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 "<u>Debtors</u>") hereby provide notice (this "<u>Notice</u>") 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 "<u>Schedules</u>") and Statements of Financial Affairs (the "<u>Statements</u>") [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

² Attached hereto as <u>Schedule 1</u> 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)

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and

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Chicago, IL 60601

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

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 "Petition Date"), the Debtors commenced these Chapter 11 Cases by filing voluntary petitions for relief under chapter 11 of title 11 of the United States Code, 11 U.S.C. §§ 101–1532 (the "Bankruptcy Code") with the United States Bankruptcy Court for the District of Delaware (the "Court"). These Chapter 11 Cases have been consolidated for procedural purposes only and are being administered jointly under case number 24-10443 (TMH). The Debtors, with the exception of certain inactive entities, are authorized to operate their business as debtors-in-possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code.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"), 3 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.

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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 PROPERTIES, LLC (CASE NO. 24-10541)

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 Properties, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 24-10541 (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		
Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)		
1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$	0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$	16,865,950.92
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$	16,865,950.92
Part 2: Summary of Liabilities		
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D	\$	8,960,292.07
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 <i>Schedule E/F</i>	\$	0.00
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	+\$	860,539.00
4. Total liabilities Lines 2 + 3a + 3b	\$	9,820,831.07

Fill in this information to identify the case:

Debtor Name: In re: Petersen Health Properties, LLC

United States Bankruptcy Court for the: District of Delaware

Case number (if known): 24-10541 (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.

art 18	Cash and cash equivalents				
1. Do e	es the debtor have any cash or cash equiv	/alents?			
	No. Go to Part 2.				
\checkmark	Yes. Fill in the information below.				
AII	cash or cash equivalents owned or co	ntrolled by the debto	r	Current val	ue of debtor's interest
2. Ca	sh on hand				
	2.1 None			\$	
3. Ch	ecking, savings, money market, or financi	al brokerage accounts	(Identify all)		
Nar	ne of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number		
	3.1 CIBC	Commercial	0820	\$	21,071.91
	3.2 CIBC	Government	_1868	\$	19,264.73
	3.3 <u>CIBC</u>	Operating	9142	\$	140,102.27
4. Oth	ner cash equivalents (Identify all)				
	4.1 None			\$	
5. Tota	al of Part 1			r.	400 420 04
Add	lines 2 through 4 (including amounts on a	ny additional sheets).	Copy the total to line 80.	\$	180,438.91

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 17 of 86 Petersen Health Properties, 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 253,639.06

9. Total of Part 2.

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

8.2 Prepaid Management Fees

\$ 280,786.62

27,147.56

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 18 of 86 Petersen Health Properties, 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. $\ensuremath{\,\,^{\scalebox{}}}$ Yes. Fill in the information below. Current value of debtor's 11. Accounts receivable Description face amount doubtful or uncollectible accounts Accounts 11a. 90 days old or less: 7,384,881.05 - \$ 7,384,881.05 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. 7,384,881.05 \$

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 19 of 86

Petersen Health Properties, LLC Case number (if known): 24-10541 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:

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

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 20 of 86

Debtor: Petersen Health Properties, LLC Case number (if known): 24-10541

	Hamo				
Part	Inventory, excluding agricultu	ire assets			
18.	Does the debtor own any inventory (excludi	ing agriculture assets)	?		
	☑ No. Go to Part 6.				
	☐ Yes. Fill in the information below.				
			Not be always of data day		
	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 debinterest
19.	Raw materials				

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 perishable?	
	□ No	

☐ 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

20. Work in progress

21. Finished goods, including goods held for resale

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 21 of 86

Petersen Health Properties, LLC 24-10541 Case number (if known): Debtor:

Name

Par	f 6: Farming and fishing	g-related assets (oth	er than titled motor vehicles	and land)	
27.		any farming and fishing-re	elated assets (other than titled motor	r vehicles and land)?	
	✓ No. Go to Part 7.				
	☐ Yes. Fill in the information be	elow.			
	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 harve	ested			
			\$	_	\$
29.	Farm animals Examples: Livesto	ock, poultry, farm-raised fish	n \$	_	\$
30.	Farm machinery and equipmer	nt (Other than titled motor vo	ehicles)		\$
31.	Farm and fishing supplies, che	emicals, and feed	\$		\$
32.	Other farming and fishing-related	ted property not already li			\$
33.	Total of Part 6. Add lines 28 through 32. Copy t	he total to line 85.			\$0.00
34.	Is the debtor a member of an a □ No	gricultural cooperative?			
	☐ Yes. Is any of the debtor's p	roperty stored at the cooper	rative?		
25	_	n Part 6 hoon nurchased	within 20 days before the bankruptc	v was filed?	
35.	□ No	ii Fait o been purchaseu	within 20 days before the bankrupic	y was meu r	
	_	Book value \$	Valuation method	d Cu	ırrent value \$
36.	Is a depreciation schedule ava ☐ No ☐ Yes	ilable for any of the prope	erty listed in Part 6?		

□ No ☐ Yes

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

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 22 of 86

Debtor: Petersen Health Properties, LLC Case number (if known): 24-10541

Name

Pai	t 7: Office furniture, fixtures, and equipment; a	nd collectible	s						
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 interest (Where available		Valuation method used for current value	Current va	lue of debtor's			
39.	Office furniture								
	39.1 Total FFE from Balance Sheet	\$	47,840.19	Net Book Value	\$	47,840.19			
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.				\$	47,840.19			
44.	Is a depreciation schedule available for any of the property	/ listed in Part 7?	,						
	☑ No								
	□ Yes								

✓ No☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 23 of 86

Petersen Health Properties, LLC

Name

Case number (if known): 24-10541

Part 8: Machinery, equipment, and vehicles

46.	Does the debtor own or lease any machinery, equipment, o	or vehicles?		
	□ No. Go to Part 9.			
	✓ Yes. Fill in the information below.			
	General description	Net book value of debtor's interest	Valuation method used	Current value of debtor's interest
	Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	(Where available)	for current value	Current value of deptor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled	farm vehicles		
	2018 Dodge Promaster-CH60724 VIN: 47.1 3C6TRVAG5JE153422	\$ Undetermined		\$ Undetermined
	2018 Dodge Promaster-CH60725 VIN: 47.2 3C6TRVAG8JE153429	\$ Undetermined		\$ Undetermined
48.	Watercraft, trailers, motors, and related accessories Examp floating homes, personal watercraft, and fishing vessels	oles: Boats, trailers, motors,		
	48.1 None	\$		\$
49.	Aircraft and accessories			
	49.1 None	\$		\$
50.	Other machinery, fixtures, and equipment (excluding farm	machinery and equipment)		
	50.1 See Schedule A/B 39	\$:	\$
51.	Total of Part 8.			
	Add lines 47 through 50. Copy the total to line 87.			0.00
52.	Is a depreciation schedule available for any of the property	/ listed in Part 8?		
	☑ No			
	☐ Yes			
53.	Has any of the property listed in Part 8 been appraised by	a professional within the last y	year?	
	EZI No.			

☐ Yes

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 24 of 86 Petersen Health Properties, LLC Case number (if known): Debtor: Name Part 9: **Real property** Does the debtor own or lease any real property? ☑ No. Go to Part 10. $\hfill \hfill \hfill$ 55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest **Description and location of property** Net book value of Nature and extent of Valuation method Include street address or other description such as debtor's interest Current value of Assessor Parcel Number (APN), and type of property (for debtor's interest in used for current debtor's interest property value example, acreage, factory, warehouse, apartment or office (Where available) building), if available. 55.1 56. Total of Part 9. Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88. 0.00 \$ 57. Is a depreciation schedule available for any of the property listed in Part 9? □ No □ Yes 58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

□ Yes

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 25 of 86

Debtor: Petersen Health Properties, LLC Case number (if known): 24-10541

Name

Part 10:	Intangibles	and	intellectual	property
	3			h h

59.	Does the debtor have any interests in intangibles or intellectual	property?		
	□ No. Go to Part 11.			
	✓ Yes. Fill in the information below.			
	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60.	Patents, copyrights, trademarks, and trade secrets			
	60.1 None	\$		\$
61.	Internet domain names and websites			
	61.1 None	\$		\$
62.	Licenses, franchises, and royalties State of Illinois Department of Public Health License, 62.1 Permit, Certification, Registration	\$ Undetermined		\$ Undetermined
63.	Customer lists, mailing lists, or other compilations			
	63.1 Customer / patient list	\$0.00		\$ Undetermined
64.	Other intangibles, or intellectual property			
	64.1 None	\$		\$
65.	Goodwill			
	65.1 None	\$		\$
66.	Total of Part 10.		Г	
	Add lines 60 through 65. Copy the total to line 89.			\$
67	Do your lists or records include personally identifiable informat	ion of customers (as defined in		d 107) 2
07.	□ No	ion of customers (as defined in	11 0.5.0. 33 101(41A) all	u 107):
	☑ Yes			
68.	Is there an amortization or other similar schedule available for a	ny of the property listed in Part	: 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			

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 26 of 86

Debtor: Petersen Health Properties, LLC Case number (if known): 24-10541

Name 24-10541

Part 11:	AII	other	assets

70.	Does the de Include all in	ebtor own any other assets that he terests in executory contracts and	nave not yet been reported on the unexpired leases not previously	this form? reported on this form.			
	□ No. Go	to Part 12.					
	✓ Yes. Fill	in the information below.					
						Current val	ue of debtor's
1.	Notes recei						
	• •	include name of obligor)	Total face amount	doubtful or uncollectible acc		•	7 700 00
	/1.1	Employee Advances / Loans	\$7,768.82	- \$ Undeterr	nined = →	\$	7,768.82
	Description (include name of obligor)	Total face amount	doubtful or uncollectible acc	ounts		
	71.2	None	\$	\$	= →	\$	
2.	Tax refunds	s and unused net operating losse	es (NOLs)				
	Description	(for example, federal, state, local)					
	72.1	None		Tax year		\$	
3	Interests in	insurance policies or annuities					
Ο.		None				\$	
4.	has been f	action against third parties (wher iled) See Global Notes	ther or not a lawsuit			\$	
		Nature of claim					
		Amount requested	\$				
75.		ingent and unliquidated claims o re, including counterclaims of th ns					
	75.1	None				\$	
		Nature of claim					
		Amount requested	\$				
ô.	Trusts, equ	itable or future interests in prope	erty				
	76.1	None				\$	
·. (Other prope	rty of any kind not already listed	Examples: Season tickets,				
•	,	membership					
	77.1	See AMENDED A/B 77 Attachmen	t			\$	8,964,235.33
8.	Total of Pa	rt 11.					
	Add lines 7	1 through 77. Copy the total to line	90.			\$	8,972,004.15
9.	Has any of t	the property listed in Part 11 bee	n appraised by a professional	within the last year?			
	☑ No	. , ,	,				

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 27 of 86

Debtor: Petersen Health Properties, LLC

Name

Case number (if known): 24-10541

Part 12: Summary

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

	Type of property	 nt value of nal property		Current value of real property	
80.	Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$ 180,438.91			
81.	Deposits and prepayments. Copy line 9, Part 2.	\$ 280,786.62			
82.	Accounts receivable. Copy line 12, Part 3.	\$ 7,384,881.05			
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. Copy line 43, Part 7.	\$ 47,840.19			
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.	\$ 8,972,004.15			
91.	Total. Add lines 80 through 90 for each column91a.	\$ 16,865,950.92	+ 91b.	\$0.00	
92.	Total of all property on Schedule A/B. Lines 91a + 91b = 92	 			\$ 16,865

Fill in this information to identify the case:				
Debtor Name: In re: Petersen Health Properties, LLC				
United States Bankruptcy Court for the: District of Delaware				
Case number (if known): 24-10541 (TMH)				

☑ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

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

Part 1: List All Creditors with PRIORITY Unsecured Claims

- 1. Do 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 claim	Priority amount
Priority cre	ditor's name an	d mailing address	As of the petition filing date, the claim is: Check all that apply.	\$	\$
Creditor Name			— ☐ Contingent		
			☐ Unliquidated		
Creditor's Notice	e name		 □ Disputed		
Address			Basis for the claim:		
				_	
City	State	ZIP Code	-		
Country			_		
Date or dat	es debt was inc	urred			
Last 4 digit	s of account		_	Is the claim su □ No	bject to offset?
Specify Co	de subsection o	of PRIORITY unsecu	red	□ Yes	
claim: 11 U	.S.C. § 507(a) ()				

Part 2:

List All Creditors with NONPRIORITY Unsecured Claims

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

		Amount of claim	
Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$	559,914.00
Petersen Health Junction, LLC	Check all that apply.		
Creditor Name	☐ Contingent		
	☐ Unliquidated		
Creditor's Notice name	 □ Disputed		
120 South 1st Avenue	Basis for the claim:		
129 South 1st Avenue Address	Inter Company Loan		
Canton IL 61520 City State ZIP Code			
Country			
Date or dates debt was incurred	Is the claim subject to offset?		
	✓ No		
As of 3/31/2024			
As of 3/31/2024 Last 4 digits of account	☐ Yes		
	☐ Yes		
Last 4 digits of account number Amended herein: added		\$	625.00
Last 4 digits of account number Amended herein: added Nonpriority creditor's name and mailing address Petersen Health Operations, LLC	As of the petition filing date, the claim is: Something contents of the claim is: Something the claim	\$	625.00
Last 4 digits of account number Amended herein: added Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is:	\$	625.00
Last 4 digits of account number Amended herein: added Nonpriority creditor's name and mailing address Petersen Health Operations, LLC	As of the petition filing date, the claim is:	\$	625.00
Last 4 digits of account number Amended herein: added Nonpriority creditor's name and mailing address Petersen Health Operations, LLC	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated	\$	625.00
Last 4 digits of account number Amended herein: added 2 Nonpriority creditor's name and mailing address Petersen Health Operations, LLC Creditor Name Creditor's Notice name	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed	\$	625.00
Last 4 digits of account number Amended herein: added Nonpriority creditor's name and mailing address Petersen Health Operations, LLC Creditor Name	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated	\$	625.00
Last 4 digits of account number Amended herein: added Nonpriority creditor's name and mailing address Petersen Health Operations, LLC Creditor Name Creditor's Notice name 830 W Trailcreek Dr.	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$	625.00
Last 4 digits of account number Amended herein: added Nonpriority creditor's name and mailing address Petersen Health Operations, LLC Creditor Name Creditor's Notice name 830 W Trailcreek Dr.	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$	625.00
Last 4 digits of account number Amended herein: added Nonpriority creditor's name and mailing address Petersen Health Operations, LLC Creditor Name Creditor's Notice name 830 W Trailcreek Dr. Address	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim:	\$	625.00
Last 4 digits of account number Amended herein: added Nonpriority creditor's name and mailing address Petersen Health Operations, LLC Creditor Name Creditor's Notice name 830 W Trailcreek Dr. Address Peoria IL 61614	As of the petition filing date, the claim is: Check all that apply. Contingent Unliquidated Disputed Basis for the claim: Inter Company Loan	\$	625.00
Last 4 digits of account number Amended herein: added 2 Nonpriority creditor's name and mailing address Petersen Health Operations, LLC Creditor Name Creditor's Notice name 830 W Trailcreek Dr. Address Peoria LL State 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 Is the claim subject to offset?	\$	625.00
Last 4 digits of account number Amended herein: added Nonpriority creditor's name and mailing address Petersen Health Operations, LLC Creditor Name Creditor's Notice name 830 W Trailcreek Dr. Address Peoria IL State 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	\$	625.00

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 30 of 86

Nonpriority co	reditor's name a	nd mailing address	As of the petition filing date, the claim is:	\$	300,000.0
Petersen Health	care VII, LLC		Check all that apply.		
Creditor Name			☐ Contingent		
			☐ Unliquidated		
Creditor's Notice na	ame		□ Disputed		
830 W Trailcree	k Dr		Basis for the claim:		
Address			 Inter Company Loan		
				_	
Peoria	IL	61614			
City	State	ZIP Code			
Country					
D-1		ادما	Is the claim subject to offset?		
	debt was incurr	ea	-		
As of 3/31/2024	1	ea	☑ No		
	of account	ea	-		
As of 3/31/2024 Last 4 digits of number Amended here Nonpriority cr	of account rein: added	nd mailing address	✓ No ☐ Yes As of the petition filing date, the claim is:	\$	Undetermin
As of 3/31/2024 Last 4 digits of number Amended here	of account rein: added		✓ No ☐ Yes As of the petition filling date, the claim is: Check all that apply.	\$	Undetermin
As of 3/31/2024 Last 4 digits of number Amended her Nonpriority or Sorling	of account rein: added		✓ No ☐ Yes As of the petition filing date, the claim is: Check all that apply. ☐ Contingent	\$	Undetermin
As of 3/31/2024 Last 4 digits of number Amended her Nonpriority or Sorling	of account rein: added reditor's name a		✓ No ☐ Yes As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☑ Unliquidated	\$	Undetermine
As of 3/31/2024 Last 4 digits of number Amended here Nonpriority of Sorling Creditor's Notice nations and the sortions of	of account rein: added reditor's name a		✓ No ☐ Yes As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☑ Unliquidated ☑ Disputed	\$	Undetermine
As of 3/31/2024 Last 4 digits of number Amended here Nonpriority or Sorling Creditor Name	of account rein: added reditor's name a		✓ No ☐ Yes As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☑ Unliquidated ☑ Disputed Basis for the claim:	\$	Undetermine
As of 3/31/2024 Last 4 digits of number Amended here Nonpriority of Sorling Creditor's Notice nate of North Number	of account rein: added reditor's name a		✓ No ☐ Yes As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☑ Unliquidated ☑ Disputed	\$	Undetermine
As of 3/31/2024 Last 4 digits of number Amended here Nonpriority of Sorling Creditor Name Creditor's Notice nate of Address Suite 200	of account rein: added reditor's name a	nd mailing address	✓ No ☐ Yes As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☑ Unliquidated ☑ Disputed Basis for the claim:	\$	Undetermin
As of 3/31/2024 Last 4 digits of number Amended her Nonpriority or Sorling Creditor Name Creditor's Notice nate of Address Suite 200 Springfield	of account rein: added reditor's name a		✓ No ☐ Yes As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☑ Unliquidated ☑ Disputed Basis for the claim:	\$	Undetermine
As of 3/31/2024 Last 4 digits of number Amended here Nonpriority of Sorling Creditor Name Creditor's Notice nate of Address Suite 200	of account rein: added reditor's name a ame apitol Plaza	nd mailing address	✓ No ☐ Yes As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☑ Unliquidated ☑ Disputed Basis for the claim:	\$	Undetermine
As of 3/31/2024 Last 4 digits of number Amended her Nonpriority or Sorling Creditor Name Creditor's Notice nate of Address Suite 200 Springfield	of account rein: added reditor's name a ame apitol Plaza	nd mailing address	✓ No ☐ Yes As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☑ Unliquidated ☑ Disputed Basis for the claim:	\$	Undetermine
As of 3/31/2024 Last 4 digits of number Amended here Nonpriority Creditor Name Creditor's Notice nated and the second of the	of account rein: added reditor's name a ame apitol Plaza	nd mailing address 62701 ZIP Code	✓ No ☐ Yes As of the petition filing date, the claim is: Check all that apply. ☐ Contingent ☑ Unliquidated ☑ Disputed Basis for the claim:	\$	Undetermine

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 31 of 86

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			-	

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims			
5. Add the amounts of priority and nonpriority unsecured claims.			
		Total of cla	aim amounts
5a. Total claims from Part 1	5a.	\$	0.00
5b. Total claims from Part 2	5b. +	\$	860,539.00
So. Tatal of Barta A and O	5.	•	200 500 00
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c	5c.	\$	860,539.00

Fill in this information to identify the case: Debtor Name: In re: Petersen Health Properties, LLC United States Bankruptcy Court for the: District of Delaware Case number (if known): 24-10541 (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 unexpire	d leases	State the name and n whom the debtor has lease	nailing address for al an executory contra	I other parties with ct or unexpired
2.1 State what the contract or lease is for and the nature	ADDENDUM TO CONTRACT	Action Homecare and S	Staffing, LLC d/b/a Oasi	s Medical Services
of the debtor's interest	ADDENDOM TO CONTRACT	Name	3,	
		Attn Administration		
		Notice Name		
		761 Main St NW, Suite	Α	
State the term remaining		Address		
3				
List the contract number of	of			
any government contract				
, ,				
		Bourbonnais	IL	60914
		City	State	ZIP Code
		Country		
		Country		
Amended herein: added				
State what the contract or				
2.2 lease is for and the nature	Staffing Agreement	Action Homecare and S	Staffing, LLC d/b/a Oasi	s Medical Services
of the debtor's interest		Name		
		Attn Administration		
		Notice Name		
		761 Main St NW, Suite	Α	
State the term remaining		Address		
List the contract number of	of			
any government contract				
, 3				
		Bourbonnais	IL	60914
		City	State	ZIP Code
		Country		
		Country		

or: Petersen Health Properties,		Case number (if k	nown): 24-10541	
Name State what the contract or				
.3 State what the contract or lease is for and the nature	Letter Agreement re: Hospice Services Agreement	Addus Hospice of Illin	ois, LLC	
of the debtor's interest		Name		
		Notice Name		
State the term remaining		6303 Cowboys Way S Address	buile 600	
State the term remaining		———		
List the contract number of				
any government contract				
any government contract				
		Frisco	TX	75034
		City	State	ZIP Code
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract or				
.4 State what the contract or lease is for and the nature	Facility Agreement	Aetna Better Health		
of the debtor's interest		Name		
		Notice Name		
State the term remaining		PO Box 818031, F661 Address		
State the term remaining		———		
List the contract number of				
any government contract				
		Cleveland	ОН	44181
		City	State	ZIP Code
		Oily	Oldio	211 0000
		Country		
Amended herein: added				
State what the contract or	Facility Services Agreement. Product Participation			
5 State what the contract or lease is for and the nature	and Signature Sheet		ennsylvania Corporation	1
of the debtor's interest		Name		
		Notice Name		
		550 Maryville Centre I	Drivo Suito 200	
State the term remaining		Address	Jiive, Juile JUU	
Grace the term remaining				
List the contract number of				
any government contract				
any government contract				
		St. Louis	MO	63141
		City	State	ZID Codo
		City	State	ZIP Code

Debtor:	Case Petersen Health Properties, L		IIEG 04/22/25 Page Case number (if k	9 35 0† 86 mown): 24-10541	
	Name				
2.6	State what the contract or lease is for and the nature	Facility Service Agreement	Aggeus Healthcare, P	P.C.	
(of the debtor's interest	- somy control growth	Name		
			Notice Name		
				Cuita 40 Fast	
	State the term remaining		10 S. Riverside Plaza Address	, Suite 19 East	
	State the term remaining				
	List the contract number of				
	any government contract				
	any government confider				
			Chicago	IL	60606
			City	State	ZIP Code
			- ,		
			Country		
	Amended herein: added				
2.7	State what the contract or lease is for and the nature				
	lease is for and the nature of the debtor's interest	Nursing Facility Laboratory Agreement	Name	American Health Associa	ites
•					
			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		
	Amended herein: added				
2.8	State what the contract or lease is for and the nature	Addendum to Contract	American Health Asso	ociates	
	of the debtor's interest	Addendam to Contract	Name	-	
			Notice Name		
			671 Ohio Pike		
	State the term remaining		Address		
	Dat the control of the first		Suite K		
	List the contract number of				
	any government contract				
			Cincinnot:	CH	45045.0400
			Cincinnati	OH	45245-2136
			City	State	ZIP Code
			Country		
			Country		

tor: Petersen Health Properties	s, LLC	Case number (if ki	nown): 24-10541	
Name State what the contract of	•			
2.9 State what the contract of lease is for and the nature	Nursing Facility Laboratory Agreement	American Health Asso	ciates	
of the debtor's interest		Name		
		Notice Name		
		671 Ohio Pike		
State the term remaining		Address		
State the term remaining		Suite K		
List the contract number	of	- Cuite IX		
any government contract				
uny government contract				
		Cincinnati	ОН	45245-213
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract of lease is for and the nature	r			
lease is for and the nature of the debtor's interest	Patient Transfer Agreement	Anna Hospital Corpora Name	ation d/b/a Union County	Hospital
of the debtor's interest		Attn Chief Executive C	Officer	
		Notice Name	JIIICEI	
		517 North Main Street		
State the term remaining		Address		
List the contract number	of			
any government contract				
, 9				
		Anna	IL	62906
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract of	General Skilled Nursing and Respite Care Nursing			
Iease is for and the nature of the debtor's interest	Home Agreement	Apex Hospice & Pallia Name	tive Care, Inc.	
or the debtor's interest		Namo		
		Notice Name		
		2607 W 22nd St. Suite	40	
State the term remaining		Address	- 10	
List the contract number	of			
any government contract				
, 5				
		Oak Brook	IL	60523
		City	State	ZIP Code

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	Addendum to Contract	Notice Name 102 East Main Street, Address		
of the debtor's interest State the term remaining List the contract number of	Addendum to Contract	Notice Name 102 East Main Street,		
State the term remaining List the contract number of		Notice Name 102 East Main Street,	Suite A	
List the contract number of		102 East Main Street,	Suite A	
List the contract number of			Suite A	
List the contract number of				
List the contract number of				
any government contract				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		Galesburg	IL	61401
		City	State	ZIP Code
		City	State	ZIP Code
		Country		
		,		
Amended herein: added				
State what the contract or lease is for and the nature	Hospice and Nursing Facility Collaborative Care Agreement	Beacon of Hope Hospi	ce of Illinois, Inc.	
of the debtor's interest	rigioonion.	Name		
		Notice Name		
		102 East Main Street,	Suite A	
State the term remaining		Address		
List the contract number of				
any government contract				
		Galesburg	IL	61401
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract or	Addendum to Clinical Services Agreement Dated as			
lease is for and the nature	of June 23, 2022	Bio-Behavioral Care S Name	olutions, LLC dba Behav	ioral Care Solut
of the debtor's interest			to Chief Evenutive Offic	
		Notice Name	te, Chief Executive Office	er
		Behavioral Care Soluti	one	
State the term remaining		Address	0113	
State the term remaining		39465 W. 14 Mile Rd.		
List the contract number of		39403 W. 14 Wille Itu.		
List the contract number of				
any government contract				
		Novi	N41	10277
		Novi	MI	48377
		City	State	ZIP Code

Debtor:	Petersen Health Properties, L		-IIed 04/22/25 Page Case number (#)	2 38 0f 86 (mown): 24-10541	
2.15	Name State what the contract or lease is for and the nature	Mobile Imaging Service Agreement	BioTech X-ray, Inc		
	of the debtor's interest	Mobile imaging dervice Agreement	Name		
			Attn Tamara Schwart	z, President	
			Notice Name		
			1065 Executive Parky	vay Ste.220	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			St. Louis	МО	63141-6367
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.16	State what the contract or lease is for and the nature		PioTooh V roy Inc		
2.10	lease is for and the nature of the debtor's interest	Service Agreement	BioTech X-ray, Inc Name		
			Attn Tamara Schwart	z. President	
			Notice Name	,	
			1065 Executive Parky	vay 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				
2.17	State what the contract or lease is for and the nature		DioTook V roy Inc		
	lease is for and the nature of the debtor's interest	Mobile Imaging Services Agreement	BioTech X-ray, Inc. Name		
			Attn Tamara Schwart	z. President	
			Notice Name	,	
			1065 Executive Parky	vay, 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		
			550.My		

	Case	24-10443-TMH Doc 1473	Filed 04/22/25 Page	39 of 86	
ebtor:	Petersen Health Properties, LI	LC	Case number (if kr	own): 24-10541	
	Name				
2.18	State what the contract or ease is for and the nature	Addendum to Contract	Bird in the Hand Staffi	ng, LLC	
(of the debtor's interest		Name		
			N. C. N.		
			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		
			Country		
	Amended herein: added				
2.19 lea of	State what the contract or ease is for and the nature	Amendment to Contract	Bird in the Hand Staffi	ng, LLC	
	of the debtor's interest	Amendment to contract	Name		
			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				
2.20	State what the contract or	0	Bird in the Hand Staffi	na IIC	
[lease is for and the nature of the debtor's interest	Staffing Agency Contract	Name	ig, 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

ebtor:					
2.21	Name State what the contract or lease is for and the nature	Medicaid Provider Agreement	Blue Cross Blue Shiel Corporation	d of Illinois, a Division of	Health Care Service
	of the debtor's interest	Medicala Frontaci Agreement	Name		
			Notice Name		
			300 East Randolph St		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Chicago	IL	60601
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.22	State what the contract or lease is for and the nature	Skilled Nursing Facility Agreement	Blue Cross Blue Shiel Corporation	d of Illinois, a Division of	Health Care Service
of the deb	of the debtor's interest	Skilled Nursing Facility Agreement	Name		
			Notice Name		
			300 East Randolph St		
	State the term remaining		Address	•	
	List the contract number of				
	any government contract				
			Chicago	<u>IL</u>	60601
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.23	State what the contract or lease is for and the nature	Renewal Customer Service Agreement	Call One Inc.		
	of the debtor's interest	Notice and the second control of the second	Name		
			Notice Name		
			225 West Wacker Driv	e 8th Floor	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Chicago	IL	60606
			City	State	ZIP Code

	Case	24-10443-TMH Doc 1473	Filed 04/22/25 Page	41 of 86	
ebtor:	Petersen Health Properties, L	LC	Case number (if kno		
9	Name State what the contract or				
2.24 i	State what the contract or ease is for and the nature	Addendum to Contract	Camillus Staffing, LLC	d/b/a Nextaff	
•	of the debtor's interest		Name		
			Notice Name		
			11101 Switzer Rd. Suite	110	
	State the term remaining		Address	, 110	
	otato tilo toriii romaning				
ı	List the contract number of				
;	any government contract				
			-		
			Overland Park	KS	66210
			City	State	ZIP Code
			Country		
	A managed and be a major and also al				
	Amended herein: added				
2.25	State what the contract or ease is for and the nature	Add a down to Ocatana	Camillus Staffing, LLC	1/h/a Nevtaff Group III	C
	of the debtor's interest	Addendum to Contract	Name	arbra Hoxtan Group, EE	
			Notice Name		
			11101 Switzer Rd. Suite	110	
;	State the term remaining		Address		
	List the contract number of				
•	any government contract				
			Overdend Bod	140	00040
			Overland Park	KS	66210
			City	State	ZIP Code
			Country		
			,		
	Amended herein: added				
,	State what the contract or				
^{2.26} i	ease is for and the nature	Amendment to Contract	Camillus Staffing, LLC	d/b/a Nextaff Group, LL	С
(of the debtor's interest		Name		
			Notice Name		
			11101 Switzer Rd. Suite	110	
:	State the term remaining		Address		
	3				
ı	List the contract number of				
;	any government contract				
	-		-		
			Overland Park	KS	66210
			City	State	ZIP Code
			Country		

Official Form 206G

Debtor:			_	42 of 86 24-10541		
Debioi.	Name		Case number (if kno	wn): 24-10341		
2.27	State what the contract or lease is for and the nature of the debtor's interest	Hospice Inpatient Residential Agreement	Celtic Hospice & Palliative Care Services of S. IL, LLC Name			
			Attn Administrator			
			Notice Name			
			150 Scharberry Lane			
	State the term remaining		Address			
	List the contract number of					
	any government contract					
			Mars	PA	16046	
			City	State	ZIP Code	
			Country			
	Amended herein: added					
2.20	State what the contract or lease is for and the nature of the debtor's interest	Enteral Therapy, Urological, Ostomy and Tracheotomy Supplies and Wound Care Products	Centrad Healthcare, LL	С		
	or the deptor's interest	Agreement	Attn Michelle C. Korslin	Sr VP of Sales & Mar	ketina	
			Notice Name	, 5.1 1. 5. 54.55 44.	9	
			184 Shuman Blvd, Suite	e 130		
	State the term remaining		Address			
	List the contract number of					
	any government contract					
	, 0					
			Naperville	IL	60563	
			City	State	ZIP Code	
			Country			
	Amended herein: added					
2.29	State what the contract or lease is for and the nature	Pusings Close Service Order Agraement	Comcast Cable Commu	unications Management	LLC	
	of the debtor's interest	Business Class Service Order Agreement	Name		, ==0	
			Attn General Counsel Notice Name			
			One Comcast Center			
	State the term remaining		Address			
	List the contract number of					
	any government contract					
			Philadelphia	PA	19103	
			City	State	ZIP Code	
			Country			

	Case	24-10443-TMH Doc 1473 Filed	d 04/22/25 Page 4	l3 of 86		
Debtor:			Case number (if known			
2.30	State what the contract or lease is for and the nature of the debtor's interest	Services Agreement	Comcast of Illinois/Indian	Comcast of Illinois/Indiana/Ohio, LLC		
	0 40.2.0.		Attn MDU Area Manager	r		
			Notice Name			
			1500 McConnor Parkway	y		
	State the term remaining		Address			
	List the contract number of					
	any government contract					
			Schaumburg	<u>IL</u>	60173	
			City	State	ZIP Code	
			Country			
	Amended herein: added					
2.31	State what the contract or lease is for and the nature	Services Agreement	Comcast of Illinois/West Virginia, LLC			
	of the debtor's interest		Name			
			MDU Area Manager Notice Name			
			1500 McConnor Parkway	.,		
	State the term remaining		Address	у		
	State the term remaining					
	List the contract number of					
	any government contract					
	any government contract					
			Schaumburg	IL	60173	
			City	State	ZIP Code	
			Country			
	A man in alo al la nive in contacte al					
	Amended herein: added					
2.32	State what the contract or lease is for and the nature	Nursing Facility Hagning Considers Agreement	Community Hospice of A	merica d/b/a Hospice	Compassus - NWII	
	of the debtor's interest	Nursing Facility Hospice Services Agreement	Name	unerioa, a/b/a riospice	Compassus TVVIL	
			Attn Margaret Carlson Notice Name			
			Hospice Compassus			
	State the term remaining		Address			
			755 N. Henderson St.			
	List the contract number of					
	any government contract					
			Galesburg	IL	61401	
			City	State	ZIP Code	
			Country			

	Case	24-10443-TMH Doc 1473 F	Filed 04/22/25 Page	44 of 86		
otor:	Petersen Health Properties, L	_C	Case number (if kno	wn): 24-10541		
	Name					
2.33	State what the contract or ease is for and the nature	Psychological Services Agreement	Deer Oaks Mid-West, L	.L.C.		
•	of the debtor's interest		Name			
			Matter Manua			
			Notice Name			
			7272 Wurzbach Road,	Suite 601		
,	State the term remaining		Address			
_						
	List the contract number of					
i	any government contract					
				T)/	70040	
			San Antonio	TX	78240	
			City	State	ZIP Code	
			Country			
			Country			
	Amended herein: added					
2.34 le	State what the contract or ease is for and the nature	Addendum to Contract	Deer Oaks Mid-West, L	LC		
	of the debtor's interest	Addendam to Contract	Name			
			Attn Dr. Deborah Theis	- Quality Assurance &	Compliance Offic	
			Notice Name			
St			Deer Oaks - The Behav	Deer Oaks - The Behavioral Health Solution		
	State the term remaining		Address			
			7272 Wurzbach Road,	7272 Wurzbach Road, # 601		
ı	List the contract number of					
á	any government contract					
			San Antonio	TX	78240	
			City	State	ZIP Code	
			Country			
	Amount of homelon and dead					
	Amended herein: added					
35	State what the contract or ease is for and the nature		Dr. Jamini C. Janania			
	ease is for and the nature of the debtor's interest	Medical Director Agreement	Dr. Jemini G. Ignacio Name			
			Notice Name			
			1141 East Main Street	#105		
;	State the term remaining		Address			
	J					
ı	List the contract number of					
	any government contract					
	, , ,					
			East Dundee	IL	60118	
			City	State	ZIP Code	
			Oity	Glate	ZIF Code	
			Country			
			•			
	Amended herein: added					

Debtor:	Petersen Health Properties, L	LC	Case number (if known):	24-10541	
	Name		_		
2.36	State what the contract or lease is for and the nature	Medical Director Agreement	Dr. Robert Parks		
	of the debtor's interest		Name		
			Notice Name		
			17031 North Casey Pike Lan	2	
	State the term remaining		Address		
	otato tilo torin romaning		_		
	List the contract number of				
	any government contract		_		
			Mt. Vernon	IL	62864
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.37	State what the contract or lease is for and the nature	Medical Director Agreement	Dr. Tom Klen		
	of the debtor's interest	<u> </u>	Name		
			Na Can Nama		
			Notice Name		
	State the term remaining		1105 Milwaukee Ave		
	State the term remaining		—		
	List the contract number of				
	any government contract		_		
	, ,				
			Riverwoods	IL	60015
			City	State	ZIP Code
			Country		
	Amended herein: added				
2 20	State what the contract or lease is for and the nature	Amendment No. 3 to Pharmacy Products and Services	5 L D0		
2.50	lease is for and the nature of the debtor's interest	Agreement	Enloe Drugs, LLC Name		
	or the debter o interest		OMNICARE OF DECATUR		
			Notice Name		
			796 N. SUNNYSIDE ROAD		
	State the term remaining		Address		
	List the contract number of				
	any government contract		_		
	, gerenmant contract				
			Decatur	IL	62522-1156
			City	State	ZIP Code

	Case	24-10443-TMH Doc 1473 F	Filed 04/22/25 Page 4	16 of 86		
Debtor:	Petersen Health Properties, L	LC	Case number (if know			
	Name					
2.39	State what the contract or lease is for and the nature	Nursing Home Rate Agreement	Favorite Healthcare State	ffina		
	of the debtor's interest	Nursing Home Rate Agreement	Name	9		
			Notice Name			
			7255 W. 98th Terrace -	Bldg.5, Suite 150		
	State the term remaining		Address			
	• · · · · · · · · · · · · · · · · · · ·					
	List the contract number of					
	any government contract					
	any government contract					
			Overdend Devis	KC	00040 0045	
			Overland Park	KS	66212-2215	
			City	State	ZIP Code	
			Country			
	Amandad harring adds -1					
	Amended herein: added					
2.40	State what the contract or		- · · · · · · · · · · · · · · · · · · ·	···		
	lease is for and the nature of the debtor's interest	Addendum to Contract	Favorite Healthcare State	fing, Inc.		
,	or the deptor 5 interest		Name			
			Notice Name			
				Plda E. Suito 150		
	Ctata tha tanna namainin n			7255 W. 98th Terrace - Bldg.5, Suite 150 Address		
	State the term remaining		Addless			
	List the contract number of					
	any government contract					
			Overland Park	KS	66212-2215	
			City	State	ZIP Code	
			Country			
	Amended herein: added					
:	State what the contract or					
2.41	State what the contract or lease is for and the nature	Provider Service Agreement	First Transit, Inc.			
(of the debtor's interest		Name			
			Carol Faye Notice Name			
			799 Roosevelt Road			
	State the term remaining		Address			
			Bldg # 4 Ste 200			
	List the contract number of					
	any government contract					
			-			
			Glen Ellyn	IL	60137	
			City	State	ZIP Code	
			- •			
			Country			
			55ay			

r: Petersen Health Properties, L		·	·	
Name State what the contract or				
2 State what the contract or lease is for and the nature	SNF Outpatient Dialysis Services Agreement	FMC Cape County Dialys	sis	
of the debtor's interest		Name		
		Director of Operations Notice Name		
		3250 Gordonville Rd Sui	te 259	
State the term remaining		Address	10 200	
•				
List the contract number of				
any government contract				
		Cape Girardeau	MO	63701
		City	State	ZIP Code
		Country		
Amended herein: added				
₂ State what the contract or		Fresenius Kidney Care o	of Illinois, LLC d/b/a Fr	esenius Kidney (
3 State what the contract or lease is for and the nature of the debtor's interest	SNF Outpatient Dialysis Services Agreement	Macomb Name		
		Notice Name		
		210 E Calhoun St		
State the term remaining		Address		
List the contract number of				
any government contract				
		Macomb	IL	61455
		City	State	ZIP Code
		O.I.y	Ciaio	2 0000
		Country		
Amended herein: added				
Amended herein. added				
4 State what the contract or lease is for and the nature	SNF Outpatient Dialysis Services Agreement	Fresenius Medical Service	ces dba FMC Carbono	dale
of the debtor's interest	G. H. Gaspanom Dialyon Go. Hood Fig. Como.ii	Name		
		Area Manager		
		Notice Name		
		725 S. Lewis Lane		
State the term remaining		Address		
List the contract number of				
any government contract				
		Carbondale	<u>IL</u>	62901
		City	State	ZIP Code

otor:	Petersen Health Properties, LI		-IIEC 04/22/25 Page Case number (if kno	48 0† 86 _{wn):} 24-10541	
	Name				
2.45 i	State what the contract or lease is for and the nature	Laboratory Services Agreement	Gamma Healthcare, Inc	: .	
•	of the debtor's interest		Name		
			Notice Name		
			1717 West Maud		
	State the term remaining		Address		
,	State the term remaining				
	List the contract number of				
	any government contract				
	any government continues				
			Poplar Bluff	MO	63901
			City	State	ZIP Code
			2.7		
			Country		
	Amended herein: added				
46	State what the contract or lease is for and the nature				
ا ⁴⁰	lease is for and the nature of the debtor's interest	Radiology Services Agreement	Gamma HealthCare, In	C	
	or the debtor 3 interest				
			Notice Name		
			1717 West Maud St.		
;	State the term remaining		Address		
ı	List the contract number of				
	any government contract				
			Poplar Bluff	MO	63901
			City	State	ZIP Code
			Country		
	Amended herein: added				
.47	State what the contract or lease is for and the nature	Lease and Service Agreement	Gateway ProClean, Inc		
Ġ	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				
			01.01.1		20225
			St. Charles	MO	63303
			City	State	ZIP Code

	Case	24-10443-TMH Doc 1473 F	Filed 04/22/25 Page 4	49 of 86	
ebtor:	Petersen Health Properties, L	LC	Case number (if know		
	Name				
2.48	State what the contract or ease is for and the nature	Purchasing Agreement	Gem Medical Supplies,	LLC	
	of the debtor's interest	- u.o.i.doi.ig / ig.oomon	Name		
			Notice Name		
			730 Anthony Trail		
	State the term remaining		Address		
	List the contract number of				
1	any government contract				
			Northbrook	IL	60062
			City	State	ZIP Code
			Country		
	Amended herein: added				
!	State what the contract or				
2.49 ì	State what the contract or ease is for and the nature	Master Staffing Agreement	GrapeTree Medical Staf	fing, Inc.	
(of the debtor's interest		Name		
			Kathy Fahy, VP of Sales Notice Name	& Marketing	
	04-4-46-4-4		1003 23rd Street Address		
,	State the term remaining		Address		
	List the contract number of				
;	any government contract				
			Milford	IA	51351
			City	State	ZIP Code
			Country		
	Amanadad barain, addad				
	Amended herein: added				
2 50	State what the contract or		Creat Dising Ctaffing III	O allo a Navetaff	
2.00 J	lease is for and the nature of the debtor's interest	Memorandum of Understanding	Great Plains Staffing LL Name	C dda Nextair	
•	of the debtor's interest				
			Notice Name		
			11101 Switzer Road, Su	uite 110	
	State the term remaining		Address		
	otate the term remaining	-			
	List the contract number of				
•	any government contract				
			Overland Dark	KS	66040
			Overland Park	6/1	66210
			City	State	ZIP Code

otor: Pete	ersen Health Properties, LI		-IIed 04/22/25 Page 5 Case number (if knot	o0 of 86 _{vn):} 24-10541	
Name					
2.51 lease of the	what the contract or is for and the nature debtor's interest	Memorandum of Understanding	Great Plains Staffing, LL Name	C dba Nextaff	
00					
			Notice Name		
			11101 Switzer Road, Su	iite 110	
State	the term remaining		Address		
List t	he contract number of				
any g	overnment contract				
			Overland Park	KS	66210
			City	State	ZIP Code
			Country		
Am	ended herein: added				
State	what the contract or is for and the nature	Hannital Transfer Assessed	Hardin County Hospital		
of the	debtor's interest	Hospital Transfer Agreement	Name		
			Notice Name		
			6 Ferrel Rd		
State	the term remaining		Address		
List t	he contract number of				
	overnment contract				
			Rosiclare	IL	62982
			City	State	ZIP Code
			Country		
Am	ended herein: added				
53 State	what the contract or is for and the nature		Llealth Alliance Medical	Dlana Ina	
	is for and the nature debtor's interest	Participating Provider Agreement	Health Alliance Medical Name	rians, inc.	
			Notice Name		
			301 South Vine St		
State	the term remaining		Address		
List t	he contract number of				
any g	overnment contract				
			Urbana	IL	31801
					710.0
			City	State	ZIP Code

Debtor:	Petersen Health Properties, L		04/22/25 Page Case number (if kno	51 Of 86 _{own): 24-10541}	
2.54	Name State what the contract or lease is for and the nature	Consulting Services Agreement	Health Technologies, Ir	nc.	
	of the debtor's interest		Name	_	
			Attn Carol Sapp, Presid	lent	
			8446 Page Avenue		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			St. Louis	МО	63130
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.55	State what the contract or lease is for and the nature	Participating Provider Agreement	HealthLink, Inc., an Illin	ois Corporation	
	of the debtor's interest	Participating Provider Agreement	Name		
			Notice Name		
	State the term remaining		1831 Chestnut St Address		
	State the term remaining				
	List the contract number of				
	any government contract				
			St. Louis	МО	63103
			City	State	ZIP Code
			Country		
	Amended herein: added				
2 56	State what the contract or lease is for and the nature	Addendum to Contract Between Staffing Agency and	Harizana Haalthaara A	20001	
2.00	lease is for and the nature of the debtor's interest	Nursing Facility	Horizons Healthcare Ag	jency	
			Notice Name		
			3100 Knoxville Ave Sui	te 216	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Peoria	IL	61603
			City	State	ZIP Code
			Country		

btor:	Case Petersen Health Properties, LI		Case number (ii	e 52 of 86 _{f known):} 24-10541	
	Name				
2.57	State what the contract or lease is for and the nature	Amendment to Contract	Horizons Healthcare	Agency	
	of the debtor's interest	Amendment to Contract	Name	37	
			N. e. N		
			Notice Name	2 % 040	
	Ctata tha tanna namainin n		3100 Knoxville Ave S Address	Suite 216	
	State the term remaining				
	List the contract number of				
	any government contract				
	. , , ,				
			Peoria	IL	61603
			City	State	ZIP Code
			Country		
	Amended herein: added				
2 58	State what the contract or lease is for and the nature		Horizons Healthcare	Agonov	
	lease is for and the nature of the debtor's interest	Facility and Agency Contract for Per Diem	Name	Agency	
			Notice Name		
			3100 Knoxville Ave S	Suito 216	
	State the term remaining		Address	Julie 210	
	otate the term remaining				
	List the contract number of				
	any government contract				
			Peoria	IL	61603
			City	State	ZIP Code
			Country		
	Amended herein: added				
;	State what the contract or	Addendum to Contract Between Nursing Facility and			
.59	State what the contract or lease is for and the nature	Staffing Agency	Horizons Healthcare	Agency LLC	
•	of the debtor's interest		Name		
			Notice Name		
			3100 Knoxville Ave S	Suite 216	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
	, government contract				
			Peoria	IL	61603
			City	State	ZIP Code
			City	Clair	

Debtor:	Case Petersen Health Properties, LI		04/22/25 Page Case number (if km	53 of 86 own): 24-10541	
2.60	Name State what the contract or lease is for and the nature of the debtor's interest	Residential Hospice Care Agreement for Services to Residents of Nursing Facilities	Hospice of Illinois LLC	, dba Harbor Light Hosp	ice
			Notice Name		
	State the term remaining		1N131 County Farm R Address	oad	
	List the contract number of				
	any government contract				
			Winfield	<u>IL</u>	60190
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.01	State what the contract or lease is for and the nature of the debtor's interest	Residential Hospice Care Agreement for Services to Residents of Nursing Facilities	Hospice of Illinois, LLC	dba Harbor Light Hosp	ice
•	or the debtor's interest		Harbor Light Hospice		
			Notice Name		
	.		1865 N. Henderson, S	te #10	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Galesburg	IL	61401
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.62	State what the contract or lease is for and the nature	Addendum to Agreement	Hospice of Northeaste	rn Illinois	
	of the debtor's interest	Addition to Agreement	Name c/o Norther Illinois Hos		
			Notice Name	pice	
	0/-/- //- /		4751 Harrison Avenue		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Rockford	IL	61108
			City	State	ZIP Code
			Country		

Debtor:			ed 04/22/25 Page Case number (# km	54 0† 86 nown): 24-10541	
	Name				
2.63	State what the contract or ease is for and the nature Protocol and Agreement for the Provision of Hospice Home Care Services		Hospice of Northeastern Illinois, Inc.		
	of the debtor's interest		Name		
			Attn Carolyn M. Handle Notice Name	er, President/CEO	
			410 South Hager Aver	nue	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Barrington	<u>IL</u>	60010
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.64	State what the contract or lease is for and the nature	Addendure to Assessment	Hospice of Southern III	linois Inc	
	of the debtor's interest	Addendum to Agreement	Name		
			Notice Name		
			305 South Illinois Stree	et	
	State the term remaining		Address	<u> </u>	
	List the contract number of				
	any government contract				
			Belleville	IL	62220-2159
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.65	State what the contract or lease is for and the nature	Long Torm Core Facility Agreement	Hospice of Southern III	linois Inc	
	of the debtor's interest	Long Term Care Facility Agreement	Name		
			•	HFMA, CPA, CGMA, ME	BA
			Notice Name		
	State the term remaining		305 South Illinois Stree	et	
	otato tilo toriii romaning				
	List the contract number of				
	any government contract				
			Belleville	IL	62220-2159
			City	State	ZIP Code
			Country		

	Case	24-10443-TMH Doc 1473 F	Filed 04/22/25 Page	55 of 86		
Debtor:	Petersen Health Properties, L	LC	Case number (if kn			
	Name					
2.66	State what the contract or lease is for and the nature	Added door to Assess of	Hospice of Southern III	linois Inc		
	of the debtor's interest	Addendum to Agreement	Name			
			Notice Name			
			305 South Illinois Stree	et		
	State the term remaining		Address			
	List the contract number of					
	any government contract					
			Della villa		60000 0450	
			Belleville	IL	62220-2159	
			City	State	ZIP Code	
			Country			
	Amended herein: added					
	Amended nerein. added					
	State what the contract or		Haspins of Courthorn III	Hospice of Southern Illinois, Inc.		
I.	lease is for and the nature of the debtor's interest	Long Term Care Facility Agreement	Name Name	illiois, inc.		
	or the debtor 3 interest			er, FHFMA, CPA, CGM	Δ ΜΒΔ	
			Notice Name	er, i i ii iviz, oi z, ooivi	A, IVIDA	
			305 South Illinois Stree	2 †		
	State the term remaining		Address			
	State the term remaining					
	List the contract number of					
	List the contract number of					
	any government contract					
			Belleville	IL	62220-2159	
			City	State	ZIP Code	
			Country			
	Amended herein: added					
2.68	State what the contract or					
2.00	lease is for and the nature	Participating Provider Agreement	Humana Inc. Name			
'	of the debtor's interest		Name			
			Notice Name			
	Ctata tha taum namaining		P.O. Box 1438 Address			
	State the term remaining		Addless			
	List the contract number of					
	any government contract					
			Louisville	KY	40201	
			City	State	ZIP Code	
			Country			

or: Petersen Health Properti	es, LLC	Case number (if know	_{vn):} 24-10541	
Name				
State what the contract of lease is for and the natu of the debtor's interest	re Commercial Account Right of Entry Agreement	Insight Communications Name	Midwest LLC (Charter	r)
		Notice Name		
			1- 100	
State the term remaining	ı	12238 Silicon Drive, Sui	te 129	
List the second second second				
List the contract numbe	·			
any government contrac	t			
		San Antonio	TX	78249
		City	State	ZIP Code
		Country		
70 State what the contract of lease is for and the natu	or Special Program Agreement for Rental and Capital	Joerns LLC		
of the debtor's interest	<u> </u>	Name		
		Attn Chief Strategy Office	er	
		Notice Name		
		2430 Whitehall Park Driv	ve, Suite 100	
State the term remaining		Address		
List the contract numbe	r of			
any government contrac	t			
		Charlotte	NC	28273
		City	State	ZIP Code
		Country		
Amended herein: adde	d			
State what the contract of		JourneyCare, Inc.		
Iease is for and the natu of the debtor's interest	re Agreement	Name		
		Attn President & CEO		
		Notice Name		
		405 Lake Zurich Rd.		
State the term remaining		Address		
List the contract numbe	rof			
any government contrac	t			
		Barrington	IL	60010
		City	State	ZIP Code
		Country		

ebtor: Petersen Health Properti		Case number (if known)		
Name				
2.72 State what the contract of lease is for and the natu	re Letter Agreement re: Hospice Services Agreement	JourneyCare, Inc.		
of the debtor's interest	Estat rigitation re. Fleepies Services rigitation	Name		
		Attn President & CEO		
		Notice Name		
		405 Lake Zurich Rd.		
State the term remaining		Address		
List the contract numbe	r of			
any government contract				
any government contrac				
		Barrington	IL	60010
		City	State	ZIP Code
		Country		
		•		
Amended herein: adde	d			
2.73 State what the contract of lease is for and the natu	or re Nursing Facility Services Agreement	JourneyCare, Inc.		
of the debtor's interest	Nuising Facility Services Agreement	Name		
		Attn President & CEO		
		Notice Name		
		405 Lake Zurich Rd.		
State the term remaining		Address		
Literature a contract accounts				
List the contract numbe				
any government contrac	et .			
		Barrington	IL	60010
		City	State	ZIP Code
		Country		
		Country		
Amended herein: adde	d			
State what the contract of	Nursing Facility Services Agreement Respite Care			
2.74 State what the contract of the debtaries interest	re Addendum	JourneyCare, Inc.		
of the debtor's interest		Name		
		Attn President & CEO Notice Name		
		405 Lake Zurich Rd.		
State the term remaining	1	Address		
				
List the contract numbe	r of			
any government contrac	et			
		Barrington	IL	60010
		City	State	ZIP Code
		-		
		Country		

				58 of 86	
Debtor:	Petersen Health Properties, L Name	LC ————————————————————————————————————	Case number (if kno	wn): 24-10541	
2.75	State what the contract or lease is for and the nature	Memorandum of Agreement	KEPRO		
	of the debtor's interest		Name		
			Notice Name		
			5700 Lombardo Center	Drive, Suite 100	
	State the term remaining		Address		
	List the contract number of				
	any government contract		<u> </u>		
			Seven Hills	ОН	44131
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.76	State what the contract or lease is for and the nature	Amended and Restated Therapy Services Agreement	Kindred Rehab Services	s, LLC	
	of the debtor's interest		Name		
			Attn VP, Finance		
			Rehab Care		
	State the term remaining		Address		
	-		680 South Fourth Stree	t	
	List the contract number of				
	any government contract				
			Louisville	KY	40202
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.77	State what the contract or lease is for and the nature	Agreement to Provide Laboratory Services to Long	LabOne, LLC		
	of the debtor's interest	Term Care Facilities	Name		
			c/o Quest Diagnostics Notice Name		
			500 Plaza Drive		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Secaucus	NJ	07094
			City	State	ZIP Code
			Country		

	Case	24-10443-TMH Doc 1473 Fi	iled 04/22/25 Page 59	9 of 86	
btor:	Petersen Health Properties, L	LC	Case number (if known)	24-10541	
	Name				
2.78	State what the contract or ease is for and the nature	Memorandum of Agreement	Livanta, LLC		
C	of the debtor's interest		Name		
			Madian Mana		
			Notice Name		
			10830 Guilford Rd, Suite 3	312	
,	State the term remaining		Address		
	list the contrast number of				
	List the contract number of				
•	any government contract				
			Annapolis Junction	MD	20701
				State	ZIP Code
			City	State	ZIP Code
			Country		
	Amended herein: added				
9	State what the contract or				
2.79	State what the contract or ease is for and the nature	Hospital Transfer Agreement	McDonough County Hosp	ital District	
0	of the debtor's interest		Name		
			Notice Name		
•			525 East Grant Street		
	State the term remaining		Address		
	otate the term remaining				
	List the contract number of				
	any government contract				
	, gere				
			Macomb	IL	61455
			City	State	ZIP Code
			C.i.y	Ciaio	2 0000
			Country		
	Amended herein: added				
9	State what the contract or				
	State what the contract or ease is for and the nature	Hospital Transfer Agreement	McDonough District Hospi	ital	
•	of the debtor's interest		Name		
			Notice Name		
			525 East Grant Street		
	State the term remaining		Address		
	otato tilo toriii romaning				
ı	List the contract number of				
	any government contract				
•	, goronimoni oomiaat				
			Macomb	IL	61455
			City	State	ZIP Code
			•		

	Case	24-10443-TMH Doc 1473 Fil	ed 04/22/25 Page(60 of 86	
ebtor:	Petersen Health Properties, L	LC	Case number (if kno	wn): 24-10541	
	Name				
2.81	State what the contract or ease is for and the nature	Master Contract for Biohazard Waste	MCKay's Haz-Mat Truck	k Service, Inc.	
c	of the debtor's interest		Name		
			N.C. N		
			Notice Name		
			PO Box 1444		
,	State the term remaining		Address		
	List the contract number of				
á	any government contract				
			Centralia	IL	62801
			City	State	ZIP Code
			Country		
	A consequent to a constant and a set				
	Amended herein: added				
2.82	State what the contract or		Makanan Madinal Con	niant Minananta Comple	la a
10	ease is for and the nature of the debtor's interest	Prime Vendor Product Supply Agreement	McKesson Medical-Sur	gicai iviinnesota Suppiy	inc.
	of the debtor 3 interest		. vae		
			Notice Name		
			8121 Tenth Avenue No	rth	
9	State the term remaining		Address		
ı	List the contract number of				
	any government contract				
`	any government contract				
			Golden Valley	MN	55427
			City	State	ZIP Code
			City	State	ZIF Code
			Country		
			,		
	Amended herein: added				
_					
2.83	State what the contract or ease is for and the nature	Addendum to Contract	Med Management Asso	ciates of Indiana, P.C.	
c	of the debtor's interest	- Additional to Contract	Name		
			Attn Dr. Deborah Theis	 Quality Assurance & I 	HIPPA Compliance
			Officer Notice Name		
			7272 Wurzbach Road,	#601	
,	State the term remaining		Address	7001	
•	State the term remaining				
	list the contract number of		-		
	List the contract number of				
6	any government contract				
			0 4 1	T)	70210
			San Antonio	TX	
			City	State	ZIP Code
			Country		

otor:	Petersen Health Properties, LI		d 04/22/25 Page (Case number (if know	o1 of 86 _{vn):} 24-10541	
_	Name				
^{2.84} i	State what the contract or ease is for and the nature	Psychiatry Services Agreement	Med Management Asso	ciates of Indiana, P.C.	
(of the debtor's interest		Name		
			Notice Name		
				: 004	
	Ctata tha tanna namainin n		7272 Wurzbach Rd., Su Address	ITE 601	
•	State the term remaining				
	List the contract number of				
	any government contract				
•	any government contract				
			San Antonio	TX	78240
			City	State	ZIP Code
			Oity	State	211 0000
			Country		
	Amended herein: added				
۵ a - S	State what the contract or				
	State what the contract or lease is for and the nature	Amendment to Contract	Medical Staffing Solution	ns, LLC	
(of the debtor's interest		Name		
			Notice Name		
			8601 N. Kentucky Ave,	Suite A	
:	State the term remaining		Address	outo 71	
	g				
	List the contract number of		-		
	any government contract				
	. , , ,				
			Evansville	IN	47725
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.86	State what the contract or lease is for and the nature	Assessment to Destancianal Comitoes Assessment	Medical Staffing Solution	ns II C	
	of the debtor's interest	Amendment to Professional Services Agreement	Name	110, 220	
			Notice Name		
			8601 N. Kentucky Ave,	Suite A	
;	State the term remaining		Address		
١	List the contract number of				
	any government contract				
			Evansville	<u>IN</u>	47725
			City	State	ZIP Code

btor: Pete	rsen Health Properties, Ll		d 04/22/25 Page Case number (# k	62 01 86 nown): 24-10541	
Name					
2.87 State v lease i	what the contract or is for and the nature debtor's interest	Attachment 1 to Professional Services Agreement	Medical Staffing Solut Name	ions, LLC	
or the	debtor 3 interest				
			Notice Name		
			8601 N. Kentucky Ave	e, Suite A	
State	the term remaining		Address		
List th	ne contract number of				
any g	overnment contract				
			Evansville	IN	47725
			City	State	ZIP Code
			Country		
Ame	ended herein: added				
2.88 State	what the contract or is for and the nature	Professional Services Agreement	Medical Staffing Solut	ions. LLC	
	debtor's interest	Tolessional dervices Agreement	Name		
			Attn Chief Executive C	Officer	
			Notice Name		
			9700 HWY 57N, Suite	Α	
State	the term remaining		Address		
List th	he contract number of				
any g	overnment contract				
			Evansville	<u>IN</u>	47725
			City	State	ZIP Code
			Country		
Ame	ended herein: added				
2.89 State v	what the contract or is for and the nature	Illinois Ancillary Provider/HCBS Agreement	Meridian Health Plan	of Illinois, Inc.	
of the	debtor's interest		Name		
			Notice Name		
			333 South Wabash Av	ve, Suitte 2900	
State	the term remaining		Address		
List th	he contract number of				
any g	overnment contract				
			Chicago	IL	60604
			City	State	ZIP Code

Debtor:			iled 04/22/25 Page Case number (if k	63 of 86	
2.90	Name State what the contract or lease is for and the nature		Michael Aberry MD		
2.90	lease is for and the nature of the debtor's interest	Medical Director Agreement	Michael Ahearn, MD Name		
			Notice Name		
			519 Elliott Street		
	State the term remaining		Address		
			Suite 1		
	List the contract number of				
	any government contract				
			Kewanee	<u>IL</u>	61443
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.91	State what the contract or lease is for and the nature	Facility Service Agreement	Midwest Post Acute C	are, PLLC	
	of the debtor's interest		Name		
			Attn Legal Departmen Notice Name	t	
			MPAC Healthcare		
	State the term remaining		Address		
			2045 W Grand Avenu	e Ste B #28354	
	List the contract number of				
	any government contract				
			Chicago	IL	60612-1577
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.92	State what the contract or				
2.32	lease is for and the nature of the debtor's interest	Facility Service Agreement	Midwest Post-Acute C	are, PLLC	
			Attn Legal Departmen	t	
			MPAC Healthcare		
	State the term remaining		Address		
			2045 W Grand Avenu	e Ste B #28354	
	List the contract number of				
	any government contract				
			Chicago	IL	60612-1577
			City	State	ZIP Code
			Country		

	Case	24-10443-TMH Doc 1473 F	iled 04/22/25 Page 6	64 of 86		
btor:	Petersen Health Properties, LI	LC	Case number (if know			
	Name					
2.93	State what the contract or ease is for and the nature	Provider Services Agreement	Molina Healthcare of Illinois, Inc, an Illinois Name Notice Name			
	of the debtor's interest	- To Tudo. Got Tigroomen.				
			2001 Butterfield Road, S	Suite 750		
	State the term remaining		Address			
	List the contract number of					
	any government contract					
			5		00545	
			Downers Grove	<u>IL</u>	60515	
			City	State	ZIP Code	
			Country			
			Country			
	Amended herein: added					
2.94 i	State what the contract or ease is for and the nature	Staffing Service Agreement	Nextaff Group, LLC			
	of the debtor's interest	<u> </u>	Name			
			Notice Name			
St			11101 Switzer Rd, Suite	110		
	State the term remaining		Address			
	List the contract number of					
•	any government contract					
			Overland Park	I/C	66210	
				KS	66210	
			City	State	ZIP Code	
			Country			
			Country			
	Amended herein: added					
	Note and at the accusance on					
2.95 <mark>ì</mark>	State what the contract or ease is for and the nature	Amendment of Agreement	NICL Laboratories			
	of the debtor's interest		Name			
			Attn General Manager			
			Notice Name			
			306 Era Drive			
,	State the term remaining		Address			
	List the contract number of					
,	any government contract					
			N. d			
			Northborrk	<u>IL</u>	60062	
			City	State	ZIP Code	

Debtor: Petersen Health Properti		Case number (if kno	65 Of 86 _{(wn):} 24-10541	
Name State what the contract of lease is for and the natu	or re Laboratory Services Agreement	NICL Laboratories		
of the debtor's interest		Attn General Manager Notice Name		
		306 Era Drive		
State the term remaining	9	Address		
List the contract numbe				
any government contrac	ot .			
		Northbrook	IL	60062
		City	State	ZIP Code
		Country		
Amended herein: adde	d			
2.97 State what the contract of lease is for and the natu	or re Addendum to Contract	Nurses on Calls, Inc.		
of the debtor's interest		Name		
		Notice Name		
		1475 Basswood Drive		
State the term remaining	g	Address		
List the contract numbe	r of			
any government contrac	ot			
		Bolingbrook	IL	60490
		City	State	ZIP Code
		Country		
Amended herein: adde	d			
2.98 State what the contract of lease is for and the natu	or re Agreement re: Staffing Services	Nurses on Calls, Inc.		
of the debtor's interest	rigicomonitie. Staming Corridos	Name		
		Notice Name		
		1475 Basswood Drive		
State the term remaining	g	Address		
List the contract numbe	r of			
any government contrac	et			
		Bolingbrook	IL	60490
		City	State	ZIP Code
		Country		

Name 2.99 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 Amended herein: added 2.100 State what the contract or lease is for and the nature of the debtor's interest Amendment to Contract Amendment to Contract Amendment to Contract Amendment to Contract Nurses on Calls, Inc. Name Notice Name 1475 Basswood Drive Amendment to Contract Nurses on Calls, Inc. Name Notice Name 1476 Basswood Drive Address List the contract number of any government contract	
of the debtor's interest Name Notice Name 1475 Basswood Drive	
State the term remaining List the contract number of any government contract Amended herein: added 2.100 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 Amendment to Contract Amendment to Contract Nurses on Calls, Inc. Name Notice Name 1475 Basswood Drive Address List the contract number of any government contract	
State the term remaining List the contract number of any government contract Amended herein: added State what the contract or lease is for and the nature of the debtor's interest Amendment to Contract	
List the contract number of any government contract Bolingbrook IL	
List the contract number of any government contract Bolingbrook IL	
Amended herein: added 2.100 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 Bolingbrook IL City State Country Nurses on Calls, Inc. Nurses on Calls, Inc. Notice Name 1475 Basswood Drive Address Address Address Address Country Nurses on Calls, Inc. Name 1475 Basswood Drive Address Address Country Nurses on Calls, Inc. Notice Name 1475 Basswood Drive Address Country Notice Name Country Coun	
Amended herein: added 2.100 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 Bolingbrook IL City State Country Nurses on Calls, Inc. Nurses on Calls, Inc. Notice Name 1475 Basswood Drive Address Address Address Address Country Nurses on Calls, Inc. Name 1475 Basswood Drive Address Address Country Nurses on Calls, Inc. Notice Name 1475 Basswood Drive Address Country Notice Name Country Coun	
Amended herein: added 2.100 State what the contract or lease is for and the nature of the debtor's interest Amendment to Contract Amendment to Contract Amendment to Contract Nurses on Calls, Inc. Name Notice Name 1475 Basswood Drive Address List the contract number of any government contract	
Amended herein: added 2.100 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 City State Country Nurses on Calls, Inc. Name Notice Name 1475 Basswood Drive Address	
Amended herein: added 2.100 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 City State Country Nurses on Calls, Inc. Name Notice Name 1475 Basswood Drive Address	
Amended herein: added 2.100 State what the contract or lease is for and the nature of the debtor's interest Amendment to Contract Amendment to Contract Nurses on Calls, Inc. Name Notice Name 1475 Basswood Drive Address List the contract number of any government contract	60490
Amended herein: added 2.100 State what the contract or lease is for and the nature of the debtor's interest Amendment to Contract Amendment to Contract Nurses on Calls, Inc. Name Notice Name 1475 Basswood Drive Address List the contract number of any government contract	ZIP Code
Amended herein: added 2.100 State what the contract or lease is for and the nature of the debtor's interest Amendment to Contract Amendment to Contract Nurses on Calls, Inc. Name Notice Name 1475 Basswood Drive Address List the contract number of any government contract	
2.100 State what the contract or lease is for and the nature of the debtor's interest Amendment to Contract Amendment to Contract Nurses on Calls, Inc. Name Notice Name 1475 Basswood Drive Address List the contract number of any government contract	
of the debtor's interest Name Notice Name 1475 Basswood Drive Address List the contract number of any government contract	
of the debtor's interest Name Notice Name 1475 Basswood Drive Address List the contract number of any government contract	
State the term remaining List the contract number of any government contract Notice Name 1475 Basswood Drive Address	
State the term remaining List the contract number of any government contract 1475 Basswood Drive Address	
State the term remaining List the contract number of any government contract Address	
List the contract number of any government contract	
any government contract	
any government contract	
Bolingbrook IL	60490
Bolingbrook IL City State	ZIP Code
Oily State	ZIF Code
Country	
Amended herein: added	
State what the contract or 2.101 least in fact and the nature ADDENIDUM TO CONTRACT OASIS MEDICAL SERVICES	
lease is for and the nature of the debtor's interest ADDENDUM TO CONTRACT OASIS MEDICAL SERVICES Name	
Notice Name	
PO Box 823473	
State the term remaining Address	
List the contract number of	
any government contract	
Philadelphia PA	19182-3473
City State	ZIP Code
Country	

D 1.				67 of 86	
Debtor:	Petersen Health Properties, L	LC	Case number (if kno	24-10541	
2.102	State what the contract or lease is for and the nature of the debtor's interest	Service Agreement	OASIS MEDICAL SER'	VICES	
2.102 S S L all S L all S L all S L all S S L all S S L all S					
			Notice Name		
	State the term remaining		PO Box 823473 Address		
	List the contract number of				
	any government contract		_		
			Philadelphia	PA	19182-3473
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.103	State what the contract or lease is for and the nature	Amendment No. 2 to Pharmacy Consultant Agreement	Omnicare		
	of the debtor's interest	Amendment No. 2 to Fharmacy Consultant Agreement	Name		
			Attn Legal Notice Name		
			One CVS Drive Mail Co	odo 1160	
	State the term remaining		Address	ode 1160	
	List the contract number of				
	any government contract		<u> </u>		
			Woonsocket	RI	<u>02895</u>
			City	State	ZIP Code
			Country		
	Amended herein: added				
2 104	State what the contract or		0		
	lease is for and the nature of the debtor's interest	Amendment No. 5 to Pharmacy Consultant Agreement	Omnicare Name		
			Attn Legal		
			Notice Name		
			One CVS Drive Mail Co	ode 1160	
	State the term remaining	-	Address		
	List the contract number of				
	any government contract		_		
			Woonsocket	RI	02895
			City	State	ZIP Code
			Country		
			Country		

or: Petersen Health Properties,	2 24-10443-1 MH Doc 1473 Filed (Case number (if kno	68 Of 86 _{own):} 24-10541	
Name State what the contract or lease is for and the nature	Amendment No. 6 to Pharmacy Products and Services Agreement	Omnicare		
of the debtor's interest		Name		
		Attn Legal		
		Notice Name		
		One CVS Drive Mail Co	ode 1160	
State the term remaining		Address		
List the contract number o	·			
any government contract				
		Woonsocket	RI	02895
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract or lease is for and the nature	Amendment to Pharmacy Consultant Agreement	Omnicare		
of the debtor's interest		Name		
		Attn Legal		
		Notice Name		
		One CVS Drive Mail Co	ode 1160	
State the term remaining		Address		
List the contract number of	<u> </u>			
any government contract				
		Woonsocket	RI	02895
		City	State	ZIP Code
		Country		
Amended herein: added				
O7 State what the contract or	Letter Amendment re: COVID-19 Vaccination	0		
of the debtor's interest	Distribution Services	Omnicare Name		
		Attn Legal		
		Notice Name		
		One CVS Drive Mail Co	ode 1160	
State the term remaining		Address		
List the contract number o	i			
any government contract		<u> </u>		
		Woonsocket	RI	02895
		City	State	ZIP Code
		Country		

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socket	RI	02895
	State	ZIP Code
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egal Name		
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VS Drive Mail Cod	de 1160	
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socket	RI	02895
	State	ZIP Code
,		
are Pharmacy of the	he Midwest, LLC dba	Omnicare of Kansa
Name		
Hickman Mills Driv	ve Suite 200	
	VO, GUILO 200	
s City	МО	64137
	State	ZIP Code
a	Name 0 Hickman Mills Driss as City	O Hickman Mills Drive, Suite 200 ss as City MO State

	•		
Amendment to Pharmacy Products and Services Agreement	City	the Midwest, LLC dba	Omnicare of Kansas
	Name		
	Notice Name		
	10400 Hickman Mills Dr	ive, Suite 200	
	Address		
	Kansas City	MO	64137
	City	State	ZIP Code
	Country		
Amendment to Pharmacy Consultant Agreement	Omnicare, Inc.		
	Address		
_	201 East Fourth Street		
	-		
	Cincinnati	ОН	45202
	City	State	ZIP Code
	Country		
Amendment to Pharmacy Products and Services	Omnicare, Inc.		
	Name		
	Attn General Counsel Notice Name		
	900 Omnicare Center		
	Address		
	201 East Fourth Street		
	-		
	Cincinnati	ОН	45202
	City	State	ZIP Code
	Country		
	Amendment to Pharmacy Products and Services Agreement Amendment to Pharmacy Consultant Agreement Amendment to Pharmacy Products and Services Agreement	Amendment to Pharmacy Products and Services Agreement Amendment to Pharmacy Products and Services Agreement Notice Name 10400 Hickman Mills Dr Address Kansas City City Country Country Amendment to Pharmacy Consultant Agreement Amendment to Pharmacy Consultant Agreement Amendment to Pharmacy Products and Services Agreement Amendment to Pharmacy Products and Services Agreement Amendment to Pharmacy Products and Services Agreement Cincinnati City Country Amendment to Pharmacy Products and Services Agreement Omnicare, Inc. Name Attn General Counsel Notice Name 900 Omnicare Center Address 201 East Fourth Street Cincinnati City City Country Country Country Country Country Cincinnati City City City Country Country Cincinnati City City City City Country Country Cincinnati City City City City City Country Country Cincinnati City City City City City City City Ci	Amendment to Pharmacy Products and Services Agreement Omnicare Pharmacy of the Midwest, LLC dba City Name Notice Name 10400 Hickman Mills Drive, Suite 200 Address Kansas City MO City State Country Amendment to Pharmacy Consultant Agreement Omnicare, Inc. Name Attn General Counsel Notice Name 900 Omnicare Center Address 201 East Fourth Street Amendment to Pharmacy Products and Services Agreement Amendment to Pharmacy Products and Services Agreement Omnicare, Inc. Name Cincinnati OH City State Country Omnicare, Inc. Name 201 East Fourth Street Omnicare, Inc. Name Attn General Counsel Notice Name 900 Omnicare Center Address 201 East Fourth Street

Ca	se 24-10443-TMH Doc 1473 File	ed 04/22/25 Page	71 of 86	
Debtor: Petersen Health Propertie	es, LLC	Case number (if kno		
Name State what the contract of lease is for and the naturof the debtor's interest	or re Pharmacy Consultant Agreement	Omnicare, Inc.		
		Attn General Counsel		
		Notice Name		
		900 Omnicare Center		
State the term remaining		Address		
List the contract numbe	r of	201 East Fourth Street		
any government contract				
any government contract	•			
		Cincinnati	ОН	45202
		City	State	ZIP Code
		Country		
Amended herein: adde	d			
2.115 State what the contract of lease is for and the nature	or 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	1	Address		
		201 East Fourth Street		
List the contract numbe	r of			
any government contrac	:t			
		Cincinnati	OH	45202
		City	State	ZIP Code
		Country		
		Country		
Amended herein: adde	d			
State what the contract of	or			
2.116 State what the contract of lease is for and the natural	re ADDENDUM TO CONTRACT	ONESTAFF MEDICAL,	LLC	
of the debtor's interest		Name		
		Notice Name		
		10802 Farnam Dr., Suit	e 101	
State the term remaining	J	Address		
List the contract number				
any government contrac	t :			
		Omaha	NE	60454
		Omaha		68154 ZIP Code
		City	State	ZIP Code
		Country		

				72 of 86	
Debtor:	Petersen Health Properties, LI Name	LC 	Case number (if know	vn): 24-10541	
2.117	State what the contract or lease is for and the nature of the debtor's interest	Staffing Service Agreement	OneStaff Medical, LLC		
,	or the debtor 3 interest		Hamo		
			Notice Name		
			10802 Farnam Dr., Ste.	101	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Omaha	NE	68154
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.118	State what the contract or lease is for and the nature	Professional Service Agreement	Pinnacle Wound Manag	ement Mid-West, LLC	
'	of the debtor's interest		Name Attn Daniel Lang		
			Notice Name		
			7901 4th St N, Suite 300)	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			St. Petersburg	FL	33702
			City	State	ZIP Code
			2.14		
			Country		
	Amended herein: added				
2.119	State what the contract or lease is for and the nature		Podiatry Plus PC		
	lease is for and the nature of the debtor's interest	Independent Contractor Agreement	Name		
			Notice Name		
			6560 West Higgins Ave		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Chicago	IL	60656
			City	State	ZIP Code
			Country		

			Filed 04/22/25 Page	73 of 86	
Debtor:		_C	Case number (if kno	own): 24-10541	
2.120	Name State what the contract or lease is for and the nature of the debtor's interest	Independent Contractor Agreement	Podiatry Plus, P.C.		
	of the deptor's interest		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		
	Amended herein: added				
	State what the contract or lease is for and the nature	Billing	Presto-X		
	of the debtor's interest	Dilling	Name		
			Notice Name		
			4521 Leavenworth Stre	et	
	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				
2.122	State what the contract or lease is for and the nature	Pest Net Online Agreement Addendum	Presto-X LLC		
	of the debtor's interest		Name Dan Ridenour - Central	Illinois / Indiana	
			Notice Name		
	State the term remaining		8 Henson Place Unit #6 Address) 	
	List the contract number of any government contract				
	any government contract				
			Champaign	IL	61820
			City	State	ZIP Code
			Country		

Cas	e 24-10443-TMH Doc 1473 File	ed 04/22/25 Page	74 of 86		
Debtor: Petersen Health Properties Name	, LLC	Case number (if kn	own): 24-10541		
2.123 State what the contract or lease is for and the nature of the debtor's interest	Receiving Hospital Transfer Agreement	Provena Hospitals, d/b	Provena Hospitals, d/b/a Provena St, Mary's Hospital		
		Notice Name			
		77 N, Airlite Street			
State the term remaining		Address			
List the contract number	of				
any government contract					
		Elgin	IL	60123	
		City	State	ZIP Code	
		Country			
Amended herein: added					
2.124 State what the contract or lease is for and the nature	Physician Services Agreement	Provider Vohra Post-A	cute Physicians		
of the debtor's interest		Name			
		Notice Name			
		3601 SW 160th Avenu	e, Suite 250		
State the term remaining		Address			
List the contract number	of				
any government contract					
		Minaman	El	22027	
		Miramar City	FL State	33027 ZIP Code	
		City	State	ZIP Code	
		Country			
Amended herein: added					
2.125 State what the contract or lease is for and the nature	Multi-Facility Supply and Services Agreement	Pulmonary Exchange,	Ltd. aka PEL/VIP		
of the debtor's interest		Attn Raymond Kalinsk Notice Name	у		
		9840 SW Hwy.			
State the term remaining		Address			
List the contract number of	of				
any government contract					
		Oak Lawn	IL	60453	
		City	State	ZIP Code	

			04/22/25 Page	75 of 86	
Debtor:	Petersen Health Properties, LI Name	LC	Case number (if kn	own): 24-10541	
2.126	State what the contract or lease is for and the nature of the debtor's interest	Service Agreement	RecoverCare, LLC		
	or the debtor 3 interest		Attn General Counsel		
			Notice Name		
			1920 Stanley Gault Pk	wy Suite 100	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Louisville	KY	40223
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.121	State what the contract or lease is for and the nature	Therapy Services Agreement		t, Inc. d/b/a RehabCare	
	of the debtor's interest		Name President, RehabCare		
			Notice Name		
			680 South Fourth Stree	et	
	State the term remaining		Address		
	List the contract would be of				
	List the contract number of any government contract				
	any government contract				
			Louisville	KY	40202
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.128	State what the contract or lease is for and the nature	Amended and Restated Therapy Services Agreement	RehabCare Group Eas	it. LLC	
	of the debtor's interest	Amended and Restated Therapy Dervices Agreement	Name		
			Attn VP, Finance Notice Name		
			680 South Fourth Stree	et	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Louisville	KY	40202
			City	State	ZIP Code
			Country		

Debtor:			d 04/22/25 Page 7 Case number (if know	76 of 86 _{vn):} 24-10541	
2.129	Name State what the contract or lease is for and the nature	Second Amended and Restated and Reaffirmed	BohohCaro Croup Foot		
2.120	lease is for and the nature of the debtor's interest	Guaranty Agreement	RehabCare Group East	, LLC	
			Attn Chief Financial Offi	cer	
			Notice Name		
			680 South Fourth Street		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Louisville	KY	40202
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.130	State what the contract or lease is for and the nature	Protocol and Agreement of Hospice Services	Sarah Bush Lincoln Hea	alth Center d/b/a Sarah	Bush Lincoln Hospice
	of the debtor's interest		Name		
			Attn Post Acute Care Di	rector	
				:	
	State the term remaining		Sarah Bush Lincoln Hos Address	spice	
	State the term remaining		1004 Health Center Driv	vo. Suito 202	
	List the contract number of			e, Juile 202	
	any government contract				
	any government contract				
			Mattoon	<u>IL</u>	61938
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.131	State what the contract or		Seasons Hospice, Inc. o	Nh/a Cassana Hasnica	9 Polliotivo Coro
	lease is for and the nature of the debtor's interest	General Inpatient Services Addendum	Name	i/b/a Seasons Hospice	& Falliative Care
			Attn Executive Director		
			Notice Name		
			606 Potter Rd.		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Des Plaines	IL	60016
			City	State	ZIP Code
			Country		

	Case	24-10443-TMH Doc 1473 Fil	led 04/22/25 Page	77 of 86	
Debtor:		LC	Case number (if kno	own): 24-10541	
2.132	Name State what the contract or lease is for and the nature of the debtor's interest	Nursing Facility Services Agreement	Seasons Hospice, Inc.	d/b/a Seasons Hospice	& Palliative Care
	or the depter of interest		Attn Executive Director		
			Notice Name		
			606 Potter Rd.		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Des Plaines	IL	60016
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.133	State what the contract or lease is for and the nature	Cooperative Agreement	Shawnee Alliance		
	of the debtor's interest	Cooperative Agreement	Name		
			Notice Name		
	State the term remaining		6355 Brandhorst Drive		
	otate the term remaining				
	List the contract number of				
	any government contract				
			Carterville	IL	62918-9802
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.134	State what the contract or lease is for and the nature	Cooperative Agreement	Shawnee Alliance for S	Seniors	
	of the debtor's interest	Cooperative Agreement	Name		
			Notice Magne		
			Notice Name		
	State the term remaining		6355 Brandhorst Drive		
	List the contract number of				
	any government contract				
			Cortor::!!!-		60040 0000
			Carterville	ILState	62918-9802 ZIP Code
			City	Sidie	ZIF COUE
			Country		

Case tor: Petersen Health Properties,		led 04/22/25 Page 78 Case number (if known)		
Name				
State what the contract or lease is for and the nature				
of the debtor's interest	Hospital Transfer Agreement	Sherman Name		
of the deptor's interest		Name		
		Notice Name		
		1425 N. Randall Road.		
State the term remaining		Address		
List the contract number of	f			
any government contract				
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
		Elgin	IL	60123
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract or	Amendment to Pharmaceutical Product Rebate			
30 lease is for and the nature	Agreement	Smith & Nephew, Inc.		
of the debtor's interest		Name		
		Attn Company Secretary		
		Notice Name		
		1450 E. Brooks Road		
State the term remaining		Address		
List the contract number of	•			
any government contract				
any government contract				
		Memphis	TN	38116
		City	State	ZIP Code
		Country		
Amended herein: added				
State what the contract or				
37 State what the contract or lease is for and the nature	Rebate Agreement	Smith & Nephew, Inc.		
of the debtor's interest		Name		
		Attn Company Secretary		
		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
		City	State	ZIP Code

	Case	24-10443-TMH Doc 1473 File	ed 04/22/25 Page 7	79 of 86	
Debtor:	Petersen Health Properties, L	LC	Case number (if know		
2.138	Name State what the contract or lease is for and the nature of the debtor's interest	EpicCare Link Site Level Agreement	Southern Illinois Hospita	l Services	
			Attention Rex P. Budde		
			Notice Name		
			1239 E. Main St.		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Carbondale	IL	62902
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.139	lease is for and the nature	Long Term Care Facility Agreement	Southern Illinois Hospita	l Services	
	of the debtor's interest		Name		
			Attn Managed Care Notice Name		
			1239 E. Main St		
	State the term remaining		Address		
	Ū		PO Box 3988		
	List the contract number of				
	any government contract				
			Carbondale	IL	62902-3988
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.140	State what the contract or lease is for and the nature	Agreement for Medical Director	Southern Illinois Medica	l Services, NFP	
	of the debtor's interest	- ig. como in	Name	-	
			John R. Daly, Vice Pres Notice Name	ident/General Counsel	
			1239 East Main Street		
	State the term remaining		Address		
	List the contract number of		PO Box 3988		
	any government contract				
			Carbondale	IL	62002 2000
			City	IL 	62902-3988 ZIP Code
			Country		

	Case	24-10443-TMH Doc 1473 File	ed 04/22/25 Page 8	30 of 86	
Debtor:	Petersen Health Properties, L	LC	Case number (if know		
2.141	lease is for allu tile flature	Medical Director Agreement	Springfield Clinic, LLP		
	of the debtor's interest		name		
			Notice Name		
			1025 S. 6th St.		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Springfield	IL	62794
			City	State	ZIP Code
			Country		
	Amended herein: added				
	State what the contract or				
2.142	lease is for and the nature of the debtor's interest	Service Agreement	Swisher Name		
			Notice Name		
			1602 Corporate Drive		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
	any government contract				
			Warrensburg	MO	64093
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.143	State what the contract or lease is for and the nature	Nursing Home Dialysis Transfer Agreement	Total Renal Care, Inc.		
	of the debtor's interest		Name		
			Attn Legal Counsel - Op Notice Name	erations	
			c/o DaVita Inc.		
	State the term remaining		Address		
			601 Hawaii St.		
	List the contract number of				
	any government contract				
			El Segundo	CA	90245
			City	State	ZIP Code
			Country		
			Country		

Debtor:			ed 04/22/25 Page Case number (if kr	81 Of 86 nown): 24-10541	
	Name		<u> </u>		
2.144	State what the contract or lease is for and the nature of the debtor's interest	BTN Service Agreement	United Communication	n Systems, Inc. d/b/a Cal	l One
	or the debter o interest				
			Notice Name		
			123 North Wacker Floo	or 7	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Chicago	<u>IL</u>	60606
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.145	State what the contract or lease is for and the nature	Hospital Transfer Agreement	Valley West Hospital		
	of the debtor's interest		Name		
			Notice Name		
			11 East Pleasant Aver	nue	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Sandwich	IL	60548
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.146	State what the contract or lease is for and the nature	Agreement for Nursing Facility, Inpatient and Inpatient Respite Services	Vitas Healthcare Corp	oration of Illinois	
	of the debtor's interest	inpatient (Yespite Gervices	Name		
			Attn General Manager		
			Notice Name		
			105 Marquette Street S	Suite A	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			LaSalle	IL	61301
			City	State	ZIP Code
			Country		
			,		

			ed 04/22/25 Page	82 of 86	
Debtor:	Petersen Health Properties, L	LC	Case number (if k	nown): 24-10541	
2.147	State what the contract or lease is for and the nature	Mutual Aid Agreement	Wesley Village		
	of the debtor's interest		Name	miniatratar	
			Shelly Ward, CEO/Ad Notice Name	ministrator	
			1200 E. Grant St.,		
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Macomb	<u>IL</u>	61455
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.148	State what the contract or lease is for and the nature of the debtor's interest	Addendum to Contract Between Staffing Agency and Nursing Facility	Westway Staffing Sen	vices, Inc.	
	of the debtor's interest		Attn President/CEO		
			Notice Name		
			500 City Parkway Wes	st, Suite 130	
	State the term remaining		Address		
	List the contract number of				
	List the contract number of				
	any government contract				
			Orange	CA	92868
			City	State	ZIP Code
			Country		
	Amended herein: added				
2.149	State what the contract or lease is for and the nature	A management for Complemental Chaffing A management	Westway Staffing Ser	vices Inc	
	of the debtor's interest	Agreement for Supplemental Staffing Agencies	Name Name	V1000, 1110.	
			Attn President/CEO Notice Name		
			500 City Parkway Wes	st. Suite 130	
	State the term remaining		Address		
	List the contract number of				
	any government contract				
			Orange	CA	92868
			City	State	ZIP Code
			Country		

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 83 of 86

Debtor: Petersen Health Properties,	LLC	Case number (##		
Name State what the contract or lease is for and the nature	Amendment to Contract Between Staffing Agency and	— Westway Staffing Ser	vices Inc	
of the debtor's interest	Nursing Facility	Name	VICCO, IIIC.	
		Attn President/CEO		
		Notice Name		
		500 City Parkway We	st. Suite 130	
State the term remaining		Address		
State the term remaining				
List the contract number of	f			
any government contract				
		Orange	CA	92868
		City	State	ZIP Code
		C.i.y	State	0000
		Country		
Amended herein: added				
2.151 State what the contract or lease is for and the nature	CNE O tradition Birtheir Comings Assessed	WSKC Dialysis Services, Inc. d/b/a Aurora Dialysis Center		
of the debtor's interest	SNF Outpatient Dialysis Services Agreement	Name	505, IIIO. 0/5/a / (0101a 51a	nyolo Ochici
		Attn Jenny Lowe, Area Man		
		Notice Name		
		455 Mercy Lane		
State the term remaining		Address		
List the contract number o	f			
any government contract				
		Aurora	<u> </u> L	60506
		City	State	ZIP Code
		Country		
		Odulitiy		

Case 24-10443-TMH Doc 1473 Filed 04/22/25 Page 84 of 86

Fill in this information to identify the case:
Debtor Name: In re : Petersen Health Properties, LLC
United States Bankruptcy Court for the: District of Delaware
Case number (if known): 24-10541 (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.

D	Declaration and signature							
ind	vidual serv	the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another dual serving as a representative of the debtor in this case.						
I na	ive examin	ed the inforn	mation in the documents checked below and I have a reasonable belief that the information is true and correct:					
	Schedule A/B: Assets–Real and Personal Property (Official Form 206A/B)							
	Schedule	le D: Creditors Who Have Claims Secured by Property (Official Form 206D)						
	Schedule	e E/F: Credito	ors Who Have Unsecured Claims (Official Form 206E/F)					
	Schedule	G: Executo	Executory Contracts and Unexpired Leases (Official Form 206G)					
	Schedule H: Codebtors (Official Form 206H)							
	☐ Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)							
☑	Amended Schedule 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 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)							
	Other document that requires a declaration							
l de	eclare unde	lare under penalty of perjury that the foregoing is true and correct.						
Exe	Executed on 04/22/2025		5 ★ / s / David R. Campbell					
		MM / DD / Y	YYYY Signature of individual signing on behalf of debtor	_				
			David R. Campbell					
			Printed name					
			Authorized Signatory					
			Position or relationship to debtor					

In re: Petersen Health Properties, LLC Case No. 24-10541

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

	Current value of	
Other property of any kind not already listed	debtor's interest	Amendment
Inter Company Loan - Mark Petersen	<u></u>	Amended herein - added
Inter Company Loan - Petersen Companies LLC	\$1,795,836.65	Amended herein - added
Inter Company Loan - Petersen Health Operations, LLC	\$3,276,180.68	Amended herein - added
Inter Company Loan - Petersen Hospitality, LLC	\$334,000.00	Amended herein - added
Inter Company Loan - Petersen Hotels, LLC	\$2,276,353.00	Amended herein - added
Inter Company Loan - Plaza West Development, LLC	\$1,200,000.00	Amended herein - added
Inter Company Loan - Twenty Four Corp, LLC	\$65,000.00	Amended herein - added
TOTAL	: \$8,964,235.33	

EXHIBIT B

Amended Statements

N/A