☑ No				
Last 4 digits	of account		□ Yes				
number							

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-		nd mailing address	As of the petition filing date, the claim is:	\$ 99,674.8
Onestaff Medi Creditor Name	ical LLC		Check all that apply.	
			☐ Contingent	
Creditor's Notice	name		Unliquidated	
			☐ Disputed	
C/O American	National Bank		Basis for the claim:	
PO Box 3544			Trade Payable	
Omaha	NE	68103		
City	State	ZIP Code		
Country				
Date or date	es debt was incurr	red	Is the claim subject to offset?	
Various  Last 4 digits				
	creditor's name a	nd mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$ 1,762.4
Pace Analytica		nd mailing address		\$ 1,762.4
Pace Analytica Creditor Name	al Services LLC	nd mailing address	Check all that apply.	\$ 1,762.4
Pace Analytica	al Services LLC	nd mailing address	Check all that apply.  □ Contingent	\$ 1,762.4
Pace Analytica Creditor Name  Creditor's Notice  2231 West Alt	name	nd mailing address	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$ 1,762.4
Pace Analytica Creditor Name  Creditor's Notice	name	nd mailing address	Check all that apply.  ☐ Contingent ☐ Unliquidated ☐ Disputed	\$ 1,762.4
Pace Analytica Creditor Name  Creditor's Notice  2231 West Alt Address	name		Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$ 1,762.4
Pace Analytica Creditor Name  Creditor's Notice  2231 West Alt	name	61615  ZIP Code	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$ 1,762.4
Pace Analytica Creditor Name  Creditor's Notice  2231 West Alt Address  Peoria	name corfer Drive	61615	Check all that apply.  Contingent Unliquidated Basis for the claim: Trade Payable	\$ 1,762.4
Pace Analytica Creditor Name  Creditor's Notice  2231 West Alt Address  Peoria City  Country	name corfer Drive	61615 ZIP Code	Check all that apply.  Contingent Unliquidated Basis for the claim: Trade Payable  Is the claim subject to offset?	\$ 1,762.4
Pace Analytica Creditor Name  Creditor's Notice  2231 West Alt Address  Peoria City  Country	name corfer Drive  IL State  State	61615 ZIP Code	Check all that apply.  Contingent Unliquidated Basis for the claim: Trade Payable	\$ 1,762.4

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or: Piper HCO,	LLC		Case number (if known):		24-10573	
Name						
Nonpriority of PEL/VIP	creditor's name a	and mailing address	As of the petition filing date, the claim is: Check all that apply.	\$		11,446.0
Creditor Name			☐ Contingent			
			☐ Unliquidated			
Creditor's Notice r	name		□ Disputed			
9840 Southwes	st Highway		Basis for the claim:			
Address	<u> </u>		Trade Payable	_		
Oak Lawn	<u>IL</u>	60453				
City	State	ZIP Code				
Country			Is the claim subject to offeet?			
	s debt was incuri	red	Is the claim subject to offset? ☑ No			
Various  Last 4 digits	of account					
number  Nonpriority of PIPCO Compa		and mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$		2,074.9
Creditor Name	illes LTD					
			<ul><li>☐ Contingent</li><li>☐ Unliquidated</li></ul>			
Creditor's Notice r	name					
			☐ Disputed  Basis for the claim:			
1409 West Alto	orfer Drive		Trade Payable			
				-		
Peoria	IL .	61615				
City	State	ZIP Code				
Country						
Date or dates	s debt was incur	red	Is the claim subject to offset?			
Various			✓ No			
Last 4 digits	of account		□ Yes			

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or: Piper HCO, L	LLC		Case number (if known):	24-105	73
Name					
Nonpriority c	reditor's name a	and mailing address	As of the petition filing date, the claim is:	\$	4,289.9
	e Technologies Inc		Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice na	ame		 ☐ Disputed		
PO Box 674802	2		Basis for the claim:		
Address			Trade Payable	-	
Detroit	MI	48267-4802			
City	State	ZIP Code			
Country					
Date or dates	s debt was incurr	red	Is the claim subject to offset?		
Various			☑ No		
Last 4 digits	of account		□ Yes		
number  Nonpriority c  Popejoy Inc	reditor's name a	and mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$	2,295.3
Creditor Name					
			☐ Contingent		
Creditor's Notice na			Unliquidated		
Creditor's Notice na	ame		☐ Disputed		
203 South 10th	Street		Basis for the claim:		
Address			Trade Payable	_	
Fairbury		61739			
Fairbury City	IL State	61739 ZIP Code			
-		<del></del>			
City	State	ZIP Code	Is the claim subject to offset?		
City		ZIP Code	Is the claim subject to offset? ☑ No		

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Nonpriority	creditor's name a	nd mailing address	As of the petition filing date, the claim is:	\$	2,159.9
Presto- X Creditor Name			Check all that apply.		
Oroanor Hamo			☐ Contingent		
			Unliquidated		
Creditor's Notice	name		☐ Disputed		
PO Box 14095	5		Basis for the claim:		
Address			Trade Payable	-	
Panding	DA	19612			
Reading City	PA State	ZIP Code			
Country					
	s debt was incurr	red	Is the claim subject to offset?		
Various			✓ No		
Last 4 digits	of account		□ Yes		
RecoverCare I		nd mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$	477.0
RecoverCare I		nd mailing address		\$	477.(
RecoverCare I Creditor Name  dba Joerns LL	C	nd mailing address	Check all that apply.	\$	477.0
RecoverCare I	C	nd mailing address	Check all that apply.  □ Contingent	\$	477.(
RecoverCare II Creditor Name  dba Joerns LL Creditor's Notice  PO Box 93644	C name	nd mailing address	Check all that apply.  ☐ Contingent ☐ Unliquidated	\$	477.0
RecoverCare I Creditor Name  dba Joerns LL Creditor's Notice	C name	nd mailing address	Check all that apply.  Contingent  Unliquidated  Disputed	\$	477.
RecoverCare II Creditor Name  dba Joerns LL Creditor's Notice  PO Box 93644	C name	nd mailing address	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	477.(
RecoverCare II Creditor Name  dba Joerns LL Creditor's Notice  PO Box 93644	C name	and mailing address	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	477.(
RecoverCare I Creditor Name  dba Joerns LL Creditor's Notice  PO Box 93644  Address	C name		Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	477.(
RecoverCare I Creditor Name  dba Joerns LL Creditor's Notice  PO Box 93644 Address  Atlanta	C name	31193-6446	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim: Trade Payable	\$	477.(
RecoverCare I Creditor Name  dba Joerns LL Creditor's Notice  PO Box 93644 Address  Atlanta City  Country	C name	31193-6446 ZIP Code	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim: Trade Payable  Is the claim subject to offset?	\$	477.0
RecoverCare I Creditor Name  dba Joerns LL Creditor's Notice  PO Box 93644 Address  Atlanta City  Country	C name  GA State	31193-6446 ZIP Code	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim: Trade Payable	\$	477.

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Nonpriority of	creditor's name a	and mailing address	As of the petition filing date, the claim is:	\$	180,947.7	
RehabCare Creditor Name			Check all that apply.			
Creditor Name			☐ Contingent			
			Unliquidated			
Creditor's Notice	name		☐ Disputed			
PO Box 71985	i		Basis for the claim:			
Address			Trade Payable			
Chicago	IL	60694-1985				
City	State	ZIP Code				
Country						
Date or date	s debt was incurr	red	Is the claim subject to offset?			
Various			☑ No			
Last 4 digits	of account		□ Yes			
Riverside Heal Creditor Name		and mailing address	As of the petition filling date, the claim is:  Check all that apply.	\$	192.	
Creditor Name						
			☐ Contingent			
Creditor's Notice	name		☐ Contingent ☐ Unliquidated			
Creditor's Notice	name		□ Unliquidated □ Disputed			
7320 Solutions			☐ Unliquidated ☐ Disputed Basis for the claim:			
			□ Unliquidated □ Disputed			
7320 Solutions	s Center	60677-7003	☐ Unliquidated ☐ Disputed Basis for the claim:			
7320 Solutions		60677-7003 ZIP Code	☐ Unliquidated ☐ Disputed Basis for the claim:			
7320 Solutions Address  Chicago	s Center	<del></del>	☐ Unliquidated ☐ Disputed Basis for the claim:			
7320 Solutions Address  Chicago City  Country	s Center	ZIP Code	□ Unliquidated □ Disputed  Basis for the claim:  Trade Payable  Is the claim subject to offset?			
7320 Solutions Address  Chicago City  Country	S Center  IL  State  S debt was incurr	ZIP Code	☐ Unliquidated ☐ Disputed Basis for the claim: Trade Payable			

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	С		Case number (if known):	24-10573			
Name							
9 Nonpriority creditor's name and mailing address			As of the petition filing date, the claim is:	\$	230,711.63		
Select Rehabilitat Creditor Name	ion LLC		Check all that apply.				
Oreallor Name			☐ Contingent				
			☐ Unliquidated				
Creditor's Notice nam	ne		□ Disputed				
PO Box 71985			Basis for the claim:				
Address			Trade Payable				
				_			
Chicago	<u>IL</u>	606941985					
City	State	ZIP Code					
Country							
Date or dates d	lebt was incurr	red	Is the claim subject to offset?				
Various							
Last 4 digits of	account		☐ Yes				
		and mailing address	As of the petition filing date, the claim is:	\$	365.53		
O <b>Nonpriority cre</b> Shadow Fax Proje		and mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$	365.53		
O Nonpriority cre		and mailing address		\$	365.53		
Nonpriority cre     Shadow Fax Proje     Creditor Name	ects	and mailing address	Check all that apply.	\$	365.53		
O Nonpriority cre Shadow Fax Proje	ects	and mailing address	Check all that apply.  ☐ Contingent ☐ Unliquidated	\$	365.53		
O Nonpriority cre Shadow Fax Proje Creditor Name	ects	and mailing address	Check all that apply.  ☐ Contingent ☐ Unliquidated	\$	365.53		
O Nonpriority cre Shadow Fax Proje Creditor Name	ects	and mailing address	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	365.53		
O Nonpriority cre Shadow Fax Proje Creditor Name  Creditor's Notice nam PO Box 347	ects	and mailing address	Check all that apply.  Contingent Unliquidated Disputed	\$	365.53		
Shadow Fax Proje Creditor Name  Creditor's Notice name  PO Box 347  Address	ects		Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	365.53		
O Nonpriority cre Shadow Fax Proje Creditor Name  Creditor's Notice nam PO Box 347	ects	and mailing address  61951  ZIP Code	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	365.53		
Nonpriority cre Shadow Fax Proje Creditor Name  Creditor's Notice nam PO Box 347 Address  Sullivan	ects ne	61951	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	365.53		
O Nonpriority cre Shadow Fax Proje Creditor Name  Creditor's Notice nam PO Box 347 Address  Sullivan City  Country	ects  The State	61951 ZIP Code	Check all that apply.  Contingent Unliquidated Disputed Basis for the claim:	\$	365.53		
Shadow Fax Projected Treditor's Notice name PO Box 347 Address Sullivan City	ects  The State	61951 ZIP Code	Check all that apply.  Contingent Unliquidated Basis for the claim: Trade Payable	\$	365.5		

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or: Piper HCO, I	LLC		Case number (if known)	24-10573	
Name					
Nonpriority c	reditor's name a	As of the petition filing date, the claim is:	\$	154.5	
Shadow Fax Pr	ojects#2		Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice na	ame		□ Disputed		
Medical Waste Account			Basis for the claim:		
Address	- 1000um		 Trade Payable		
PO Box 5473				_	
Sullivan	IL	61951			
City	State	ZIP Code			
Country					
Date or dates	debt was incurr	ed	Is the claim subject to offset?		
Various			☑ No		
Last 4 digits	of account		□ Yes		
number  Nonpriority c  The Daily Journ		nd mailing address	As of the petition filing date, the claim is:  Check all that apply.	\$	1,206.4
Creditor Name					
			☐ Contingent		
Creditor's Notice na	ame		Unliquidated		
			☐ Disputed		
8 Dearborn Squ Address	ıare		Basis for the claim:		
Address			Trade Payable	_	
Kankakee	<u>IL</u>	60901			
City	State	ZIP Code			
Country					
	debt was incurr	red	Is the claim subject to offset?		
Various			☑ No		
Last 4 digits					

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tor: Piper HCO, LLC			Case number (if known):	24-10573		
Name						
3 Nonpriority	creditor's name a	nd mailing address	As of the petition filing date, the claim is:	\$	158.1	
The Home Dep	pot Pro		Check all that apply.			
Creditor Name			☐ Contingent			
			Unliquidated  Disputed			
Creditor's Notice	name					
13924 Collecti	ion Center Drive		Basis for the claim:			
Address	on contact billy		 Trade Payable			
				_		
Chicago	IL	60693-0126				
City	State	ZIP Code				
Country						
Date or date	s debt was incurr	ed	Is the claim subject to offset?			
Various			☑ No			
Last 4 digits	of account		□ Yes			
4 <b>Nonpriority</b> Tri State Fire F		nd mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	1,685.:	
Creditor Name			□ Contingent			
			☐ Unliquidated			
Creditor's Notice	name		· □ Disputed			
PO Box 70			Basis for the claim:			
Address			Trade Payable			
Newburgh	_ IN	47629-0070				
City	State	ZIP Code				
Country						
Date or date	es debt was incurr	ed	Is the claim subject to offset?			
Various			✓ No			
Last 4 digits	of account		□ Yes			
number						

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or: Piper HCO,	, LLC		Case number (if known):	24-10573		
Name						
<b>Nonpriority</b>	creditor's name a	ind mailing address	As of the petition filing date, the claim is: \$	1,912.32		
Village of Pipe	er City		Check all that apply.			
Creditor Name			☐ Contingent			
			☐ Unliquidated			
Creditor's Notice	name		□ Disputed			
133 East Peor	ria Street		Basis for the claim:			
Address			Trade Payable			
Box 9						
Piper City	IL	60959-0009				
City	State	ZIP Code				
Country						
Date or dates debt was incurred			Is the claim subject to offset?			
Various			☑ No			
Last 4 digits	of account					

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#### Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.
If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailin	ng address		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 Name				_
Street				
City	State	ZIP Code		
Country				

# Total Amounts of the Priority and Nonpriority Unsecured Claims 5. Add the amounts of priority and nonpriority unsecured claims. Total of claim amounts 5a. Total claims from Part 1 5b. Total claims from Part 2 5b. + \$ 1,087,092.98

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

1,162,092.98

Fill in this information to identify the case:
Debtor Name: In re : Piper HCO, LLC
United States Bankruptcy Court for the: District of Delaware
Case number (if known): 24-10573 (TMH)

# 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 lea	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 of any government contract				
			City	State	ZIP Code
			Country		

Fill in this information to identify the case:
Debtor Name: In re : Piper HCO, LLC
United States Bankruptcy Court for the: District of Delaware
Case number (if known): 24-10573 (TMH)

#### Official Form 206H

#### **Schedule H: Codebtors**

12/15

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						$\Box$ D	
		Street					
						□ E/F	
						□G	
		City	State	ZIP Code			
		Country	-				

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Fill in this information to identify the case:
Debtor Name: In re : Piper HCO, LLC
United States Bankruptcy Court for the: District of Delaware
Case number (if known): 24-10573 (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 ha	ve examin	ed the information in the documents check	xed below and I have a reasonable belief that the information is true and correct:					
<b>V</b>	Schedule	e A/B: Assets–Real and Personal Property	(Official Form 206A/B)					
<b>V</b>	Schedule	D: Creditors Who Have Claims Secured	by Property (Official Form 206D)					
	Schedule	E/F: Creditors Who Have Unsecured Cla	ims (Official Form 206E/F)					
<b>V</b>	Schedule	G: Executory Contracts and Unexpired L	eases (Official Form 206G)					
$\overline{\mathbf{A}}$	Schedule	H: Codebtors (Official Form 206H)						
$\overline{\mathbf{A}}$	Summary	of Assets and Liabilities for Non-Individua	als (Official Form 206Sum)					
	Amended	1 Schedule						
	Chapter	11 or Chapter 9 Cases: List of Creditors W	ho Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)					
	Other do	cument that requires a declaration						
l do	clare unde	r penalty of perjury that the foregoing is tru	ue and correct					
i de	ciare unde	r penalty of perjury that the foregoing is the	to and correct.					
Exe	cuted on	05/31/2024	* / s / David R. Campbell					
	MM / DD / YYYY  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 PIPER HCO, LLC (CASE NO. 24-10573)

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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.

Fill in this information to identify the case:					
Debtor Name: In re : Piper HCO, LLC					
United States Bankruptcy Court for the: District Of Delaware					
Case number (if known): 24-10573 (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								
Gross revenue from busines     None	ss							
Identify the beginning and may be a calendar year	ending	dates of the debtor's fi	scal y	ear, which		Sources of revenue Check all that apply	(bet	ess revenue fore deductions and lusions)
From the beginning of the fiscal year to filing date:	From	1/1/2024 MM / DD / YYYY	to	Filing date	☑	Operating a business Other	\$	512,413.49
For prior year:	From	1/1/2023 MM / DD / YYYY	to	12/31/2023 MM / DD / YYYY	<b>☑</b>	Operating a business Other	\$	3,608,754.60
For the year before that:	From	1/1/2022 MM / DD / YYYY	to	12/31/2022 MM / DD / YYYY	_ ☑ □	Operating a business Other	\$	3,174,400.85

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 3 of 27

Debtor: Piper HCO, LLC Case number (if known): 24-10573

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 from each source (before deductions and exclusions)	
From the beginning of the fiscal year to filing date:	From	1/1/2024 MM / DD / YYYY	to	Filing date	Interest	\$	0.00
For prior year:	From	1/1/2023 MM / DD / YYYY	to	12/31/2023 MM / DD / YYYY	Interest	\$	(7,020.06)
For the year before that:	From	1/1/2022 MM / DD / YYYY	to	12/31/2022 MM / DD / YYYY	Interest	\$	427.72

Cert	ain payments or transfers to creditors wit	hin 90 days bef	ore filing this case								
iling	t payments or transfers-including expense reimbursements-to any creditor, other than regular employee compensation, within 90 days beforing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/0° devery 3 years after that with respect to cases filed on or after the date of adjustment.)										
□ N	lone										
	Creditor's name and address	Dates	Total amount or value		ons for payment or transfer all that apply						
3.1	1 See SOFA 3 Attachment		\$		Secured debt						
	Creditor's Name				Unsecured loan repayments						
					Suppliers or vendors						
	Street	_			Services						
				П	Other						
	City State ZIP Code										
	Country										
	Payments or other transfers of property in List payments or transfers, including expensions.	e reimbursemen	ts, made within 1 year before fili	ng this cas	se on debts owed to an insider or						
	Payments or other transfers of property in List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments light and their relatives; general partners of a partners of a partners.	e reimbursement the aggregate v /01/25 and every sted in line 3. Ins tnership debtor a	ts, made within 1 year before fili alue of all property transferred to 3 years after that with respect to diders include officers, directors,	ng this cas o or for the o cases file and anyon	se on debts owed to an insider or benefit of the insider is less than ed on or after the date of the in control of a corporate debtor						
	Payments or other transfers of property of the control of the cont	e reimbursement the aggregate v /01/25 and every sted in line 3. Ins tnership debtor a	ts, made within 1 year before fili alue of all property transferred to 3 years after that with respect to diders include officers, directors,	ng this cas o or for the o cases file and anyon	se on debts owed to an insider or benefit of the insider is less than ed on or after the date of the in control of a corporate debtor						
	Payments or other transfers of property to List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments li and their relatives; general partners of a parany managing agent of the debtor. 11 U.S.C.	e reimbursement the aggregate v /01/25 and every sted in line 3. Ins tnership debtor a	ts, made within 1 year before fili alue of all property transferred to 3 years after that with respect to iders include officers, directors, and their relatives; affiliates of the	ng this cas o or for the o cases file and anyon e debtor ar	se on debts owed to an insider or benefit of the insider is less than ed on or after the date of he in control of a corporate debtor and insiders of such affiliates; and						
41	Payments or other transfers of property in List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments li and their relatives; general partners of a parany managing agent of the debtor. 11 U.S.C. None  Insider's Name and Address	the reimbursement is the aggregate viol1/25 and every sted in line 3. Instruction at the state of the state o	ts, made within 1 year before filingling of all property transferred to 3 years after that with respect to ders include officers, directors, and their relatives; affiliates of the Total amount or value	ng this cas o or for the o cases file and anyon e debtor ar	se on debts owed to an insider or benefit of the insider is less than ed on or after the date of the in control of a corporate debtor						
4.1	Payments or other transfers of property to List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments li and their relatives; general partners of a parany managing agent of the debtor. 11 U.S.C.	the reimbursement is the aggregate viol1/25 and every sted in line 3. Instruction at the state of the state o	ts, made within 1 year before fili alue of all property transferred to 3 years after that with respect to iders include officers, directors, and their relatives; affiliates of the	ng this cas o or for the o cases file and anyon e debtor ar	se on debts owed to an insider or benefit of the insider is less than ed on or after the date of he in control of a corporate debtor and insiders of such affiliates; and						
4.1	Payments or other transfers of property in List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments light and their relatives; general partners of a parany managing agent of the debtor. 11 U.S.C. None  Insider's Name and Address  See SOFA 4 Attachment	the reimbursement is the aggregate viol1/25 and every sted in line 3. Instruction at the state of the state o	ts, made within 1 year before filingling of all property transferred to 3 years after that with respect to ders include officers, directors, and their relatives; affiliates of the Total amount or value	ng this cas o or for the o cases file and anyon e debtor ar	se on debts owed to an insider or benefit of the insider is less than ed on or after the date of he in control of a corporate debtor and insiders of such affiliates; and						
4.1	Payments or other transfers of property in List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments light and their relatives; general partners of a parany managing agent of the debtor. 11 U.S.C. None  Insider's Name and Address  See SOFA 4 Attachment	the reimbursement is the aggregate viol1/25 and every sted in line 3. Instruction at the state of the state o	ts, made within 1 year before filingling of all property transferred to 3 years after that with respect to ders include officers, directors, and their relatives; affiliates of the Total amount or value	ng this cas o or for the o cases file and anyon e debtor ar	se on debts owed to an insider or be benefit of the insider is less than ed on or after the date of he in control of a corporate debtor and insiders of such affiliates; and						
4.1	Payments or other transfers of property in List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments light and their relatives; general partners of a parany managing agent of the debtor. 11 U.S.C. None  Insider's Name and Address  See SOFA 4 Attachment Insider's Name	the reimbursement is the aggregate viol1/25 and every sted in line 3. Instruction at the state of the state o	ts, made within 1 year before filingling of all property transferred to 3 years after that with respect to ders include officers, directors, and their relatives; affiliates of the Total amount or value	ng this cas o or for the o cases file and anyon e debtor ar	se on debts owed to an insider or be benefit of the insider is less than ed on or after the date of he in control of a corporate debtor and insiders of such affiliates; and						
4.1	Payments or other transfers of property in List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments light and their relatives; general partners of a parany managing agent of the debtor. 11 U.S.C. None  Insider's Name and Address  See SOFA 4 Attachment Insider's Name	the reimbursement is the aggregate viol1/25 and every sted in line 3. Instruction at the state of the state o	ts, made within 1 year before filingling of all property transferred to 3 years after that with respect to ders include officers, directors, and their relatives; affiliates of the Total amount or value	ng this cas o or for the o cases file and anyon e debtor ar	se on debts owed to an insider or benefit of the insider is less than ed on or after the date of he in control of a corporate debtor and insiders of such affiliates; and						
4.1	Payments or other transfers of property in List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments light and their relatives; general partners of a parany managing agent of the debtor. 11 U.S.C. None  Insider's Name and Address  See SOFA 4 Attachment Insider's Name	the reimbursement is the aggregate viol1/25 and every sted in line 3. Instruction at the state of the state o	ts, made within 1 year before filingling of all property transferred to 3 years after that with respect to ders include officers, directors, and their relatives; affiliates of the Total amount or value	ng this cas o or for the o cases file and anyon e debtor ar	se on debts owed to an insider or benefit of the insider is less than ed on or after the date of he in control of a corporate debtor and insiders of such affiliates; and						
4.1	Payments or other transfers of property in the List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments list and their relatives; general partners of a parany managing agent of the debtor. 11 U.S.C	the reimbursement is the aggregate viol1/25 and every sted in line 3. Instruction at the state of the state o	ts, made within 1 year before filingling of all property transferred to 3 years after that with respect to ders include officers, directors, and their relatives; affiliates of the Total amount or value	ng this cas o or for the o cases file and anyon e debtor ar	se on debts owed to an insider or benefit of the insider is less than ed on or after the date of he in control of a corporate debtor and insiders of such affiliates; and						
4.1	Payments or other transfers of property in List payments or transfers, including expensions guaranteed or cosigned by an insider unless \$7,575. (This amount may be adjusted on 4 adjustment.) Do not include any payments list and their relatives; general partners of a parany managing agent of the debtor. 11 U.S.C. None  Insider's Name and Address  See SOFA 4 Attachment Insider's Name	the reimbursement is the aggregate viol1/25 and every sted in line 3. Instruction at the state of the state o	ts, made within 1 year before filingling of all property transferred to 3 years after that with respect to ders include officers, directors, and their relatives; affiliates of the Total amount or value	ng this cas o or for the o cases file and anyon e debtor ar	se on debts owed to an insider or benefit of the insider is less than ed on or after the date of he in control of a corporate debtor and insiders of such affiliates; and						

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Case number (if known):

Debtor: Piper HCO, LLC

Debtor:	Piper HCO, LLC	Case 24-10443-TMF	H Doc 476-1 Filed	05/31/24 Page 5 Case number (if known):	of 27 24-10573	
	Name					
5. R	Repossessions,	foreclosures, and returns				
			y a creditor within 1 year before n lieu of foreclosure, or returned			
v	☑ None					
C	reditor's Name a	and Address	Description of the Property	Date	Value of prope	rty
	5.1				\$	
	Creditor's Name	е				
	-		_			
	Street					
			_			
	City	State ZIP Code				
			_			
	Country					
6. 5	Setoffs					
C			titution, that within 90 days befor tke a payment at the debtor's dir			
	Jebt.					
	☐ None					
	Creditor's N	Name and Address	Description of the action creditor	or took Date action was to	aken Amount	
	6.1 Bed Tax		Offset with Medicaid		\$	90,091.87
	Creditor's Nam	е				
	Street					

Last 4 digits of account number: XXXX-

City

Country

State

ZIP Code

<u> </u>			Case r	number (if known)	24-10573							
Name				, ,								
Legal Actions or Ass	ignments											
egal actions, administrat	ive proceedings, cour	t actions, execution	ons, attachments, or go	overnmental	audits							
ist 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.												
None	, .											
Case title	Nature of	case	Court or agency's	name and ad	dress	Sta	tus of case					
7.1 See SOFA 7 Attachmen	t						Pending					
			Name				On appea					
							Concluded					
			Street									
Case number						_						
			City	State	ZIP Code	_						
			Country			_						
i	egal actions, administrati st the legal actions, procee volved in any capacity—wi None Case title	st the legal actions, proceedings, investigations, a volved in any capacity—within 1 year before filing  None  Case title  Nature of 6  7.1 See SOFA 7 Attachment	egal actions, administrative proceedings, court actions, executions at the legal actions, proceedings, investigations, arbitrations, mediation volved in any capacity—within 1 year before filing this case.  None  Case title  Nature of case  7.1 See SOFA 7 Attachment	egal actions, administrative proceedings, court actions, executions, attachments, or go st the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal volved in any capacity—within 1 year before filing this case.  None  Case title  Nature of case  Court or agency's in the second of the s	egal actions, administrative proceedings, court actions, executions, attachments, or governmental st the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state ag volved in any capacity—within 1 year before filing this case.  None  Case title  Nature of case  Court or agency's name and additional states agont a court or agency in the case agont actions.  See SOFA 7 Attachment  Case number  Case number  City  State	egal actions, administrative proceedings, court actions, executions, attachments, or governmental audits st the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which volved in any capacity—within 1 year before filing this case.  None  Case title  Nature of case  Court or agency's name and address  7.1 See SOFA 7 Attachment  Name  Street  Case number  City  State  ZIP Code	egal actions, administrative proceedings, court actions, executions, attachments, or governmental audits set the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the covolved in any capacity—within 1 year before filing this case.  None  Case title  Nature of case  Court or agency's name and address  State  T.1 See SOFA 7 Attachment  Name  Street  Case number  City  State  ZIP Code					

#### 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 addr	ess	Description of the Property		Value			
				\$	\$			
Custodian's name					Court name and addr	ess		
			Case title					
Street					Name			
	Ca		Case number	Street				
City	State	ZIP Code						
Country			Date of order or assignment		City	State	ZIP Code	
					Country			

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Debtor: Piper HCO, LLC Case number (it known): 24-10573

Name

Part 4: Certai	n 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

✓ None

	Recipient's name and address			Description of the gifts or contributions	Dates given	Value
.1						\$
	Creditor's Name					
	Street			_		
	City	State	ZIP Code	_		
	Country			_		
	Recipient's relat	ionship to de	ebtor			

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 8 of 27

Debtor: Piper HCO, LLC Case number (if known):

Name

Part 5:	Certain	Losses
---------	---------	--------

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

☐ 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
.1	A ransomware cyber attack which occurred in October 2023, ultimately led to the loss of	None	10/2023	\$ Undetermined

10.1 large quantities of data and signficant consulting fees Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 9 of 27

Debtor: Piper HCO, LLC Case number (if known): 24-10573

Name

Part 6: Certain Payments or Transfers

#### 11. Payments related to bankruptcy

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.

✓ None

			If not money, describe any property transferred	Dates	Total amount or value
					\$
ddress					
treet			-		
ity	State	ZIP Code	-		
ountry			-		
mail or website a	ddress				
The weeds the west	mant if not	dahtar2	_		
t	ty Duntry mail or website a	ty State  buntry  mail or website address	ty State ZIP Code	ty State ZIP Code  buntry  mail or website address	ty State ZIP Code  ountry  mail or website address

#### 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.

 $\ensuremath{\,\overline{\!\!\mathcal M\!}}$  None

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

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 10 of 27

Debtor: Piper HCO, LLC Case number (if known): 24-10573

Name

#### 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

	_	 \$
Address		
Street	_	
City State ZIP Code	_	
Country	_	
Relationship to Debtor		

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 11 of 27

Case number (# known): 24-10573

Part 7: Previous Locations

14. Previous addresses

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address

Dates of occupancy

From \_\_\_\_\_\_ To \_\_\_\_\_\_

Street

ZIP Code

City

Country

State

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 12 of 27

Debtor: Piper HCO, LLC 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?
- $\ \square$  No. Go to Part 9.

Facility Nam	ility 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		
Piper City Rehab & Living Center Facility Name			Skilled Nursing Facility	1,060		
600 South Maple St			Location where patient records are maintained (if different from			
600 South Ma	aple St		facility address). If electronic, identify any service provider.	How are records kept?		
600 South Ma	aple St			How are records kept? Check all that apply:		
	aple St		facility address). If electronic, identify any service provider.  PCC Electronic. Also some paper Files are at CYE Girard (1016)	·		
Street	aple St	60959	facility address). If electronic, identify any service provider.  PCC Electronic. Also some paper Files are at CYE Girard (1016)	Check all that apply:		

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 13 of 27 Piper HCO, LLC Debtor: Case number (if known): Name Personally Identifiable Information Part 9: 16. Does the debtor collect and retain personally identifiable information of customers? Medical and Billing Information Does the debtor have a privacy policy about that information? □ No Yes 17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit? ☐ No. Go to Part 10. ☑ Yes. Does the debtor serve as plan administrator? ☑ No. Go to Part 10. ☐ Yes. Fill in below: Employer identification number of the plan Name of plan 17.1 EIN: Has the plan been terminated?

□ No□ Yes

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Debtor: Piper HCO, LLC Case number (if known): 24-10573

Name

#### 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	on name and addr	ess	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				XXXX-	Checking		\$
	Name			<del></del>	Savings		
					Money market		
	Street			-	Brokerage		
					Other		
			,	-			
	City	State	ZIP Code	-			
	Country						

#### 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.

✓ None

	Depository institut	tion name and a	ddress	Names of anyone with access to it	Description of the contents	Does debtor still have it?
19.1						□ No
	Name					
						☐ Yes
	Street					
				Address		
	City	State	ZIP Code			
	Country					

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 15 of 27 Debtor: Piper HCO, LLC Case number (if known): Name 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 Does debtor still have it? Facility name and address Names of anyone with access to it Description of the contents 20.1 See Global Notes □ No Name ☐ Yes Street

Address

ZIP Code

City

Country

State

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Debtor: Piper HCO, LLC Case number (if known): 24-10573

Name

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 addre	ess	Location of the property	Description of the property	Value
21.1	See Global Note	es				\$
	Street			-		
	City	State	ZIP Code	-		

tor:	Case 24-10	0443-TMH	D0C 476-1	Filed 05/3	31/24 Page 17 of 27 Case number (if known): 24-105						
	Name										
rt 1:	2: Details About Environmen	ntal Information									
	e purpose of Part 12, the followin	g definitions apply	<i>/</i> :								
	Environmental law means any sta				ion, contamination, or hazardous	s material,					
S	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.										
ŀ	Hazardous material means anythior a similarly harmful substance.		nmental law defin	es as hazardous	or toxic, or describes as a polluta	ant, contaminant,					
por	rt all notices, releases, and pro-	ceedings known	, regardless of w	vhen they occurr	ed.						
	☐ No ☑ Yes. Provide details below.										
	Case title	Court or a	gency name and a	ddress	Nature of the case	Status of case					
	People of the State of Illinois 22.1 V. Piper HCO, LLC		urt of the eleventh	judicial circuit	Violations of Effluent Limits for Ammonia Nitrate						
		500 South Street	Second Street		_	☐ On appeal ☐ Concluded					
	Case Number				_						
	2023-CH-2	Springfield	IL	62706							
		City	State	ZIP Code							
		Country			_						
	Has any governmental unit othe an environmental law?	•	e debtor that the	e debtor may be	liable or potentially liable und	er or in violation of					
а		•	e debtor that the	e debtor may be	liable or potentially liable und	er or in violation of					
<b>a</b>	an environmental law?	•	e debtor that the	e debtor may be	liable or potentially liable und	er or in violation of					
a	an environmental law? ☑ No	erwise notified th	e debtor that the Governmental unaddress	·	liable or potentially liable und						
a	an environmental law?  ☑ No ☐ Yes. Provide details below.  Site name and address  23.1	erwise notified th	Governmental ui address	·							
<b>a</b>	an environmental law?  ☑ No □ Yes. Provide details below.  Site name and address	erwise notified th	Governmental ui	·							

State

ZIP Code

ZIP Code

City

Country

City

Country

State

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 18 of 27 Debtor: Piper HCO, LLC

Case number (if known):

Name

24. Has the debtor notified any governmental unit of any release of hazardous material?

✓ No

 $\ \square$  Yes. Provide details below.

	Site name	and address		Governmen	ital unit nam	e and address	Environmental law, if known	Date of notice
24.1	Name			Name				
	Street			Street				
	City	State	ZIP Code	City	State	ZIP Code		
	Country			Country				

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 19 of 27 Piper HCO, LLC Debtor: Case number (if known): Name Details About the Debtor's Business or Connections to Any Business 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 **Employer Identification number Business name and address** Describe the nature of the business Do not include Social Security number or ITIN. 25.1 EIN: Name Dates business existed То Street State ZIP 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. □ None Name and Address Dates of service 26a.1 Petersen Health Care Management, LLC From To 830 West Trailcreek Dr. 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 26b. statement within 2 years before filing this case. □ None

Name and Add	Iress	Dates	ates of service				
1 Petersen Healt	hcare Management, M	Mark Petersen	From	12/22/2011	То	Present	
Name							
830 West Trail	creek Dr.						
Street							
Peoria	IL	61614					
City	State	ZIP Code					
Country							

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 20 of 27 Piper HCO, LLC Debtor: Case number (if known): Name 26b.2 Ginoli & Company 2002 Present From То Name 7625 N University St. Street Peoria IL 61614 City State ZIP Code Country 26b.3 Clifton, Larson, Allen 2012 Present From То Name 301 SW Adams St. Street Suite 1000 Peoria IL 61602 State ZIP Code City Country 26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed. □ None If any books of account and records are unavailable, explain why Name and address 26c.1 Getzler Henrich and Associates Name 295 Madison Ave Street Floor 20 New York NY 10023 City State ZIP Code Country If any books of account and records are Name and address unavailable, explain why 26c.2 Ginoli & Company Name 7625 N University St. Street Peoria IL 61614 State ZIP Code City

Country

Case 24-10443-TMH Doc 476-1 Filed 05/31/24 Page 21 of 27 Piper HCO, LLC Debtor: Case number (if known): Name If any books of account and records are Name and address unavailable, explain why 26c.3 Petersen Healthcare Management, Mark Petersen Name 830 West Trailcreek Dr. Street IL Peoria 61614 City State ZIP Code Country If any books of account and records are Name and address 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. □ None Name and address Name Street City State ZIP Code Country

Debtor	: Pipe	er HCO, LLC	Case 24-10	443-TMH	Doc 476-1	Filed	05/31/	24 Page case number (if know	22 of 27	3
	Name	е								
<b>27.</b>	Invent	ories								
	Have a	any invento	ries of the debtor's	property been	taken within 2 years	s before fi	iling this ca	se?		
	☑ No	)								
	□ Ye	s. Give the	details about the t	wo most recent	inventories.					
		Name of the	ne person who sup	ervised the tak	ing of the inventory	_	ate of nventory		mount and ba of each inve	
								\$		
		Name and records	address of the pe	rson who has p	ossession of invent	ory				
	27.1									
		Name								
		Street								
		City	State		ZIP Code					
		Country								
28.	List the	ne debtor's	officers, director of the debtor at	rs, managing n the time of the	nembers, general per filing of this case	oartners,	members	in control, con	trolling sha	reholders, or other
		Name		Address	3			Position and Nat	ure of any	% of interest, if any
	28.1	Mark B. Pe	etersen	830 Wes	st Trailcreek Dr., Pe	oria, IL 6	1614	Member		1%
	28.2	SABL, LLC	;	830 Wes	st Trailcreek Dr., Pe	oria, IL 6	1614	Manager		and basis (cost, market, or ch inventory  g shareholders, or other  any % of interest, if any
29.					he debtor have off trol of the debtor w					partners, members
	☑ No	0								
	□ Ye	es. Identify	below.							
		Name		Address			Position a	and Nature of		

29.1 \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_

Debtor:	Piper	HCO, LLC		4-10443-7	гмн р	oc 476-1	Filed		Page 2 umber (if known):	3 of 27 24-10573	
	Name										
	Within	1 year be	fore filing th	or withdrawals is case, did the ans, stock rede	e debtor prov	ide an insider	with value i	in any form, inc	luding salary	, other comp	ensation, draws,
	☑ Yes	s. Identify	below.								
		Name an	d address o	of recipient		Amount o or descrip value of p	tion and	Dates		Reason for p	providing the value
	30.1		A Question 4	4							
		Name									
		Street									
		City		State	ZIP Code						
		0									
		Country									
		Relations	ship to debt	or							
31.	☑ No			g this case, h	as the debto	or been a men	nber of an	y consolidated	l group for t	ax purposes	?
	☐ Yes	s. Identify	below.								
	1	Name of t	he parent co	orporation			Employe	r Identification	number of th	e parent corp	ooration
	31.1						EIN:				
32.	Withi	n 6 years	before filir	ng this case, h	nas the debt	or as an empl	loyer been	responsible f	or contribut	ing to a pen	sion fund?
	☑ No	)									
	□ Ye	s. Identify	/ below.								
		Name of	f the pensio	n fund		E	mployer Id	lentification nu	mber of the p	ension fund	
	32.1					E	IN:				

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 $\overline{\mathbf{Q}}$ 

Yes

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.

Executed on

MM / DD / YYYYY

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 Filling for Bankruptcy (Official Form 207) attached?

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#### In re: Piper HCO, LLC Case No. 24-10573

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 loan repayments, Suppliers or vendors, Services, or Other)
Gale Healthcare Solutions	C/O RealTime Services	PO Box 4729	Winter Park	FL	32793-4729	1/9/2024	\$29,019.76	Vendor
Gale Healthcare Solutions	C/O RealTime Services	PO Box 4729	Winter Park	FL	32793-4729	2/16/2024	\$25,845.97	Vendor
Martin Bros	406 Viking Road		Cedar Falls	IA	50613	2/10/2024	\$30,146.60	Vendor
McKesson Medical-Surgical	PO Box 630693		Cincinnati	ОН	452630693	1/5/2024	\$4,473.48	Vendor
McKesson Medical-Surgical	PO Box 630693		Cincinnati	ОН	452630693	1/22/2024	\$18,169.91	Vendor
Onestaff Medical LLC	C/O American National Bank	PO Box 3544	Omaha	NE	68103	12/29/2023	\$2,590.00	Vendor
Onestaff Medical LLC	C/O American National Bank	PO Box 3544	Omaha	NE	68103	1/9/2024	\$2,590.00	Vendor
Onestaff Medical LLC	C/O American National Bank	PO Box 3544	Omaha	NE	68103	1/31/2024	\$17,955.00	Vendor
Onestaff Medical LLC	C/O American National Bank	PO Box 3544	Omaha	NE	68103	2/13/2024	\$6,256.25	Vendor
Select Rehabilitation LLC	PO Box 71985		Chicago	IL	606941985	1/2/2024	\$16,592.20	Vendor

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#### In re: Piper HCO, LLC Case No. 24-10573 Attachment 4

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

			Total amount or							
Insider's name	Address 1	City	State	Zip	Date	value	Reasons for payment or transfer	Relationship to debtor		
**Please reference Global Notes for additional infor	rmation related to Intercompany Payments/Transfers									
Petersen Health Care Management, LLC*	830 West Trailcreek Dr.	Peoria	IL	61614	4/13/2023	\$2,980.70	V00300Petersen Health Care Management	Related Entity		
Petersen Health Care Management, LLC*	830 West Trailcreek Dr.	Peoria	IL	61614	5/11/2023	\$10,422.25	V00300Petersen Health Care Management	Related Entity		
Petersen Health Care Management, LLC*	830 West Trailcreek Dr.	Peoria	IL	61614	6/8/2023	\$8,417.24	V00300Petersen Health Care Management	Related Entity		
Petersen Health Care Management, LLC*	830 West Trailcreek Dr.	Peoria	IL	61614	7/13/2023	\$14,387.00	V00300Petersen Health Care Management	Related Entity		
Petersen Health Care Management, LLC*	830 West Trailcreek Dr.	Peoria	IL	61614	8/10/2023	\$16,684.88	V00300Petersen Health Care Management	Related Entity		
Petersen Health Care Management, LLC*	830 West Trailcreek Dr.	Peoria	IL	61614	9/15/2023	\$13,512.37	V00300Petersen Health Care Management	Related Entity		
Petersen Health Care Management, LLC*	830 West Trailcreek Dr.	Peoria	IL	61614	10/12/2023	\$16,154.44	V00300Petersen Health Care Management	Related Entity		
Petersen Health Care Management, LLC*	830 West Trailcreek Dr.	Peoria	IL	61614	11/9/2023	\$4,932.76	V00300Petersen Health Care Management	Related Entity		
Petersen Health Care Management, LLC*	830 West Trailcreek Dr.	Peoria	IL	61614	1/11/2024	\$2,192,35	V00300Petersen Health Care Management	Related Entity		

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#### In re: Piper HCO, LLC Case No. 24-10573 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 III, LLC; PETERSEN HEALTH CARE IVI, LLC; PETERSEN HEALTH CARE IVI, LLC; PETERSEN HEALTH OPERATIONS III, LLC; PETERSEN HEALTH OPERATIONS, LLC; PETERSEN HEALTH OPERATIONS, LLC; PETERSEN HEALTH QUALITY, LLC; PETERSEN MANAGEMENT COMPANY, LLC; SJL HEALTH SYSTEMS, INC.; ALEDO HCO, LLC; ARCOLA HCO, LLC; CASEY HCO, LLC; CHARL ESTON HCO, LLC; COLLINSVILLE HCO, LLC; CUMBERLAND HCO, LLC; DECATUR HCO, LLC; EASTVIEW HCO, LLC; EFFINGHAM HCO, LLC; HAVANA HCO, LLC; KEWANEE HCO, LLC; LEBANON HCO, LLC; MCLEANSBORO HCO, LLC; NORTH AURORA HCO, LLC; PETERSEN HEALTH BUSINESS, LLC; PETERSEN HEALTH JUNCTION, LLC; PETERSEN HEALTH RESOURCES, LLC; PETERSEN HEALTH & WELLNESS, LLC; PIER 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; WANDALIA HCO, LLC; WANDALIA HCO, LLC; SULLIVAN HCO, LLC; WATSEKA HCO, LLC; AND WESTSIDE HCO, LLC, DEFENDANTS			10th Judicial Circuit Court of					
	2024-LA-0000030	Undeterminable	III	324 Main St. Ste. 215	Peoria	IL	61602	Pending