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

NOTICE OF CERTAIN AMENDMENTS TO SCHEDULES OF ASSETS AND LIABILITIES AND STATEMENT OF FINANCIAL AFFAIRS

PLEASE TAKE NOTICE OF THE FOLLOWING:

Pursuant to Rule 1009(a) of the Federal Rules of Bankruptcy Procedure, the above-captioned debtors and debtors in possession (collectively, the "Debtors") hereby provide notice (this "Notice") that, as set forth below, the Debtors have amended: (i) Schedule A/B, Part 11 for twenty-nine of the Debtors; (ii) Schedule A/B, Part 55 for three of the Debtors; (iii) Schedule E/F for three of the Debtors; (iv) Schedule G of seventy of the Debtors; and (v) Part 2, Question 4 of the Statements (as defined below) for twelve of the Debtors.²

ORIGINAL SCHEDULES OF ASSETS AND LIABILITES AND STATEMENT OF FINANCIAL AFFAIRS

On May 31, 2024, the Debtors filed their Schedules of Assets and Liabilities (the "Schedules") and Statements of Financial Affairs (the "Statements") [Docket Nos. 380–505] with the United States Bankruptcy Court for the District of Delaware (the "Court").

AMENDED SCHEDULES AND STATEMENTS

Certain of the Debtors hereby amend (i) Schedule A/B, Part 11 to identify certain intercompany receivables; (ii) Schedule A/B, Part 55 to identify certain parcels of real property that were either scheduled incorrectly or inadvertently omitted; (iii) Schedule E/F to identify intercompany payables; and (iv) Schedule G to include additional contracts identified in the Debtors' review of their books and records; (the "Amended Schedules"). The Amended Schedules are attached hereto as Exhibit A. The Debtors hereby amend Part 2, Question 4 of the Statements to include transfers made to certain insiders that were not readily available to the Debtors at the

Attached hereto as Schedule 1 is a list of the Debtors whose Schedules and/or Statements have been amended.



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.

time of filing of the Statements (the "<u>Amended Statements</u>"). The Amended Statements are attached hereto as **Exhibit B**.

Except for the Amended Schedules and the Amended Statements, no changes have been made to the Schedules or the Statements since they were originally filed. The Amended Schedules and the Amended Statements are hereby incorporated into, and comprise an integral part of, the Schedules and the Statements.

AMENDED SCHEDULES BAR DATE

On May 21, 2024, the Court entered an order [Docket No. 339], which established certain bar dates in the Debtors' chapter 11 cases. On May 31, 2024, the Debtors filed the *Amended Notice* of Entry of Bar Date Order Establishing Deadline for Filing Proofs of Claim (Including for Claims Asserted Under Section 503(b)(9) of the Bankruptcy Code) Against the Debtors [Docket No. 379].

To the extent that parties affected by the amendments to Schedule E/F and Schedule G (each an "<u>Affected Party</u>") wish to file a proof of claim in the Debtors' chapter 11 cases with respect to these Amended Schedules, such Affected Party must do so by no later than <u>5:00 p.m.</u> (<u>Prevailing Central Time</u>) on <u>May 23, 2025</u> (the "<u>Amended Schedules Bar Date</u>").

An Affected Party need not submit a duplicate proof of claim if such Affected Party has already filed a valid proof of claim prior to the applicable bar date.

GLOBAL NOTES

The Amended Schedules and the Amended Statements remain subject in all respects to the Global Notes and Statements of Limitations, Methodology, and Disclaimers Regarding the Debtors' Schedules of Assets and Liabilities and Statements of Financial Affairs filed with the original Schedules and Statements, as amended and/or superseded by the Global Notes and Statements of Limitations, Methodology, and Disclaimers Regarding the Debtors' Amended Schedules of Assets and Liabilities and Statements of Financial Affairs appended to the Amended Schedules and the Amended Statements.

RESERVATION OF RIGHTS

The Debtors reserve their rights to dispute, or to assert offsets or defenses against, any filed claim or any claim listed or reflected in the Amended Schedules and the Amended Statements as to the nature, amount, liability, classification, or otherwise. The Debtors reserve all rights to further amend or supplement the Amended Schedules and the Amended Statements. In addition, nothing contained in this Notice shall preclude the Debtors from objecting to any claim, whether scheduled or filed, on any and all grounds.

Dated: April 22, 2025

Wilmington, Delaware

Respectfully submitted,

YOUNG CONAWAY STARGATT & TAYLOR, LLP

/s/ Shella Borovinskaya

Andrew L. Magaziner (No. 5426) Shella Borovinskaya (No. 6758) Carol E. Thompson (No. 6936)

Rodney Square

1000 North King Street

Wilmington, Delaware 19801 Telephone: (302) 571-6600 Facsimile: (302) 571-1253

Email: amagaziner@ycst.com

sborovinskaya@ycst.com cthompson@ycst.com

and

WINSTON & STRAWN LLP

Daniel J. McGuire (admitted *pro hac vice*) Gregory M. Gartland (admitted *pro hac vice*) 35 W. Wacker Drive

Chicago, IL 60601

Telephone: (312) 558-5600 Facsimile: (312) 558-5700

Email: dmcguire@winston.com Email: ggartland@winston.com

and

Carrie V. Hardman (admitted *pro hac vice*)

200 Park Avenue

New York, New York 10166 Telephone: (212) 294-6700 Facsimile: (212) 294-4700

Email: chardman@winston.com

Counsel for the Debtors and Debtors in Possession

Schedule 1

List of Debtors Subject to Amended Schedules and Amended Statements

Schedule A/B, Part 11 Amendments

CYE Girard HCO, LLC

CYE Monmouth - PHC, Inc.

Lebanon HCO, LLC

Midwest Health Operations, LLC

Petersen Health & Wellness, LLC

Petersen Health Business, LLC

Petersen Health Care - Farmer City, LLC

Petersen Health Care - Illini, LLC

Petersen Health Care - Roseville, LLC

Petersen Health Care II, Inc.

Petersen Health Care Management, LLC

Petersen Health Care VIII, LLC

Petersen Health Care, Inc.

Petersen Health Enterprises, LLC

Petersen Health Group, LLC

Petersen Health Network, LLC

Petersen Health Properties, LLC

Petersen Health Quality, LLC

Petersen Health Systems, Inc.

Petersen Management Company, LLC

Petersen MT3, LLC

Piper HCO, LLC

SABL, LLC

SJL Health Systems, Inc.

Sullivan HCO, LLC

Tarkio HCO, LLC

Tuscola HCO, LLC

Westside HCO, LLC

XCH, LLC

Schedule A/B, Part 55 Amendments

Knoxville & Pennsylvania, LLC

Petersen Health Care II, Inc.

Petersen Health Systems, Inc.

Schedule E/F Amendments

CYE Girard HCO, LLC

CYE Kewanee- PHC, Inc.

CYE Knoxville - PHC, Inc.

CYE Monmouth - PHC, Inc.

Effingham HCO, LLC

El Paso - PHC, Inc

Kewanee HCO, LLC

Knoxville & Pennsylvania, LLC

Legacy - PHC Inc.

Marigold - PHC Inc.

Midwest Health Operations, LLC

Midwest Health Properties, LLC

North Aurora HCO, LLC

Petersen Health & Wellness, LLC

Petersen Health Business, LLC

Petersen Health Care - Farmer City, LLC

Petersen Health Care - Illini, LLC

Petersen Health Care - Roseville, LLC

Petersen Health Care II, Inc.

Petersen Health Care Management, LLC

Petersen Health Care VIII, LLC

Petersen Health Care, Inc.

Petersen Health Enterprises, LLC

Petersen Health Group, LLC

Petersen Health Network, LLC

Petersen Health Properties, LLC

Petersen Health Quality, LLC

Petersen Health Systems, Inc.

Petersen Management Company, LLC

Polo - PHC, Inc.

SABL, LLC

SJL Health Systems, Inc.

War Drive, LLC

XCH, LLC

Schedule G Amendments

Aledo HCO, LLC

Arcola HCO, LLC

Aspen HCO, LLC

Bement HCO, LLC

Betty's Garden HCO, LLC

Casey HCO, LLC

Collinsville HCO, LLC

CYE Bradford HCO, LLC

CYE Bushnell HCO, LLC

CYE Girard HCO, LLC

CYE Knoxville HCO, LLC

CYE Monmouth HCO, LLC

CYE Sullivan HCO, LLC

CYE Walcott HCO, LLC

Decatur HCO, LLC

Eastview HCO, LLC

Effingham HCO, LLC

Havana HCO, LLC

Jonesboro, LLC

Kewanee HCO, LLC

Knoxville & Pennsylvania, LLC

Lebanon HCO, LLC

Macomb, LLC

McLeansboro HCO, LLC

Midwest Health Operations, LLC

Midwest Health Properties, LLC

North Aurora HCO, LLC

Petersen Health & Wellness, LLC

Petersen Health Business, LLC

Petersen Health Care - Farmer City, LLC

Petersen Health Care - Illini, LLC

Petersen Health Care - Roseville, LLC

Petersen Health Care II, Inc.

Petersen Health Care III, LLC

Petersen Health Care Management, LLC

Petersen Health Care V, LLC

Petersen Health Care VII, LLC

Petersen Health Care XI, LLC

Petersen Health Care, Inc.

Petersen Health Enterprises, LLC

Petersen Health Group, LLC

Petersen Health Network, LLC

Petersen Health Properties, LLC

Petersen Health Quality, LLC

Petersen Health Systems, Inc.

Petersen Management Company, LLC

Petersen MT, LLC

Petersen MT3, LLC

Piper HCO, LLC

Pleasant View HCO, LLC

Prairie City HCO, LLC

Robings HCO, LLC

Rosiclare HCO, LLC

Royal HCO, LLC

SABL, LLC

SC Healthcare Holding, LLC

Shangri La HCO, LLC

Shelbyville HCO, LLC

SJL Health Systems, Inc.

South Elgin, LLC

Sullivan HCO, LLC

Swansea HCO, LLC

Tarkio HCO, LLC

Tuscola HCO, LLC

Twin HCO, LLC

Vandalia HCO, LLC

Village Kewanee HCO, LLC

War Drive, LLC

Watseka HCO, LLC

Westside HCO, LLC

XCH, LLC

SOFA Part 2, Question 4 Amendments

Midwest Health Operations, LLC

Petersen Health & Wellness, LLC

Petersen Health Care - Illini, LLC

Petersen Health Care - Roseville, LLC

Petersen Health Care II, Inc.

Petersen Health Care Management, LLC

Petersen Health Network, LLC

Petersen Health Systems, Inc.

Petersen Management Company, LLC

SABL, LLC

SJL Health Systems, Inc.

XCH, LLC

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' AMENDED SCHEDULES OF ASSETS AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS

INTRODUCTION

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

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>") filed 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 May 31, 2024. *See* Docket Nos. 380–505.

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.

As discussed in global notes attached to each of the originally filed Schedules and Statements (the "Global Notes"), due in part to the Data Breach, the records of certain "insider" payments disclosed in question 4 of the Schedules were unavailable at the time Schedules and Statements were filed and were thus not represented therein.⁴ The Debtors, as denoted in the Global Notes, engaged a third-party accounting firm which has reviewed and recreated certain missing portions of the Debtors' books and records—relevantly, that work has yielded a more fulsome understanding of the Debtors "insider" payments, among other things. Accordingly, the Debtors now file these amendments to the Schedules and Statements (the "Amended Schedules and Statements") to provide updates to the Schedules and Statements where new details have been made available.

As part of their ongoing business operations and review of their books and records, the Debtors reviewed additional contracts which have been added to Schedule G. The Debtors have also identified additional accounts receivable amounts due from non-Debtor affiliates, real property owned by certain Debtors, additional unsecured claims, and additional payments to insiders, all of which have been added in the Amended Schedules and Statements, where applicable. The Debtors have also included various one-off updates as part of the Amended Schedules and Statements where applicable and necessary.

The Amended 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 Amended Schedules and Statements are unaudited and subject to potential adjustment. In preparing the Amended Schedules and Statements, the Debtors relied on financial data derived from their books and records that was available at the time of preparation.

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

The Debtors and their estates reserve all rights to further amend or supplement the Amended Schedules and Statements as may be necessary and appropriate, but expressly do not

Capitalized terms used herein but not otherwise defined shall have the meaning ascribed to them in the Global Notes.

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.

undertake any obligation to update, modify, revise, or re-categorize the information provided in the Amended 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 Amended Schedules and Statements or these Global Notes and Statements of Limitations, Methodology, and Disclaimers Regarding Debtors' Amended Schedules of Assets and Liabilities and Statements of Financial Affairs (these "Amended 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, 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.

Unless specifically amended hereby, the Global Notes are incorporated by reference in full and should be read in conjunction with these Amended Global Notes. These Amended Global Notes should be referred to and reviewed in connection with any review of the Amended Schedules and Statements.

SPECIFIC ADDITIONAL DISCLOSURES WITH RESPECT TO AMENDED SCHEDULES AND STATEMENTS

Schedule A/B

<u>Item 11</u>: As previewed in the Global Notes, the Debtors engaged RubinBrown, LLP to review and reconcile certain historical data in their books and records. As a result of that work, the Debtors now have updated books and records and are filing these Amended Schedules and Statements to provide those updated records. As part of Rubin Brown's work, additional unpaid accounts receivable amounts were identified as due and owing to certain Debtors from various non-Debtor affiliates and Mr. Petersen. Such amounts have been added to the appropriate Debtors' accounts receivable values, where applicable, in the Amended Schedules and Statements.

<u>Item 55</u>: Upon further review and analysis of the Debtors' real property, particularly in the wake of the sale of substantially all of the Debtors' facilities, the Debtors have identified certain parcels of real property that were either scheduled incorrectly or were inadvertently not scheduled. Accordingly, the Debtors have updated Schedule A/B, item 55, where applicable, to accurately reflect their real property assets.

Schedule E/F

<u>Part 2</u>: As previewed in the Global Notes, the Debtors engaged RubinBrown, LLP to review and reconcile certain historical data in their books and records. As part of Rubin Brown's work, additional nonpriority unsecured claims held by non-Debtor affiliates were identified and have been scheduled in the appropriate Debtors' Amended Schedules and Statements.

Schedule G

The Debtors' business is complex, and the Data Breach made the compilation and review of the Debtors' contracts difficult and time-consuming. The amendment to Schedule G reflects the Debtors' best efforts to schedule every known executory contract in the Debtors' books and records. While every effort has been made to ensure the accuracy of Schedule G, inadvertent errors or omissions may have occurred. If the Debtors uncover additional contracts that were not included herein, 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, letters, 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.

Statement of Financial Affairs

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 deposit 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 were not readily available in the Debtors books at the time of filing the original Schedules and Statements. As discussed above, the Debtors engaged RubinBrown, LLP to review and reconcile certain historical data in their books and records and are filing these Amended Schedules and Statements to provide necessary updates. Rubin Brown's work identified instances in which payments were made to Mr. Petersen during the one-year look-back period set forth in Question 4 for various business-related reasons. Such payments have been added to the appropriate Debtors' Amended Schedules and Statements. Rubin Brown's work also identified additional payments from Debtors to non-Debtor affiliates during the one-year look-back period set forth in Question 4. Such payments have been added to the appropriate Debtors Amended Schedules and Statements and marked with an asterisk ("*") as marked in the originally filed Schedules and Statements. Finally, in the originally filed Schedules and Statements, certain insider payments were scheduled to "undetermined" insiders. Rubin Brown's work identified the appropriate recipient insiders for those payments and accordingly, the "undetermined" payments have been removed. Rubin Brown's work also identified certain insider payments that were scheduled inadvertently and such payments have been removed from the appropriate Debtors' Amended Schedules and Statements.

[Remainder of page left intentionally blank]

EXHIBIT A

Amended Schedules

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)

AMENDED SCHEDULES OF ASSETS AND LIABILITIES FOR PETERSEN HEALTH BUSINESS, LLC (CASE NO. 24-10492)

Amended Herein:

• Schedule A/B: Assets Real and Personal Property Part 11: All other assets

- Schedule E/F: Creditors Who Have Unsecured
- Schedule G: Executory Contracts and Unexpired Leases
- Summary of Assets and Liabilities for Non-Individuals

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' claims and noticing agent at www.kccllc.net/Petersen.

Fill in this information to identify the case:

Debtor Name: In re: Petersen Health Business, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 24-10492 (TMH)

☑ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets		
1. Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)		
1a. Real property:		
Copy line 88 from Schedule A/B	\$	0.00
1b. Total personal property:		
Copy line 91A from Schedule A/B	\$	8,743,407.37
1c. Total of all property:		
Copy line 92 from Schedule A/B	\$	8,743,407.37
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$	3,933,640.78
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)		
3a. Total claim amounts of priority unsecured claims:		
Copy the total claims from Part 1 from line 5a of Schedule E/F	\$	689,702.71
3b. Total amount of claims of nonpriority amount of unsecured claims:		
Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F	+\$	1,087,010.02
4. Total liabilities		
Lines 2 + 3a + 3b	\$	5,710,353.51

Fill in this information to identify the case:

Debtor Name: In re: Petersen Health Business, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 24-10492 (TMH)

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

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

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

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

Par	t 1:	Cash and cash equivalents				
1.	Does	the debtor have any cash or cash equ	ivalents?			
	□ N	o. Go to Part 2.				
	☑ Ye	es. Fill in the information below.				
	All ca	ash or cash equivalents owned or co	ontrolled by the debto	or	Current value	of debtor's interest
2	. Cash	on hand				
		2.1 <u>None</u>			\$	
3.	Chec	king, savings, money market, or financ	cial brokerage accounts	s (Identify all)		
	Name	of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number		
		3.1 PNC Bank	Commercial	3573	\$	0.00
		3.2 PNC Bank	Government	2706	\$	0.00
		3.3 PNC Bank	Operating	2482	\$	0.00
4.	Other	cash equivalents (Identify all)				
		4.1 None			\$	
5	Total	of Part 1				
		es 2 through 4 (including amounts on	\$	0.00		

Case 24-10443-TMH Doc 1440 Filed 04/22/25 Page 17 of 75 Petersen Health Business, LLC Case number (if known): Debtor: Name **Deposits and prepayments** 6. Does the debtor have any deposits or prepayments? ☐ No. Go to Part 3. 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 78,779.16

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

8.2 Vendor Security Deposit Receivable

1,746.00

Case 24-10443-TMH Doc 1440 Filed 04/22/25 Page 18 of 75 Petersen Health Business, LLC Case number (if known): Debtor: Name Part 3: Accounts receivable 10. Does the debtor have any accounts receivable? $\ \square$ No. Go to Part 4. $\ensuremath{\,\,^{\square}}$ 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: 1,806,338.00 - \$ 1,806,338.00 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. 1,806,338.00 \$

Case 24-10443-TMH Doc 1440 Filed 04/22/25 Page 19 of 75

Petersen Health Business, LLC Case number (if known): 24-10492 Debtor: Name Part 4: **Investments** 13. Does the debtor own any investments? ☑ No. Go to Part 5. ☐ Yes. Fill in the information below. Valuation method used Current value of debtor's interest for current value 14. Mutual funds or publicly traded stocks not included in Part 1 Name of fund or stock: \$ 15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture Name of entity: % of ownership:

6. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

\$

17. Total of Part 4.

Add lines 14 through 16. Copy the total to line 83.

\$_____0.00

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Petersen Health Business, LLC Case number (if known): Debtor: Name

Part	15: Inventory, excluding agricultu	re assets			
18.	Does the debtor own any inventory (excludi ☑ No. Go to Part 6. ☐ Yes. Fill in the information below.	ng agriculture assets)?		
	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	sale	\$		\$
22.	Other inventory or supplies		\$		\$\$
23.	Total of Part 5. Add lines 19 through 22. Copy the total to line	84.			\$0.00
24.	Is any of the property listed in Part 5 perish:	able?		L	

☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

No			
Yes. Description	Book value\$	Valuation method	_ Current value \$

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

□ No

☐ Yes

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Petersen Health Business, LLC 24-10492 Case number (if known): Debtor:

Name

27.	Does the debtor own or lease any farming and fishing-related assets (other than titled motor 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				
		\$		\$	
29.	Farm animals Examples: Livestock, poultry, farm-raised fish	\$		_ \$	
30.	Farm machinery and equipment (Other than titled motor vehicles)	\$		\$\$	
31.	Farm and fishing supplies, chemicals, and feed	\$		\$	
32.	Other farming and fishing-related property not already listed in	Part 6	-	\$	
33.	Total of Part 6. Add lines 28 through 32. Copy the total to line 85.			\$0.00	
34.	Is the debtor a member of an agricultural cooperative? □ No				
	☐ Yes. Is any of the debtor's property stored at the cooperative?				
	□ No				
	☐ Yes				
35.	Has any of the property listed in Part 6 been purchased within 2	20 days before the bankruptcy	was filed?		
	□ No			•	
	☐ Yes. Description Book value \$	Valuation method	Cur	rent value ^{\$}	
36.	Is a depreciation schedule available for any of the property liste	ed in Part 6?			
	□ No				
	□ Yes				
37.	Has any of the property listed in Part 6 been appraised by a pro	fessional within the last year?			
	□ No				
	□ Yes				

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Debtor: Petersen Health Business, LLC Case number (# known): 24-10492

Name

Par	t 7:	Office furniture, fixtures, and equipment; and collectibles
38	Does	the debtor own or lease any office furniture fixtures equipment or collectibles?

	□ No. Go to Part 8.			
	oxdot 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	\$ 21,977.05	Net Book Value	\$\$
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.	Collectibles <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.			\$21,977.05
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 y	year?	
	☑ No			

□ Yes

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Debtor: Petersen Health Business, LLC Case number (if known): 24-10492

Name

art	8: Machinery, equipment, and vehicles			
46.	Does the debtor own or lease any machinery, equipment, ☑ No. Go to Part 9. ☐ Yes Fill in the information below.	or vehicles?		
	☐ Yes. Fill in the information below. General description	Net book value of debtor's		
	Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled	farm vehicles		\$
48.	Watercraft, trailers, motors, and related accessories Exam floating homes, personal watercraft, and fishing vessels	ples: Boats, trailers, motors,		\$
49.	Aircraft and accessories	\$		\$
50.	Other machinery, fixtures, and equipment (excluding farm	machinery and equipment)	:	\$
51.	Total of Part 8. Add lines 47 through 50. Copy the total to line 87.			0.00
52.	Is a depreciation schedule available for any of the propert	y listed in Part 8?		3.00
	□ No □ Yes			
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 1440 Filed 04/22/25 Page 24 of 75 Petersen Health Business, 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

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Debtor: Petersen Health Business, LLC Case number (if known): 24-10492

Name

Part 10:	Intangibles and intellectual property
59 Does t	he debtor have any interests in intangibles or intellectual proper

	□ No. Go to Part 11.			
	✓ Yes. Fill in the information below.			
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
	60.1 None	\$		\$
61.	Internet domain names and websites			
	61.1 None	\$		\$
62.	Licenses, franchises, and royalties State of Illinois Department of Public Health License, 62.1 Permit, Certification, Registration	\$ Undetermined		\$ Undetermined
		_ •		. •
63.	Customer lists, mailing lists, or other compilations			
	63.1 None	\$		\$
64.	Other intangibles, or intellectual property			
	64.1 None	\$		\$
65.	Goodwill			
	65.1 None	\$		\$
66	Total of Part 10.		Г	
00.	Add lines 60 through 65. Copy the total to line 89.			\$ 0.00
	.,			
67.	Do your lists or records include personally identifiable informati	ion of customers (as defined in	11 U.S.C. §§ 101(41A) an	d 107) ?
	☑ No			
	□ Yes			
68.	Is there an amortization or other similar schedule available for a	any of the property listed in Par	10?	
	☑ No			
	□ Yes			
69.	Has any of the property listed in Part 10 been appraised by a pro	ofessional within the last year?		
	☑ No			
	□ Yes			

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Debtor: Petersen Health Business, LLC Case number (if known): 24-10492

Name 24-10492

	Part 11:	AII	other	assets
--	----------	-----	-------	--------

70.	Does the deb Include all inte	otor own any other assets that have erests in executory contracts and unex	not yet been reported on pired leases not previously	this form? reported on this	form.			
	☐ No. Go to	Part 12.						
	✓ Yes. Fill i	n the information below.						
								Current value of debtor's interest
71.	Notes receiv	vable						
	Description (ir	nclude name of obligor)	Total face amount	doubtful or und	collectible accounts			
	71.1	Employee Advances / Loans	\$ 1,898.00	- \$	Undetermined	_ =	→	\$ 1,898.00
	Description (ir	nclude name of obligor)	Total face amount	doubtful or und	collectible accounts			
	71.2	None	\$	- \$		_ =	→	\$
72	Tax refunds	and unused net operating losses (N	NOLs)					
		or example, federal, state, local)	10_0,					
	72.1 أ	·	_	Tax year				\$
			_					
73.		insurance policies or annuities						
	73.1	Nonw			_			\$
74.	Causes of a	ction against third parties (whether led)	or not a lawsuit					
	74.1	None			_			\$
	I	Nature of claim			_			
		Amount requested	\$		_			
75.		ngent and unliquidated claims or ca e, including counterclaims of the de is			_			\$
	1	Nature of claim			_			
		Amount requested	\$		_			
76.		table or future interests in property						•
	76.1 <u> </u> -	vone			-			\$
	Other proper country club n	ty of any kind not already listed Exnembership	ramples: Season tickets,					
	77.1 S	See AMENDED A/B 77 Attachment						\$ 6,832,669.16
78.	Total of Part	t 11.						
	Add lines 71	through 77. Copy the total to line 90.						\$ 6,834,567.16
79.	Has any of th	ne property listed in Part 11 been ap	praised by a professiona	I within the last	year?			
	□ No				-			
	✓ Yes							

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Debtor: Petersen Health Business, LLC

Case number (if known):

24-10492

Name

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.	\$ 0.00			
81.	Deposits and prepayments. Copy line 9, Part 2.	\$ 80,525.16	-		
82.	Accounts receivable. Copy line 12, Part 3.	\$ 1,806,338.00	-		
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.	\$ 21,977.05	-		
	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.	\$ 6,834,567.16			
91.	Total. Add lines 80 through 90 for each column91a.	\$ 8,743,407.37	+ 91b.	\$ 0.00	
92.	Total of all property on Schedule A/B. Lines 91a + 91b = 92	 			4

Fill in this information to identify the case:
Debtor Name: In re : Petersen Health Business, LLC
United States Bankruptcy Court for the: District of Delaware
Case number (if known): 24-10492 (TMH)

☑ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

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

- 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 cla	aim	Priority a	amount
Priority creditor's name and mailing address Internal Revenue Service		nd mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	689,702.71	\$	689,702.71
Creditor Name	ide Service						
			☐ Contingent				
			☐ Unliquidated				
Creditor's Notice	name		 □ Disputed				
569 West Mor	nroe Street, Suite	1100	_				
Address			Basis for the claim:				
			Taxes				
			_				
Chicago	IL	60675					
City	State	ZIP Code					
Country			_				
Date or date	es debt was inc	urred					
Various			_				
Last 4 digits number	s of account			Is the ☑ N	claim subject	to offset?	•
Specify Cod	le subsection o	of PRIORITY unsecui	red	□ Y	es		
claim: 11 U.S	S.C. § 507(a) (8)						

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.

Nonpriority o	creditor's name ar	nd mailing address	As of the petition filing date, the claim is:	\$	Undetermine
Law Office of J	leffrey Krumpe		Check all that apply.		
Creditor Name			☐ Contingent		
			✓ Unliquidated		
Creditor's Notice n	name				
110 SW Jeffere	ocon		Basis for the claim:		
Address	E3011		 Litigation		
Suite 410				_	
Peoria	<u>IL</u>	61602			
City	State	ZIP Code			
Country					
Date or dates	s debt was incurre	ed	Is the claim subject to offset?		
2/6/2024			✓ No		
Last 4 digits	of account		□ Yes		
Last 4 digits number					
Last 4 digits number Nonpriority of Petersen Healt		nd mailing address	☐ Yes As of the petition filing date, the claim is: Check all that apply.	\$	1,087,010.0
Last 4 digits number Nonpriority o	creditor's name ar	nd mailing address	As of the petition filing date, the claim is:	\$	1,087,010.0
Last 4 digits number Nonpriority of Petersen Healt	creditor's name ar	nd mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	1,087,010.0
Last 4 digits number Nonpriority of Petersen Healt Creditor Name	creditor's name ar th Operations, LLC	nd mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated	\$	1,087,010.0
Last 4 digits number Nonpriority of Petersen Healt Creditor Name Creditor's Notice in	creditor's name ar th Operations, LLC	nd mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent	\$	1,087,010.0
Last 4 digits number Nonpriority of Petersen Healt	creditor's name ar th Operations, LLC	nd mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$	1,087,010.02
Last 4 digits number Nonpriority of Petersen Healt Creditor Name Creditor's Notice in	creditor's name ar th Operations, LLC	nd mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$	1,087,010.0
Last 4 digits number Nonpriority of Petersen Healt Creditor Name Creditor's Notice in	creditor's name ar th Operations, LLC	nd mailing address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$	1,087,010.0
Last 4 digits number Nonpriority of Petersen Healt Creditor Name Creditor's Notice in 830 W Trailcred Address	creditor's name ar th Operations, LLC name ek Dr.		As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$	1,087,010.0
Last 4 digits number Nonpriority of Petersen Healt Creditor Name Creditor's Notice in 830 W Trailcred Address	creditor's name arth Operations, LLC	61614	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$	1,087,010.0
Last 4 digits number Nonpriority of Petersen Healt Creditor Name Creditor's Notice in 830 W Trailcred Address Peoria City Country	creditor's name arth Operations, LLC	61614 ZIP Code	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$	1,087,010.0
Last 4 digits number Nonpriority of Petersen Healt Creditor Name Creditor's Notice in 830 W Trailcred Address Peoria City Country Date or dates	creditor's name are the Operations, LLC mame ek Dr.	61614 ZIP Code	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: Inter Company Loan	\$	1,087,010.0
Last 4 digits number Nonpriority of Petersen Healt Creditor Name Creditor's Notice in 830 W Trailcred Address Peoria City Country	creditor's name ar th Operations, LLC mame ek Dr. IL State s debt was incurred	61614 ZIP Code	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Basis for the claim: Inter Company Loan Is the claim subject to offset?	\$	1,087,010.C

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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 mailing	g 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	- -	
Oity	Cicle	211 0000		
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. + \$ 1,087,010.02

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

1,776,712.73

Fill in this information to identify the case: Debtor Name: In re: Petersen Health Business, LLC United States Bankruptcy Court for the: District of Delaware Case number (if known): 24-10492 (TMH)

☑ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

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

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

2. List all contracts and unexpired	I leases	State the name and whom the debtor he lease	d mailing address for al nas an executory contra	l other parties with ct or unexpired
2.1 State what the contract or	Heat Facility Agreement	Adapt of Illinois, Inc.		
of the debtor's interest	Host Facility Agreement	Name		
		Attn Cindy Janicak		
		Notice Name		
		105 W Madison, Suit	te 1600	
State the term remaining		Address		
List the contract number o	f			
any government contract				
		Chicago	IL	60602
		City	State	ZIP Code
		Country		
2.2 State what the contract or lease is for and the nature	Addendum to Contract	Addus Hospice of Illi	nois, LLC d/b/a JourneyC	are
of the debtor's interest		Name		
		Attn Legal Departme	ent	
		Notice Name		
		6303 Cowboys Way,	Suite 600	
State the term remaining		Address		
List the contract number o	f			
any government contract				
		Frisco	TX	75034 - 0329
		City	State	ZIP Code
		Country		

Debtor:			-IIed 04/22/25 Page Case number (if kn	33 Of 75 own): 24-10492		
	Name	<u>-</u>				
2.3	State what the contract or lease is for and the nature	Nursing Facility Services Agreement		ois, LLC d/b/a JourneyC	are	
	of the debtor's interest		Name			
			Attn Legal Department Notice Name			
			6303 Cowboys Way, S	uite 600		
	State the term remaining		Address			
	List the contract number of					
	any government contract					
			Frisco	TX	75034 - 0329	
			City	State	ZIP Code	
			Country			
	Amended herein: added					
2.4	State what the contract or lease is for and the nature	Wound Care Service Agreement	Advanced Tissue			
	of the debtor's interest	would care service Agreement	Name			
			Notice Name			
			7003 Valley Ranch Dri	ve		
	State the term remaining		Address			
	List the contract number of					
	any government contract					
	, 3					
			Little Rock	AR	72223	
			City	State	ZIP Code	
			Country			
	Amended herein: added					
2.5	State what the contract or lease is for and the nature	Facility Agreement	Aetna Better Health			
	of the debtor's interest		Name			
			Notice Name			
			PO Box 818031, F661			
	State the term remaining		Address			
	List the contract number of					
	any government contract					
			Cleveland	ОН	44181	
			City	State	ZIP Code	
			Country			

Debtor:	Petersen Health Business, LL		IIed 04/22/25 Page Case number (# #	9 34 01 75 24-10492	
	Name			· -	
2.6	State what the contract or lease is for and the nature	Addendum to Contract	All American Healthca	are Services, Inc.	
	of the debtor's interest	Addendam to Contract	Name		
			NaCas Nama		
			Notice Name	Пост	
	State the term remaining		494 Broad Street, 4th Address	FIOOT	
	State the term remaining				
	List the contract number of				
	any government contract				
			Neward	NJ	07102
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.7	State what the contract or lease is for and the nature	Healthcare Staffing Amendment	All American Healthca	are Services, Inc.	
	of the debtor's interest	<u> </u>	Name		
			Notice Name		
s			494 Broad Street, 4th	Floor	
	State the term remaining		Address	1 1001	
	List the contract number of				
	any government contract				
			Newark	NJ	07102
			City	State	ZIP Code
			Country		
	Amended herein: added				
	• • • • • • • •				
2.8	State what the contract or lease is for and the nature	Nursing Facility Laboratory Agreement	Amerathon, LLC d/b/a	a American Health Assoc	iates
	of the debtor's interest		Name		
			Notice Name		
			102 East Main Street		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Galesburg	IL	61401
			City	State	ZIP Code
			Country	·	

Debtor:	Case Petersen Health Business, LL		04/22/25 Page Case number (if knot	35 0f 75 _{wn):} 24-10492	
Debioi.	Name		—— Case Humber (II knot	WII): 24 10432	
2.9	State what the contract or lease is for and the nature of the debtor's interest	Nursing Come Dialysis Transfer Agreement	Benton Dialysis		
	of the deptor's interest		Attn Facility Administrate	or	
			1151 State Route 14 W	est	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Benton	IL	62812
			City	State	ZIP Code
			Country		
	Amended herein: added				
o	State what the contract or lease is for and the nature of the debtor's interest	Addendum to Clinical Services Agreement Dated as of June 23, 2022	Bio-Behavioral Care So	lutions, LLC dba Behav	vioral Care Solutions
	or the debtor 3 interest		Attn Robert A. Clemente	e, Chief Executive Office	er
			Behavioral Care Solutio	ons	
	State the term remaining		Address		
	List the contract number of		39465 W. 14 Mile Rd.		
	any government contract		<u> </u>		
			Novi	MI	48377
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.11	State what the contract or lease is for and the nature	Amendment to Clinical Services Agreement Dated as of June 23, 2022	Bio-Behavioral Care So	lutions, LLC dba Behav	vioral Care Solutions
	of the debtor's interest		Name	Object Foresetting Office	
			Attn Robert A. Clemente Notice Name	e, Chief Executive Offic	er
			Behavioral Care Solutio	ons	
	State the term remaining		Address		
	List the contract number of		39465 W. 14 Mile Rd.		
	any government contract		<u> </u>		
			Novi	MI	48377
			City	State	ZIP Code
			Country		

Debtor:			FIIEC 04/22/25 Page Case number (#)	2 36 01 75 known): 24-10492		
	Name					
2.12	State what the contract or lease is for and the nature	Clinical Services Agreement	Bio-Behavioral Care Solutions, LLC dba Behavioral Care Solutions			
	of the debtor's interest			Name		
				Attn Robert A. Clemente, Chief Executive Officer Notice Name		
				Behavioral Care Solutions		
	State the term remaining		Address			
	3		39465 W. 14 Mile Rd	39465 W. 14 Mile Rd.		
	List the contract number of					
	any government contract					
			Novi	MI	48377	
			City	State	ZIP Code	
			Country			
			,			
	Amended herein: added					
2.13	State what the contract or					
	State what the contract or lease is for and the nature of the debtor's interest	Mobile Imaging Service Agreement BioTech X-ray, Inc Name				
	of the debtor's interest			Attn Tamara Schwartz, President Notice Name		
			1065 Executive Parky	way Ste.220		
	State the term remaining		Address			
	List the contract number of					
	any government contract					
			Ct. Lauria	MO	62444 6267	
			St. Louis	MO	63141-6367	
			City	State	ZIP Code	
			Country			
	Amended herein: added					
2.14	State what the contract or		D: T 1 V 1			
	lease is for and the nature of the debtor's interest	Service Agreement	BioTech X-ray, Inc Name			
			Attn Tamara Schwart			
			1065 Executive Parky			
	State the term remaining		Address			
	List the contract number of					
	any government contract					
			St. Louis	MO	63141-6367	
			City	State	ZIP Code	
			,	Oldio	0000	
			Country			

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Debtor:	Petersen Health Business, LL	С	Case number (if ki		
	Name				
2.15	State what the contract or lease is for and the nature	Mobile Imaging Services Agreement	BioTech X-ray, Inc.		
(of the debtor's interest		Name		
			Attn Tamara Schwartz	, President	
			Notice Name		
			1065 Executive Parkw	yay, Ste.220	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			St. Louis	MO	63141-6367
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.16	State what the contract or lease is for and the nature	Addendum to Contract	Bird In The Hand Staff	fina. LLC	
	of the debtor's interest	Addendam to Contract	Name	3, -	
			Notice Name		
			614 State Route 116		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Metamora	IL	61548
			City	State	ZIP Code
			Country		
	Amended herein: added				
	Amended nerein. added				
2.17	State what the contract or	- m	Pird In The Hand Stoff	fina IIC	
	lease is for and the nature of the debtor's interest	Staffing Agency Contract	Bird In The Hand Staff Name	illig, LLC	
			Notice Name		
			614 State Route 116		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Metamora	IL	61548
			City	State	ZIP Code
			Country		

Cas	se 24-10443-TMH Doc 1440 F	Filed 04/22/25 Page	: 38 of 75	
Debtor: Petersen Health Business		Case number (if k		
Name State what the contract o lease is for and the nature	r Long Torm English: Agreement	BJC Home Care Serv	ices d/b/a BJC Hospice	
of the debtor's interest	Long Term Facility Agreement	Name	1003 d/b/d B00 i lospico	
		Attn Ruth N. Catelland	o, Vice President	
		Notice Name	·	
		9890 Clayton Rd.		
State the term remaining		Address		
List the contract number	of			
any government contract	:			
		St. Louis	МО	63124
		City	State	ZIP Code
		Country		
2.19 State what the contract o	r		d of Illinois, a Division of	Health Care Service
of the debtor's interest	Medicaid Provider Agreement	Corporation Name		
or the debter o interest				
		Notice Name		
		300 East Randolph St	t	
State the term remaining		Address		
List the contract number	of			
any government contract				
		Chicago	IL	60601
		City	State	ZIP Code
		Country		
Amended herein: added				
2.20 State what the contract o lease is for and the nature of the debtor's interest	r e Skilled Nursing Facility Agreement	Blue Cross Blue Shiel Corporation Name	d of Illinois, a Division of	Health Care Service
		Notice Name		
		300 East Randolph S	•	
State the term remaining		Address	•	
List the contract number	of			
any government contract				
any government contract	•			
		Chicago	IL	60601
		City	State	ZIP Code
		Country		

	Petersen Health Business, LLC				
	Name State what the contract or				
2.21	State what the contract or ease is for and the nature	Renewal Customer Service Agreement	Call One Inc.		
	of the debtor's interest		Name		
			Notice Name		
				Oth Floor	
	01-1-11-1-1		225 West Wacker Drive 8 Address	Stn Floor	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Okina		20000
			Chicago	<u>IL</u>	60606
			City	State	ZIP Code
			Occupation		
			Country		
	Amended herein: added				
	rimenaea nerein. aaaca				
2.22	State what the contract or lease is for and the nature	Enteral Therapy, Urological, Ostomy and	Centrad Healthcare, LLC		
	of the debtor's interest	Tracheotomy Supplies and Wound Care Products Agreement	Name		
			Attn Michelle C. Korslin,	Sr. VP of Sales & Mar	keting
			Notice Name		
			184 Shuman Blvd, Suite	130	
	State the term remaining		Address		
					
	List the contract number of				
	any government contract				
			Naperville	IL	60563
			City	State	ZIP Code
			Country		
	Amended herein: added				
	State what the contract or		Community Hospices of	America. LLC d/b/a Ho	ospice Compassu
2.23	State what the contract or ease is for and the nature	Addendum to Contract	NWIL		· · · · · · · · · · · · · · · · · · ·
	of the debtor's interest		Name		
			Attn Executive Director Notice Name		
	Otata dia tanna		Hospice Compassus Address		
	State the term remaining				
			755 N Henderson		
	List the contract number of				
	List the contract number of any government contract				
			Galesburg	<u>IL</u>	61401
			Galesburg City	IL State	61401 ZIP Code

			_	40 of 75	
Debtor:	Petersen Health Business, LL Name	<u>C</u>	Case number (if kn	own): 24-10492	
	State what the contract or lease is for and the nature	Nursing Facility Hospice, General Inpatient and Respite Care Services Agreement	Community Hospices of NWIL Name	of America, LLC d/b/a Ho	ospice Compassus -
	of the debtor's interest		Attn Executive Director		
			Notice Name		
			Hospice Compassus		
	State the term remaining		Address		
			755 N Henderson		
	List the contract number of				
	any government contract				
			Galesburg	IL	61401
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.25	State what the contract or lease is for and the nature	Nursing Facility Hospice, General Inpatient and Respite Care Services Agreement	Compassus-Chicago		
	of the debtor's interest	respite date dervices Agreement	Name		
			Attn Area Clinical Offic	er	
			Notice Name		
	State the term remaining		4371 Venture Dr, Suite	4373	
	State the term remaining				
	List the contract number of				
	any government contract				
			Peru	IL	61354
			City	State	ZIP Code
			Country		
	Amended herein: added				
2 26	State what the contract or lease is for and the nature		Dans Oaka Mid Wast I	10	
	lease is for and the nature of the debtor's interest	Addendum to Contract	Deer Oaks Mid-West, I	_LC	
				s - Quality Assurance &	Compliance Officer
			Deer Oaks - The Beha	vioral Health Solution	
	State the term remaining		Address		
			7272 Wurzbach Road,	#601	
	List the contract number of				
	any government contract				
			San Antonio	TX	78240
			City	State	ZIP Code
			Country		

btor:	Petersen Health Business, LLC		04/22/25 Page Case number (if kn	41 Of /5 own): 24-10492	
	Name				
2.27 S	State what the contract or ease is for and the nature	Psychological Services Agreement	Deer Oaks Mid-West, I	LC.	
0	of the debtor's interest	1 Sychological Dervices Agreement	Name		
			Notice Name		
			7272 Wurzbach Road,	Suite 601	
8	State the term remaining		Address		
L	ist the contract number of		-		
	any government contract				
			San Antonio	TX	78240
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.28 S	State what the contract or ease is for and the nature	Amendment to Nursing Facility Services Agreement	DeKalb County Hospic	e	
	of the debtor's interest	Amendment to Nursing Facility Services Agreement	Name		
			Notice Name		
			2727 Sycamore Road,	Suite 1B	
5	State the term remaining		Address		
	_				
L	ist the contract number of				
а	any government contract				
			DeKalb	<u>IL</u>	60115
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.29 S	State what the contract or ease is for and the nature	Contract	DeKalb County Hospic	e	
0	of the debtor's interest	Contract	Name	-	
			Notice Name		
			2727 Sycamore Road,	Suite 1B	
5	State the term remaining		Address		
L	ist the contract number of				
а	any government contract				
			DeKalb	IL	60115
			City	State	ZIP Code

Dehtor:			Filed 04/22/25 Page Case number (if kno	42 of 75	
2.30 State of State o	Name			wii)	
2.30	State what the contract or lease is for and the nature	Routine Hospice Services: Skilled Nursing Facili Agreement	Divine Hospice and Pal	liative Care	
	of the debtor's interest		Name		
			Notice Name		
			234 Garden Street		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Yorkville	<u>IL</u>	60560
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.31	State what the contract or lease is for and the nature	Addendum to Contract	Divine Hospice and Pal	liative Care, LLC	
	of the debtor's interest		Name		
			Notice Name		
			234 Garden Street		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Yorkville	IL	60560
			City	State	ZIP Code
			Country		
	Amended herein: added				
	State what the contract or				
2.32	State what the contract or lease is for and the nature	Contract	Dogwood Health Care		
	of the debtor's interest		Name		
			Notice Name		
	State the term remaining		Address		
	List the southern of				
	List the contract number of any government contract				
			City	State	ZIP Code
			Country		

	Case	24-10443-TMH Doc 1440 Filed (04/22/25 Page 4	13 of 75	
Debtor:		С	Case number (if know	vn): 24-10492	
	Name State what the contract or				
2.33	State what the contract or lease is for and the nature	Medical Director Agreement	Dr. Michael Ahearn		
	of the debtor's interest		Name		
			Notice Name		
			519 Elliott Street		
	State the term remaining		Address		
	J		Suite 1		
	List the contract number of				
	any government contract				
			Kewanee	IL	61443
			City	State	ZIP Code
			Country		
	Amended herein: added				
	State what the contract or				
2.34	State what the contract or lease is for and the nature of the debtor's interest	Nursing Home Dialysis Transfer Agreement	DVA Renal Healthcare, Name	Inc.	
	of the debtor's interest		Group General Counsel		
			Notice Name		
			2000 16th Street, 13th F	loor	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Denver	<u>co</u>	80202
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.35	State what the contract or lease is for and the nature	Amendment No. 3 to Pharmacy Products and Services Agreement	Enloe Drugs, LLC		
	of the debtor's interest	rigreement	Name		
			OMNICARE OF DECAT	UR	
			Notice Name		
			796 N. SUNNYSIDE RO	AD	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Danet :::		00500 1155
			Decatur	IL Otata	62522-1156
			City	State	ZIP Code
			Country		

ebtor:	Petersen Health Business, LLC		Case number (if kno	44 Of 75 _{wn):} 24-10492	
	Name				
2.36	State what the contract or ease is for and the nature	Medical Director Agreement	Erik Englehart		
Ċ	of the debtor's interest	a.a. 2a.a. 7.ig. aaa.	Name		
			Notice Name		
			1310 North Main Street		
;	State the term remaining		Address		
			Suite 200		
ı	List the contract number of				
í	any government contract				
			Sandwich	IL	60548
			City	IL State	ZIP Code
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.37	State what the contract or lease is for and the nature		Favorite HealthCare Sta	affina	
	ease is for and the nature of the debtor's interest	Addendum to Contract	Name	annig	
			Miranda Dingman		
			Notice Name		
			PO Box 26225		
;	State the term remaining		Address		
ı	List the contract number of				
	any government contract				
	, 9				
			Overland Park	KS	66212
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.38	State what the contract or lease is for and the nature	Second Addendum to Contract	Favorite HealthCare Sta	affina	
Ċ	of the debtor's interest	Second Addendam to Contract	Name	<u> </u>	
			Miranda Dingman		
			Notice Name		
			PO Box 26225		
•	State the term remaining		Address		
ſ	List the contract number of				
í	any government contract				
			Overland Park	KS	66212
			City	State	ZIP Code

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ebtor:	Petersen Health Business, LLC	3	Case number (if kno		
	Name State what the contract or lease is for and the nature	SNF Outpatient Dialysis Services Agreement	Fresenius Medical Care	Sandwich, LLC d/b/a l	Fresenius Medical
(of the debtor's interest		Name	0	
			Attn Jenny Lowe, Direct	or Operations	
			1310 N Main St., Ste 10	05	
	State the term remaining		Address		
	List the contract number of				
;	any government contract				
			Sandwich	IL	60548
			City	State	ZIP Code
			Country		
	Amended herein: added				
	State what the contract or lease is for and the nature	Laboratory Services Agreement	Gamma Healthcare, Inc	i.	
(of the debtor's interest		Name		
			Notice Name		
			1717 West Maud		
	State the term remaining		Address		
	List the contract number of				
;	any government contract				
			Poplar Bluff	MO	63901
			City	State	ZIP Code
			Country		
	Amended herein: added				
	State what the contract or lease is for and the nature	Radiology Services Agreement	Gamma HealthCare, Inc.	Ç.	
(of the debtor's interest		Name		
			Notice Name		
			1717 West Maud St.		
,	State the term remaining		Address		
	List the contract number of				
;	any government contract				
			Poplar Bluff	MO	63901
			City	State	ZIP Code

btor: Petersen Health Business		Filed 04/22/25 Page Case number (if kg	46 0f /5 nown): 24-10492	
Name State what the contract o lease is for and the nature	r	Gateway Proclean, Inc	•	
of the debtor's interest	Lease and Service Agreement	Name		
		Notice Name		
		2081 Exchange Drive		
State the term remaining		Address		
List the contract number	of			
any government contract				
		St. Charles	MO	63303
		City	State	ZIP Code
		Country		
Amended herein: added	,			
2.43 State what the contract o lease is for and the nature	r e Purchasing Agreement	Gem Medical Supplies	s, LLC	
of the debtor's interest	Turonasing Agreement	Name	·	
		Notice Name		
		730 Anthony Trail		
State the term remaining		Address		
State the term remaining				
List the contract number	of			
any government contract				
		Northbrook	IL	60062
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract o lease is for and the nature	r Participating Provider Agreement	Health Alliance Medica	al Plans, Inc.	
of the debtor's interest	· anto-paning · · · · · · · · · · · · · · · · · · ·	Name		
		Notice Name		
		301 South Vine St		
State the term remaining		Address		
List the contract number	of			
any government contract				
		Urbana	IL	31801
		City	State	ZIP Code
		Country		

Debtor:	Case Petersen Health Business, LL		_	4 / Of /5	
Jeblor: -	Name		Case number (if kno	5Wn): 24-10492	
2.45 le	State what the contract or ease is for and the nature of the debtor's interest	Consulting Services Agreement	Health Technologies, Ir	nc.	
·	ir the debtor's interest		Attn Carol Sapp, Presid	lent	
			Notice Name		
			8446 Page Avenue		
\$	State the term remaining		Address		
L	ist the contract number of				
a	any government contract				
			St. Louis	MO	63130
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.46 S	State what the contract or ease is for and the nature	Participating Provider Agreement	HealthLink, Inc., an Illin	ois Corporation	
o	of the debtor's interest		Name		
			Notice Name		
			1831 Chestnut St		
\$	State the term remaining		Address		
ı	ist the contract number of				
	any government contract				
			St. Louis	MO	63103
			City	State	ZIP Code
			•		
			Country		
	Amended herein: added				
2.47	State what the contract or ease is for and the nature	Residential Hospice Care Agreement for Services to	Hospice of Illinois LLC,	dha Harbor Light Hospi	ice
0	of the debtor's interest	Residents of Nursing Facilities	Name		
			Notice Name		
			1N131 County Farm Ro	oad	
8	State the term remaining		Address		
L	ist the contract number of				
a	any government contract				
			Winfield	IL	60190
			City	State	ZIP Code
			Country		

otor:	Case Petersen Health Business, LLC		Case number (if ki	48 01 /5 nown): 24-10492	
	Name				
2.48 k	State what the contract or ease is for and the nature	Participating Provider Agreement	Humana Inc.		
C	of the debtor's interest	- a.t.o.pating (1011ab) 7 igiocomoni	Name		
					
			Notice Name		
			P.O. Box 1438		
,	State the term remaining		Address		
	latetha a sustana di mumbani af				
	ist the contract number of				
ā	any government contract				
			Louisville	KY	40201
			City	State	ZIP Code
			Country		
			,		
	Amended herein: added				
	State what the contract or				
	State what the contract or ease is for and the nature	Special Program Agreement for Rental and Capital	Joerns LLC		
C	of the debtor's interest		Name		
			Attn Chief Strategy Of Notice Name	ficer	
			2430 Whitehall Park D	Prive, Suite 100	
•	State the term remaining		Address		
	int the contract number of				
	ist the contract number of				
č	any government contract				
			Charlotte	NC	28273
			City	State	ZIP Code
			Country		
	Amended herein: added				
5	State what the contract or				
.50 le	State what the contract or ease is for and the nature	Memorandum of Agreement	KEPRO		
C	of the debtor's interest		Name		
			Notice Name		
			5700 Lombardo Cente	or Drive Suite 100	
	State the term remaining		Address	J. Dilve, Juile 100	
•	state the term remaining				
	_ist the contract number of				
	any government contract				
-	any government contract				
á				011	44131
8			Seven Hills	OH	
á			Seven Hills City	OH State	
á			Seven Hills City	State	ZIP Code

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ebtor:	Petersen Health Business, LL	C	Case number (if known):	24-10492	
	Name				
2.51 ì	State what the contract or ease is for and the nature	Addendum to Contract	Keys Medical Staffing, LLC		
(of the debtor's interest		Name		
			Notice Name		
	0(-1-4)-1		770 N Halsted St #100 Address		
,	State the term remaining		Address		
	list the centrast number of				
	List the contract number of				
,	any government contract				
			Chicago	IL	60642
				State	ZIP Code
			City	State	ZIP Code
			Country		
			,		
	Amended herein: added				
	State what the contract or				
2.52 i	State what the contract or ease is for and the nature	Amendment to Contract	Keys Medical Staffing, LLC		
•	of the debtor's interest		Name		
			Nation Name		
			Notice Name		
			770 N Halsted St #100 Address		
,	State the term remaining		Address		
	List the second second second second				
	List the contract number of				
,	any government contract				
			Chicago		00040
			Chicago	IL	60642
			City	State	ZIP Code
			Country		
			Country		
	Amended herein: added				
2.53	State what the contract or ease is for and the nature	Staffing Services Agreement	Keys Medical Staffing, LLC.		
	of the debtor's interest		Name		
			Notice Name		
			PO Box 10612		
,	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Chicago	IL	60610
			City	State	ZIP Code
			Country		

Official Form 206G

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btor:	Petersen Health Business, LLC	C	Case number (if kn		
	Name				
2.54 le	State what the contract or ease is for and the nature of the debtor's interest	Amended and Restated Therapy Services Agreement	Kindred Rehab Service Name	es, LLC	
			Attn VP, Finance		
			Notice Name		
			Rehab Care		
;	State the term remaining		Address		
			680 South Fourth Stree	et	
ı	List the contract number of				
á	any government contract				
			Louisville	KY	40202
			City	State	ZIP Code
			Country		
	Amended herein: added				
.55 I	State what the contract or ease is for and the nature	Addendum to Contract	Lawrence Recruiting S	pecialists, Inc. d/b/a LR	S Healthcare
c	of the debtor's interest		Name		
			Attn Contracts		
			Notice Name		
			1120 N 103 Plaza, Sui	te 300	
	State the term remaining		Address		
I	List the contract number of				
á	any government contract				
			Omaha	NE	68114
			City	State	ZIP Code
			Country		
	Amended herein: added				
56 5	State what the contract or ease is for and the nature		Laurana Barra Wan O	and Pater Inc. 1/6/a LD	0.1110
_	. (. (() (Staffing Services Agreement	Name Recruiting S	pecialists, Inc. d/b/a LR	S Healthcare
٠	of the deptor's interest		Attn Contracts		
			Notice Name		
			1120 North 103rd Plaz	a Suite 300	
:	State the term remaining		Address		
ı	List the contract number of				
á	any government contract				
			Omaha	NE	68114
			City	State	ZIP Code
			Country		

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btor:	Petersen Health Business, LL	C	Case number (if known	24-10492	
,	Name				
^{2.57} i	State what the contract or ease is for and the nature	Laboratory Services Agreement	LifeScan Laboratory, Inc.		
(of the debtor's interest		Name		
			Attn Sam Lipshitz, MD-Me Notice Name	edical Director	
			5255 Golf Road		
	State the term remaining		Address		
	otato tilo toriii romaning				
	List the contract number of				
	any government contract				
			Skokie	IL	60077
			City	State	ZIP Code
			Country		
	Amondod horsin, adda d				
	Amended herein: added				
2.58	State what the contract or ease is for and the nature	Manager of Assessment	Livanta, LLC		
	of the debtor's interest	Memorandum of Agreement	Name		
			Notice Name		
•			10830 Guilford Rd, Suite	312	
	State the term remaining		Address		
	List the contract number of				
•	any government contract				
			Appopolic Junction	MD	20701
			Annapolis Junction		
			City	State	ZIP Code
			Country		
			•		
	Amended herein: added				
9	State what the contract or				
	State what the contract or ease is for and the nature	Master Contract for Biohazard Waste	MCKay's Haz-Mat Truck S	Service, Inc.	
•	of the deptor's interest		Name		
			Notice Name		
			PO Box 1444		
	State the term remaining		Address		
	• • • • • • • • • • • • • • • • • • •				
	List the contract number of				
	any government contract				
			Centralia	IL	62801
			City	State	ZIP Code
			Country		

	Case	24-10443-TMH Doc 1440 File	ed 04/22/25 Page 5	2 of 75	
btor:	Petersen Health Business, LL	С	Case number (if known		
	Name				
^{2.60} ì	State what the contract or ease is for and the nature	Prime Vendor Product Supply Agreement	McKesson Medical-Surgi	cal Minnesota Supply	Inc.
•	of the debtor's interest		Name		
			Notice Name		
			8121 Tenth Avenue North	h	
:	State the term remaining		Address	··	
	g				
	List the contract number of				
	any government contract				
			Golden Valley	MN	55427
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.61 ì	State what the contract or ease is for and the nature	Amendment to Contract	Medical Staffing Solution	s, LLC	
•	of the debtor's interest		Name		
			Notice Name		
				tuito A	
St	Ctata tha tarm ramaining		8601 N. Kentucky Ave, S	buite A	
,	State the term remaining				
	List the contract number of				
	any government contract				
	, g				
			Evansville	IN	47725
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.62	State what the contract or ease is for and the nature	Amandment to Drafaggianal Carriage Agreement	Medical Staffing Solution	s II C	
	of the debtor's interest	Amendment to Professional Services Agreement	Name	0, 110	
			Notice Name		
			8601 N. Kentucky Ave, S	Suite A	
;	State the term remaining		Address		
	Liet the contract would be				
	List the contract number of				
•	any government contract				
			Evansville	IN	47725
			City	State	ZIP Code
			Country		

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btor:	Petersen Health Business, LL	C	Case number (if kno		
	Name				
2.63	State what the contract or ease is for and the nature	Attachment 1 to Professional Services Agreement	Medical Staffing Solutio	ns IIC	
,	of the debtor's interest	Attacriment 1 to Professional Services Agreement	Name	,	
			Notice Name		
			8601 N. Kentucky Ave,	Suite A	
:	State the term remaining		Address		
	· · · · · · · · · · · · · · · · · · ·				
	List the contract number of				
	any government contract				
•	any government contract				
			Evansville	IN	47725
			City	State	ZIP Code
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			Country		
	Amended herein: added				
	Amenaea nerein. addea				
2.64	State what the contract or		Medical Staffing Solutio	ne IIC	
	ease is for and the nature of the debtor's interest	Professional Services Agreement	Name	iis, LLO	
			Attn Chief Executive Of	ficer	
			Notice Name	11001	
			9700 HWY 57N, Suite A	1	
,	State the term remaining		Address		
	otate the term remaining				
	List the contract number of				
,	any government contract				
			Evansville	<u>IN</u>	47725
			City	State	ZIP Code
			Country		
	Amount of homelon and dead				
	Amended herein: added				
2 65	State what the contract or ease is for and the nature			me e i	
	. (. () - (Illinois Ancillary Provider/HCBS Agreement	Meridian Health Plan of Name	Illinois, Inc.	
•	of the deptor's interest		Name		
			Notice Name		
			333 South Wabash Ave	Cuitto 2000	
	Otata tha tanna namainin n		Address	, Suitte 2900	
•	State the term remaining				
	List the contract number of				
;	any government contract				
			Chicago	IL	60604
			City	State	ZIP Code

ebtor:	Petersen Health Business, LL		0 04/22/25 Page 5 Case number (if know	04 01 /5 m): 24-10492	
2.66	Name State what the contract or lease is for and the nature	Provider Services Agreement	Molina Healthcare of Illin	nois, Inc, an Illinois Co	rporation
•	of the debtor's interest		Name		
			Notice Name		
			2001 Butterfield Road, S	suite 750	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Downers Grove	IL	60515
			City	State	ZIP Code
			Country		
	Amended herein: added				
.67	State what the contract or lease is for and the nature	Addendum to Contract	Northern Illinois Hospice	Association	
•	of the debtor's interest		Name		
			Attn Lisa Novak, CEO Notice Name		
			4751 Harrison Avenue		
	State the term remaining		Address		
	otate the term remaining				
	List the contract number of				
	any government contract				
			Rockford	IL	61108
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.68	State what the contract or lease is for and the nature	One-Time Nursing Facility Service Agreement for Provision of Hospice Services	Northern Illinois Hospice	Association	
•	of the debtor's interest	•	Name		
			Attn Lisa Novak, CEO		
			Notice Name		
	State the term remaining		4751 Harrison Avenue Address		
	List the contract number of				
	any government contract				
			Rockford	IL	61108
			City	State	ZIP Code
			Country		

Debtor:	Case Petersen Health Business, LL	24-10443-TMH Doc 1440	Filed 04/22/25 Page	55 01 /5	
	Name				
2 69	State what the contract or lease is for and the nature		Novastaff Healthcare	Santicas Inc	
2.00	lease is for and the nature of the debtor's interest	Addendum to Contract	Name	Services, inc.	
			Notice Name		
			PO Box 249		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
	any government contract		-		
			Coal City	IL	60416-0249
			City	State	ZIP Code
			- Country		
			Country		
	Amended herein: added				
2 70	State what the contract or lease is for and the nature		Novastaff Healthcare	Consissa Inc	
2.70	lease is for and the nature of the debtor's interest	Amendment to Contract	Name Novastail Healthcare	Services, inc.	
			Notice Name		
	State the term remaining		PO Box 249 Address		
	State the term remaining				
	List the contract number of				
	any government contract				
			-		
			Coal City	IL	60416-0249
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.71	State what the contract or lease is for and the nature	0. 17	Novastaff Healthcare	Sonicos Inc	
	lease is for and the nature of the debtor's interest	Staffing Agreement	Name	Services, Inc.	
			Notice Name		
			PO Box 249		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Coal City	IL	60416-2049
			City	State	ZIP Code
			Country		
			Country		

te what the contract or se is for and the nature he debtor's interest ate the term remaining the contract number of government contract	Amendment No. 2 to Pharmacy Consultant Agreement	Omnicare Name Attn Legal Notice Name One CVS Drive Mail Co Address Woonsocket	ode 1160	
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		Woonsocket		
			RI	02895
		City	State	ZIP Code
		Country		
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se is for and the nature he debtor's interest	Amendment No. 5 to Pharmacy Consultant Agreement	Name		
		Attn Legal		
		Notice Name		
		One CVS Drive Mail Co	odo 1160	
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		_		
government contract				
		Woonsocket	RI	02895
		City	State	ZIP Code
		Country		
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te what the contract or	Amendment No. 6 to Pharmacy Products and Services	Omnicoro		
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		Notice Name		
		One CVS Drive Mail Co	nde 1160	
te the term remaining		Address	100	
t the contract number of				
y government contract				
		Woonsocket	RI	02895
		City		
/ tesse h	e what the contract or e is for and the nature e debtor's interest e the term remaining the contract number of	government contract mended herein: added e what the contract or e is for and the nature le debtor's interest Amendment No. 6 to Pharmacy Products and Services Agreement Agreement e the term remaining the contract number of	government contract Woonsocket	woonsocket RI City State The contract or se is for and the nature se debtor's interest edbtor's interest Amendment No. 6 to Pharmacy Products and Services of the term remaining the contract number of government contract The contract of the contract or se is for and the nature se debtor's interest on the contract or the contract number of government contract The contract number of government contract The contract number of government contract on the contract of the cont

			04/22/25 Page	57 of 75	
	Petersen Health Business, LLC		Case number (if kno	ewn): 24-10492	
	Name ate what the contract or				
2.75 lea	ate what the contract or ase is for and the nature the debtor's interest	Amendment to Pharmacy Consultant Agreement	Omnicare Name		
OI	the deptor's interest		Attn Legal		
			Notice Name		
			One CVS Drive Mail Co	ode 1160	
St	ate the term remaining		Address		
Li	st the contract number of				
an	ny government contract				
			Woonsocket	RI	02895
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.76 St	ate what the contract or	Letter Amendment re: COVID-19 Vaccination	0		
iea	ase is for and the nature the debtor's interest	Distribution Services	Omnicare Name		
•			Attn Legal		
			Notice Name		
			One CVS Drive Mail Co	ode 1160	
St	ate the term remaining		Address		
Li	st the contract number of				
an	ny government contract				
			Woonsocket	RI	02895
					ZIP Code
			City	State	ZIP Code
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	Amended herein: added				
St	ate what the contract or				
2.// lea	ase is for and the nature	Pharmacy Consultant Agreement	Omnicare Name		
Oī	the deptor's interest				
			Attn Legal Notice Name		
			One CVS Drive Mail Co	ode 1160	
St	ate the term remaining		Address		
Li	st the contract number of				
ar	ny government contract				
			Woonsocket	RI	02895
			City	State	ZIP Code
			Country		

Amended herein: added 2.80 State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract Kansas City City Mo Address Country Country Country Country Country Country Country Country Country Country Country Country		Case	24-10443-TMH Doc 1440 Filed	d 04/22/25 Page	58 of 75	
2.76 State what the contract number of any government contract Amendment to Pharmacy Products and Services Agreement Amendment to Pharmacy Consultant Agreement Amendment to Pharmacy Consultant Agreement Amendment to Pharmacy Consultant Agreement Amended herein: added 2.76 State what the contract number of any government contract Amendment to Pharmacy Consultant Agreement Amendment to Pharmacy Consultant Agr	Debtor:	Petersen Health Business, LL	C	Case number (if kn	own): 24-10492	
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Country				Kansas City	MO	64137
				City	State	ZIP Code
				Country		
Amandad harain; addad		Amended herein: added				

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Name			<i></i>	
2.81 State what the contract or lease is for and the nature of the debtor's interest	Amendment to Pharmacy Consultant Agreement	Omnicare, Inc.		
of the deptor's interest		Attn General Counsel		
		Notice Name		
		900 Omnicare Center		
State the term remaining		Address		
		201 East Fourth Street		
List the contract number of	uf			
any government contract				
		Cincinnati	ОН	45202
		City	State	ZIP Code
		Country		
Amended herein: added				
2.82 State what the contract or lease is for and the nature	Amendment to Pharmacy Products and Services Agreement	Omnicare, Inc.		
of the debtor's interest		Name		
		Attn General Counsel		
		Notice Name		
State the term remaining		900 Omnicare Center Address		
State the term remaining		201 East Fourth Street		
List the contract number of	ıf			
any government contract				
		Cincinnati	ОН	45202
		City	State	ZIP Code
		Country		
Amended herein: added				
2.83 State what the contract or lease is for and the nature	Phonon Occasion Assessed	Omnicare, Inc.		
of the debtor's interest	Pharmacy Consultant Agreement	Name		
		Attn General Counsel		
		Notice Name		
		900 Omnicare Center		
State the term remaining		Address		
List the contract number of		201 East Fourth Street		
any government contract				
any government contract				
		Cincinnati	ОН	45202
		City	State	ZIP Code
		Country		

ebtor:	Petersen Health Business, LL		Case number (if kn	nown): 24-10492	
	Name Ctata what the accutance or				
2.84	State what the contract or lease is for and the nature	Pharmacy Products and Services Agreement	Omnicare, Inc.		
	of the debtor's interest		Name		
			Attn General Counsel Notice Name		
			900 Omnicare Center		
	State the term remaining		Address		
	List the contract number of		201 East Fourth Street		
	List the contract number of				
	any government contract				
			Cincinnati	ОН	45202
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.85	State what the contract or lease is for and the nature	Agreement for the Provision of Hospice Services	OSF HealthCare Syste Home Care	em d/b/a OSF Hospice, a	a Division of OSF
	of the debtor's interest		Name		
			James M. Moore, CEC)	
			Notice Name		
			2265 W. Altorfer Dr.		
	State the term remaining	-	Address		
	List the contract number of				
	any government contract				
			Peoria	IL	61615
			City	State	ZIP Code
			Only	State	211 0000
			Country		
	Amended herein: added				
2.86	State what the contract or lease is for and the nature	Addendum to Contract	Chicago	alliative Care, Inc. d/b/a	Three Oaks Hospi
	of the debtor's interest		Name		
			Attn Executive Director	r	
	Otata tha tama manababan		1717 N Naper Bouleva	ard, Suite 301	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			N	IL	60563
			Napperville		
			City	State	ZIP Code

	Case	24-10443-TMH Doc 1440 F	iled 04/22/25 Page (61 of 75	
Debtor:	Petersen Health Business, LL	С	Case number (if kno	wn): 24-10492	
	Name		Peace Hospice and Pal	liativo Caro, Inc. d/h/a	Thron Oako Hooniga
2.87	State what the contract or lease is for and the nature of the debtor's interest	Hospice Care Services Agreement	Chicago Name	native Care, Inc. d/b/a	Three Oaks Hospice
			Attn Executive Director		
			Notice Name		
			1717 N Naper Boulevar	d, Suite 301	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Napperville	IL	60563
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.88	State what the contract or lease is for and the nature	Addendum to Contract	Phoenix Home Care & I	Hospice	
	of the debtor's interest		Name		
			Notice Name		
9			14220 E 42nd St South		
	State the term remaining		Address		
	otato tilo toriii romailing				
	List the contract number of				
	any government contract				
			la den en de nee	MO	04055
			Independence	MO	64055
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.89	State what the contract or lease is for and the nature	Independent Contractor Agreement	Podiatry Plus, P.C.		
	of the debtor's interest	<u>, , , , , , , , , , , , , , , , , , , </u>	Name		
			Notice Name		
			6560 West Higgins		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Chicago	IL	60656
			City	State	ZIP Code
			Country		
			,		

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Debtor:	Petersen Health Business, LL	С	Case number (if kn		
	Name				
2.90	State what the contract or lease is for and the nature	Billing	Presto-X		
	of the debtor's interest	<u></u>	Name		
			Notice Name		
			4521 Leavenworth Stre	eet	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Omaha	NE	68106-1437
			City	State	ZIP Code
			Country		
	Amended herein: added				
	Amended nerein. added				
2.91	State what the contract or	Addendum to Contract Between Staffing Agency and	PRN Health Services of	d/h/a PRN Haalthcara	
	lease is for and the nature of the debtor's interest	Nursing Facility	Name	a/b/a i itivi i eaitii care	
			Attn Scott Barribeau		
			Notice Name		
			1101 E. South River St	treet	
	State the term remaining		Address		
			1101 E. South River St	treet	
	List the contract number of				
	any government contract				
			-		
			Appleton	WI	54915
			City	State	ZIP Code
			Country		
	Amended herein: added				
0.00	State what the contract or				
2.92	lease is for and the nature	Master Staffing Agreement	PRN Health Services, Name	LLC (d/b/a PRN Healtho	care)
,	of the debtor's interest		Attn Scott Barribeau, S	Sales Manager	
			Notice Name	Dales Mariager	
			1101 E. South River St	treet	
	State the term remaining		Address		
			 1101 E. South River St	treet	
	List the contract number of				
	any government contract				
	, , , , , , , , , , , , , , , , , , , ,				
			Appleton	WI	54915
			City	State	ZIP Code
			Oity	State	ZIF COUC
			Country		
			,		

Debtor:	Petersen Health Business, LL		d 04/22/25 Page Case number (if kr	63 Of 75 nown): 24-10492	
2.93	Name State what the contract or lease is for and the nature	Contract Confirmation Sheet re: Britney Diane Young LPN	PRN Healthcare		
	of the debtor's interest		Name		
			Notice Name		
			1101 E. South River S	treet	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Appleton	WI	54915
			City	State	ZIP Code
			Country		
	Amended herein: added				
	State what the contract or lease is for and the nature	Contract Confirmation Sheet re: Schamlain Gathright LPN	PRN Healthcare		
	of the debtor's interest		Name		
			Notice Name		
			1101 E. South River S	treet	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Appleton	WI	54915
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.95	lease is for and the nature	Multi-Facility Supply and Services Agreement	Pulmonary Exchange,	Ltd. aka PEL/VIP	
	of the debtor's interest		Name		
			Attn Raymond Kalinsk Notice Name	У	
			9840 SW Hwy.		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Oak Lawn	IL	60453
			City	State	ZIP Code
			Country		

Debtor: Pete	araan Haalib Dusinaaa III		04/22/25 Page	64 of 75	
	ersen Health Business, LLC		Case number (if kno	own): 24-10492	
2.96 State	what the contract or is for and the nature debtor's interest	Rental Agreement	RecoverCare, LLC		
or the	debtor 3 interest		Attn General Counsel		
			Notice Name		
			1920 Stanley Gault Pk	vy, Suite 100	
State	the term remaining		Address		
List t	he contract number of				
any g	jovernment contract				
			Louisville	KY	40223
			City	State	ZIP Code
			Country		
Am	ended herein: added				
2.97 State	what the contract or is for and the nature	Therapy Services Agreement	RehabCare Group Eas	t, Inc. d/b/a RehabCare	
	debtor's interest	merapy dervices Agreement	Name	,	
			President, RehabCare Notice Name		
			680 South Fourth Stree	ıt.	
State	the term remaining		Address		
	•				
List t	he contract number of				
any g	jovernment contract				
			Louisville	KY	40202
			City	State	ZIP Code
			,		
			Country		
Am	ended herein: added				
State	what the contract or				
- 6 (1) -	what the contract or is for and the nature	Amended and Restated Therapy Services Agreement	RehabCare Group Eas Name	t, LLC	
or the	e debtor's interest		Attn VP, Finance		
			Notice Name		
.			680 South Fourth Stree	t	
State	the term remaining		Address		
	he contract number of				
List th					
	jovernment contract				
	government contract		Louisville	KY	40202
	government contract		Louisville City	KY State	40202 ZIP Code

ebtor: Petersen Health Business,		d 04/22/25 Page Case number (if kn	65 0f 75 _{own):} 24-10492	
Name State what the contract or lease is for and the nature	Second Amended and Restated and Reaffirmed	RehabCare Group Eas	+ II C	
of the debtor's interest	Guaranty Agreement	Name	τ, ΕΕΟ	
		Attn Chief Financial Of	ficer	
		Notice Name		
		680 South Fourth Stree	et	
State the term remaining		Address		
List the contract number of	f			
any government contract				
		Louisville	KY	40202
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract or lease is for and the nature	Nursing Come Dialysis Transfer Agreement	Renal Life Link, Inc		
of the debtor's interest		Name		
		Attn Group General Co	unsel	
		Notice Name		
		c/o DaVita, Inc.		
State the term remaining		Address		
		2000 16th Street		
List the contract number of	f			
any government contract				
		Denver	CO	80202
		City	State	ZIP Code
		Country		
Amended herein: added				
.101 State what the contract or lease is for and the nature	Destace and Assessment of Harrise Comitee	Sarah Rush Lincoln He	alth Center d/b/a Sarah	Rush Lincoln Hosp
of the debtor's interest	Protocol and Agreement of Hospice Services	Name	diti Contor a/b/a Caran	Buon Emocini moop
		Attn Post Acute Care D	Director	
		Notice Name		
		Sarah Bush Lincoln Ho	spice	
State the term remaining		Address		
List the second second second second		1004 Health Center Dr	ve, Suite 202	
List the contract number of				
any government contract				
		Mattoon	IL	61938
		City	State	ZIP Code
		Country		

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Debtor: Petersen Health Business,	LLC	Case number (if kr	nown): 24-10492	
Name				
2.102 State what the contract or lease is for and the nature	Client Service Agreement	ShiftKey, LLC		
of the debtor's interest	onone con noo regioonione	Name		
		Attn Keith Wicker		
		Notice Name		
		2816 Thomas Ave #5		
State the term remaining		Address		
List the contract number of	of			
any government contract				
		Dallas	TX	75204
		City	State	ZIP Code
		Country		
State what the contract or				
2.103 State what the contract or lease is for and the nature of the debtor's interest	Addendum to Contract	ShiftMed, LLC Name		
of the debtor's interest				
		Attn Legal Department Notice Name	<u> </u>	
		7925 Jones Branch Dr	rivo Cuito 1100	
Otata di a tama mana inina		Address	ive, Suite 1100	
State the term remaining		Addless		
List the contract number of	of			
any government contract	-			
. , .				
		McLean	VA	22102
		City	State	ZIP Code
		O		
		Country		
Amended herein: added				
State what the contract or				
2.104 State what the contract or lease is for and the nature	Staffing Agreement	ShiftMed, LLC		
of the debtor's interest		Name		
		Attn Legal Department	t	
		Notice Name		
		7925 Jones Branch Dr	rive, Suite 1100	
State the term remaining		Address		
List the contract number of	of			
any government contract				
		Moleca	1/4	20400
		McLean	VA Otata	22102
		City	State	ZIP Code
		Country		

tor: Petersen Health Business, Ll		d 04/22/25 Page Case number (if kind	6 / 0f /5 _{own): 24-10492}	
Name State what the contract or lease is for and the nature	Amendment to Pharmaceutical Product Rebate Agreement	Smith & Nephew, Inc.		
of the debtor's interest	rgrooment	Name		
		Attn Company Secreta	ry	
		Notice Name		
		1450 E. Brooks Road		
State the term remaining		Address		
List the contract number of				
any government contract				
		Memphis	TN	38116
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract or lease is for and the nature	Rebate Agreement	Smith & Nephew, Inc.		
of the debtor's interest		Name		
		Attn Company Secreta	ry	
		Notice Name		
		1450 E. Brooks Road		
State the term remaining		Address		
List the contract number of				
any government contract				
		Memphis	TN	38116
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract or		Couthorn Illinoin Linna	al Carriago	
lease is for and the nature of the debtor's interest	EpicCare Link Site Level Agreement	Southern Illinois Hospit	ai Services	
or the debtor 3 interest		Attention Rex P. Budde	.	
		Notice Name	•	
		1239 E. Main St.		
State the term remaining		Address		
otate the term remaining				
List the contract number of				
any government contract				
		Carbondale	IL	62902
		City	State	ZIP Code

	Case	24-10443-TMH Doc 1440 File	d 04/22/25 Page(68 of 75	
Debtor	Petersen Health Business, LL	C	Case number (if kno		
2.108	Name State what the contract or lease is for and the nature	Amended and Restated Agreement for the Provision of Hospice Services to Nursing Facility Residents	SSM Health Business dba SSM Health at Home Hospice - Illinois		
	of the debtor's interest	or hospice services to Nursing Facility Residents	Name		
			Attn Contracts		
			Notice Name		
			SSM Health		
	State the term remaining		Address		
	J		10101 Woodfield Lane		
	List the contract number of				
	any government contract				
	any government contract				
			Ot Lauria	МО	62420
			St. Louis	MO	63132
			City	State	ZIP Code
			Country		
0.400	State what the contract or				
2.109	lease is for and the nature	Equipment Rental Agreement	Swisher International, Ir	1C.	
	of the debtor's interest		Name		
			Notice Name		
			1602 Corporate Drive		
	01-1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		Address		
	State the term remaining				
	List the contract number of				
	any government contract				
	, gere				
			Warrensburg	МО	64093
			City	State	ZIP Code
			Country		
	Amended herein: added				
	State what the contract or				
2.110	lease is for and the nature	Nursing Home Dialysis Transfer Agreement	Total Renal Care, Inc. o	:/o DaVita HealthCare F	Partners Inc.
	of the debtor's interest		Name		
			Group General Counse	<u> </u>	
			Notice Name		
			2000 16th Street, 13th I	Floor	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
	, 30.0				
			Denver	СО	80202
			City	State	ZIP Code
			Country		

	Case	24-10443-TMH Doc 1440	Filed 04/22/25 Page	69 of 75	
Debtor:	Petersen Health Business, LL	C	Case number (if kr	nown): 24-10492	
	Name				
2.111	State what the contract or lease is for and the nature of the debtor's interest	Addendum to Contract	Unity Hospice of West	ern Illinois, LLC	
	of the deptor's interest				
			Attn Administrator Notice Name		
			915 N. Caron Road		
	State the term remaining		Address		
	List the contract number of				
	List the contract number of				
	any government contract				
			Rochelle	IL	61068
			City	State	ZIP Code
			Country		
	Amended herein: added				
		Addendum to Hospice Services Agreement to Pr	rovide		
2.112	State what the contract or lease is for and the nature of the debtor's interest	Respite Care	Unity Hospice of West	ern Illinois, LLC	
•	of the deptor's interest		Hamo		
			Notice Name		
			1201 South Seventh S	street	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Rochelle	IL	61068
			City	State	ZIP Code
			Country		
	Amended herein: added				
2 113	State what the contract or lease is for and the nature		Unity Hospice of West	orn Illinois III C	
	of the debtor's interest	Hospice Services Agreement	Name	em illinois, LLC	
			Attn Administrator		
			Notice Name		
			1201 South Seventh S	Street Suite 101	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Pooballa	11	61068
			Rochelle City	<u>IL</u> State	ZIP Code
			J.,,	Sidio	2.1 0000
			Country		

Patent P		Case	24-10443-TMH Doc 1440 Fi	iled 04/22/25 Page ⁻	70 of 75	
2.114 2.116 2.11	Debtor:		3	Case number (if kno	wn): 24-10492	
State the term remaining List the contract number of any government contract Amended herein: added 2.115 lease is for and the nature of the debtor's interest List the contract number of any government contract Amended herein: added 2.115 lease is for and the nature of the debtor's interest Amended herein: added List the contract number of any government contract Amended herein: added 2.115 lease is for and the nature of the debtor's interest Amended herein: added List the contract number of any government contract Amended herein: added 2.116 lease is for and the nature of the debtor's interest Amended herein: added 2.116 lease is for and the nature of the debtor's interest Amended herein: added 2.116 lease is for and the nature of the debtor's interest Amended herein: added 2.116 lease is for and the nature of the debtor's interest Amended herein: added 2.116 lease is for and the nature of the debtor's interest or lease is for and the nature of the debtor's interest Amended herein: added 2.116 lease is for and the nature of the debtor's interest or lease is for and the nature of the debtor's interest Amended herein: added 2.116 lease is for and the nature of the debtor's interest or lease is for and the nature of the debtor's interest Amended herein: added 2.116 lease is for and the nature of the debtor's interest or lease is for and the nature of the debtor's interest or lease is for and the nature of the debtor's interest or lease is for and the nature of the debtor's interest or lease is for any government contract Amended herein: added 2.116 lease is for and the nature of the debtor's interest or lease is for any government contract Amended herein: added 3.116 lease is for any debtor interest or lease is for any government of the debtor's interest or lease is for any government of the debtor's interest or lease is for any government of the debtor's interest or lease is for any government of the debtor's interest or lease is for any government or lease is for any government or	9					
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State the term remaining	(of the debtor's interest		Name		
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Sandwich IL 60548 City State St		List the contract number of				
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City State 2P Code Country Country				Sandwich	п	60549
Amended herein: added 2.116 State what the contract or lease is for and the nature of the debtor's interest State the term remaining List the contract number of any government contract Sandwich IL 60548 City State in Country Country Valley West Hospital Name Valley West Hospital Name 11 East Pleasant Avenue Address Sandwich IL 60548 ZIP Code						
Amended herein: added 2.116 State what the contract or lease is for and the nature of the debtor's interest Mospital Transfer Agreement Valley West Hospital				City	State	ZIP Code
Amended herein: added 2.116 State what the contract or lease is for and the nature of the debtor's interest Mospital Transfer Agreement Valley West Hospital				Country		
2.116 State what the contract or lease is for and the nature of the debtor's interest Hospital Transfer Agreement Hospital Transfer Agreement Name Name				·		
of the debtor's interest Notice Name Notice Name 11 East Pleasant Avenue Address List the contract number of any government contract Sandwich List March State IL 60548 City State ZIP Code		Amended herein: added				
of the debtor's interest Notice Name Notice Name 11 East Pleasant Avenue Address List the contract number of any government contract Sandwich List March State IL 60548 City State ZIP Code		State what the contract or				
State the term remaining List the contract number of any government contract Sandwich IL 60548 City State ZIP Code		- () - - - - - - - - -	Hospital Transfer Agreement			
State the term remaining List the contract number of any government contract Sandwich List the Contract number of any government contract Sandwich List the Contract number of any government contract Sandwich List the Contract number of any government contract Sandwich List the Contract number of any government contract	(or the deptor's interest		Name		
State the term remaining List the contract number of any government contract Sandwich Lity State State				Notice Name		
List the contract number of any government contract Sandwich IL 60548 City State ZIP Code				11 East Pleasant Avenu	ie	
Sandwich IL 60548 City State ZIP Code		State the term remaining		Address		
Sandwich IL 60548 City State ZIP Code						
Sandwich IL 60548 City State ZIP Code		List the contract number of				
City State ZIP Code		any government contract				
City State ZIP Code						
				Sandwich	IL	60548
Country				City	State	ZIP Code
Country						
				Country		

tor: Petersen Health Business,		1 04/22/25 Page Case number (if le	/1 0f /5 nown): 24-10492	
Name State what the contract or				
117 State what the contract or lease is for and the nature	Education Affiliation Agreement	Verve College		
of the debtor's interest		Name		
		Notice Name		
		Oak Brook Main Camp	ous	
State the term remaining		Address		
		2625 Butterfield Road	Suite 102E	
List the contract number of	of			
any government contract				
		Oak Break		00500
		Oak Brook	<u>IL</u>	60523
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract or lease is for and the nature	Agreement for Nursing Facility, Inpatient and	Vice Health and Oam		
of the debtor's interest	Inpatient Respite Services	Vitas Healthcare Corp Name	oration of Illinois	
		Attn General Manager		
		Notice Name		
		105 Marquette Street	Suite A	
State the term remaining		Address		
List the contract number of	of			
any government contract				
		LaSalle	IL	61301
		City	State	ZIP Code
		,		
		Country		
Amended herein: added				
State what the contract or	Letter Agreement re: Nursing Facility Agreement	Vitas Healthcare Corp	oration of Illinois	
lease is for and the nature of the debtor's interest	and Medicare or Medicaid Program Participation	Name	Oration or minors	
		Notice Name		
		105 Marquette Street	Suite A	
State the term remaining		Address		
List the contract number	of.			
List the contract number of any government contract	····			
any government contract				
		LaSalle	IL	61301
		City	State	ZIP Code
		Country		

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Debtor:	Petersen Health Business, LL	0	Case number (if kn	own): 24-10492	
2.120	Name State what the contract or lease is for and the nature of the debtor's interest	Addendum to Contract	Westways Staffing Ser	vices, Inc.	
	or the debtor 3 interest		Thomas L Schulman E	sq	
			600 W Santa Ana Blvd	Suite 955	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Santa Ana	CA	92701
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.121	State what the contract or lease is for and the nature of the debtor's interest	Agreement for Supplemental Staffing Agencies	Westways Staffing Ser	vices, Inc.	
,	or the deptor's interest		Attn President/CEO		
			Notice Name		
:			500 City Parkway Wes	t, Suite 130	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			•	0.4	
			Orange		92868 ZIP Code
			City	State	ZIF Code
			Country		
	Amended herein: added				
2.122	State what the contract or lease is for and the nature	Assignment Confirmation	Westways Staffing Ser	vices, Inc.	
	of the debtor's interest		Name Thomas L Schulman E	isq	
			Notice Name		
	State the term remaining		600 W Santa Ana Blvd Address	Suite 955	
	State the term remaining		Addless		
	List the contract number of				
	any government contract				
			Santa Ana	CA	92701
			City	State	ZIP Code
			Country		

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Fill in this information to identify the case:
Debtor Name: In re : Petersen Health Business, LLC
United States Bankruptcy Court for the: District of Delaware
Case number (if known): 24-10492 (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.

Declarati	Declaration and signature				
individuaİ ser	I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case. I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:				
☐ Schedul	le A/B: Assets	⊢Real and Personal Property (Official Form 20	6A/B)		
Schedul	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)				
☐ Schedul	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)				
☐ Schedul	Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)				
☐ Schedul	Schedule H: Codebtors (Official Form 206H)				
☐ Summa	Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)				
✓ Amende	Amended Schedule Schedule A/B: Assets-Real and Personal Property, Schedule E/F: Creditors Who Have Unsecured Claims, Schedule G: Executory Contracts and Unexpired Leases, Summary of Assets and Liabilities for Non-Individuals				
☐ Chapter	Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)				
☐ Other do	Other document that requires a declaration				
I declare under penalty of perjury that the foregoing is true and correct.					
Executed on	04/22/2025	*	/ s / David R. Campbell		
	MM / DD / Y	YYY	Signature of individual signing on behalf of debtor		
			David R. Campbell		
			Printed name		
			Authorized Signatory		
			Position or relationship to debtor		

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In re: Petersen Health Business, LLC Case No. 24-10492

AMENDED Schedule A/B 77
Other property of any kind not already listed

Other property of any kind not already listed	Current value of debtor's interest	Amendment
Inter Company Loan - Mark Petersen	\$3,143,224.92	Amended herein - added
Inter Company Loan - Mark Petersen	\$500,000.00	Amended herein - added
Inter Company Loan - Petersen Healthcare VII, LLC	\$3,189,444.24	Amended herein - added
TOTAL	: \$6,832,669.16	

EXHIBIT B

Amended Statements

N/A