B1 (Official Form 1)(04/13)								
United	States Bank District of Ar		court				Voluntary	Petition
Name of Debtor (if individual, enter Last, First H & L Medical Specialist, Inc.	, Middle):		Name	of Joint De	btor (Spouse)) (Last, First, 1	Middle):	
All Other Names used by the Debtor in the last (include married, maiden, and trade names):	8 years					oint Debtor in trade names):	the last 8 years	
Last four digits of Soc. Sec. or Individual-Taxpe (if more than one, state all) 86-0830208	ayer I.D. (ITIN)/Com	plete EIN		our digits of		· Individual-Ta	axpayer I.D. (ITIN) N	lo./Complete EIN
Street Address of Debtor (No. and Street, City, 3014 N. Hayden Road #103 Scottsdale, AZ	and State):		Street	Address of	Joint Debtor	(No. and Stre	et, City, and State):	
County of Residence or of the Principal Place o		ZIP Code 85251	Count	v of Reside	nce or of the	Principal Plac	ee of Business:	ZIP Code
Maricopa	i Business.		Count	y of Reside	nee or or the	i inicipai i iac	e of Business.	
Mailing Address of Debtor (if different from str	eet address):		Mailin	g Address	of Joint Debte	or (if different	from street address)	;
	Г	ZIP Code	1					ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	r							
Type of Debtor	Nature	of Business			Chapter	of Bankrupt	cy Code Under Whi	ich
(Form of Organization) (Check one box) ☐ Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Health Care Bu Single Asset Re in 11 U.S.C. § Railroad Stockbroker Commodity Bre Clearing Bank	eal Estate as de 101 (51B)	efined	☐ Chapte ☐ Chapte ☐ Chapte ☐ Chapte ☐ Chapte	er 7 er 9 er 11 er 12	☐ Cha of a ☐ Cha of a	ed (Check one box) Apter 15 Petition for I Foreign Main Proceupter 15 Petition for I Foreign Nonmain Proceupter	eding Recognition
Chapter 15 Debtors Country of debtor's center of main interests:	Tax-Exe	mpt Entity		□ Dobto o		(Check	one box)	o one maioremily
Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Debtor is a tax-exunder Title 26 of Code (the Interna	the United State	s	defined "incurr	•		busin	s are primarily ness debts.
Filing Fee (Check one box Full Filing Fee attached Filing Fee to be paid in installments (applicable to attach signed application for the court's considerat debtor is unable to pay fee except in installments. Form 3A. Filing Fee waiver requested (applicable to chapter attach signed application for the court's considerat	individuals only). Must ion certifying that the Rule 1006(b). See Offic 7 individuals only). Mu	Deb Check if:	otor is a snotor is not otor's aggraless than Sapplicable lan is beingeptances	regate noncor 62,490,925 (as boxes: ag filed with of the plan w	debtor as defin ness debtor as d ntingent liquida amount subject this petition.	ated debts (exclu to adjustment o		ee years thereafter).
Statistical/Administrative Information		III de	ccordance	with 11 C.S	.e. § 1120(0).	THIS S	SPACE IS FOR COURT	USE ONLY
 Debtor estimates that funds will be available Debtor estimates that, after any exempt properthere will be no funds available for distribut 	erty is excluded and	administrative		es paid,				
Estimated Number of Creditors	1,000- 5,001- 5,000 10,000] 5,001- 0,000	50,001- 100,000	OVER 100,000			
Estimated Assets So to \$50,001 to \$100,001 to \$500,001 to \$500,000 to \$500,000 million	\$1,000,001 \$10,000,001 to \$10 to \$50 million million	to \$100 to] 100,000,001 \$500 illion	\$500,000,001 to \$1 billion	More than \$1 billion			
Estimated Liabilities	\$1,000,001 \$10,000,001 to \$10 to \$50] 100,000,001 \$500	\$500,000,001 to \$1 billion	More than			

B1 (Official For	rm 1)(04/13)		Page 2
Voluntar	y Petition	Name of Debtor(s): H & L Medical Specia	alist. Inc.
(This page mu	ast be completed and filed in every case)	<u> </u>	
	All Prior Bankruptcy Cases Filed Within Las	t 8 Years (If more than two,	attach additional sheet)
Location Where Filed:	- None -	Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pe	nding Bankruptcy Case Filed by any Spouse, Partner, or	Affiliate of this Debtor (If 1	more than one, attach additional sheet)
Name of Debt - None -	or:	Case Number:	Date Filed:
District:		Relationship:	Judge:
forms 10K a pursuant to S and is reque	Exhibit A Deleted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.) A is attached and made a part of this petition.	I, the attorney for the petition have informed the petitioner 12, or 13 of title 11, United 3	
	Exh	ibit C	
	or own or have possession of any property that poses or is alleged to Exhibit C is attached and made a part of this petition.	pose a threat of imminent and id	dentifiable harm to public health or safety?
☐ Exhibit If this is a join	leted by every individual debtor. If a joint petition is filed, ea D completed and signed by the debtor is attached and made	a part of this petition.	
	Information Regardin	ng the Debtor - Venue	
	(Check any ap	_	
•	Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for	al place of business, or princi	ipal assets in this District for 180 ys than in any other District.
	There is a bankruptcy case concerning debtor's affiliate, gr	eneral partner, or partnership	pending in this District.
	Debtor is a debtor in a foreign proceeding and has its print this District, or has no principal place of business or assets proceeding [in a federal or state court] in this District, or the sought in this District.	s in the United States but is a	defendant in an action or
	Certification by a Debtor Who Reside (Check all app		l Property
	Landlord has a judgment against the debtor for possession	of debtor's residence. (If box	checked, complete the following.)
	(Name of landlord that obtained judgment)		
	(Address of landlord)		
	Debtor claims that under applicable nonbankruptcy law, the		
	the entire monetary default that gave rise to the judgment. Debtor has included with this petition the deposit with the after the filing of the petition.		_
	Debtor certifies that he/she has served the Landlord with t	his certification. (11 U.S.C. §	362(l)). 05/22/14/16:50:52

B1 (Official Form 1)(04/13) Page 3

Voluntary Petition

(This page must be completed and filed in every case)

Name of Debtor(s):

H & L Medical Specialist, Inc.

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Debtor

X

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of Attorney*

X /s/ Cindy L. Greene

Signature of Attorney for Debtor(s)

Cindy L. Greene 27001

Printed Name of Attorney for Debtor(s)

Carmichael & Powell, P.C.

Firm Name

7301 N. 16th Street Suite 103 Phoenix, AZ 85020

Address

Email: c.greene@cplawfirm.com

(602) 861-0777 Fax: (602) 870-0296

Telephone Number

May 22, 2014

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Herbert Greenbeck

Signature of Authorized Individual

Herbert Greenbeck

Printed Name of Authorized Individual

President

Title of Authorized Individual

May 22, 2014

Date

Signatures

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

 \mathbf{v}

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

In re	H & L Medical Specialist, Inc.		Case No.	
		Debtor(s)	Chapter	11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
• •		, ,	, ,	, ,
Name of creditor and complete	Name, telephone number and complete	Nature of claim (trade	Indicate if claim is	Amount of claim
mailing address including zip	mailing address, including zip code, of	debt, bank loan,	contingent,	[if secured, also
code	employee, agent, or department of creditor	government contract,	unliquidated,	state value of
	familiar with claim who may be contacted	etc.)	disputed, or	security]
			subject to setoff	
ADP	ADP	Payroll taxes		11,787.82
7000 E. Village Drive	7000 E. Village Drive			
Whittier, CA 90606	Whittier, CA 90606			
American Express	American Express	Credit card		9,846.26
PO Box 0001	PO Box 0001			
Los Angeles, CA 90096-8000	Los Angeles, CA 90096-8000			
Apple Medical	Apple Medical	Commissions		115,000.00
7007 E. Fifth Avenue	7007 E. Fifth Avenue			
Scottsdale, AZ 85251	Scottsdale, AZ 85251			
Boardroom Suites	Boardroom Suites	Business Ioan		22,020.00
8426 E. Shea Blvd	8426 E. Shea Blvd			
Scottsdale, AZ 85260	Scottsdale, AZ 85260			
Chase	Chase	Business credit		26,553.00
PO Box 15123	PO Box 15123	card		
Wilmington, DE 19850-5123	Wilmington, DE 19850-5123			
Citi Business	Citi Business	Credit card		10,564.81
PO Box 6235	PO Box 6235			'
Sioux Falls, SD 57117-6235	Sioux Falls, SD 57117-6235			
Euler Hermes Collections	Euler Hermes Collections North	Medical Depot, Inc.		21,498.06
North America	America	' '		'
600 S. 7th Street	600 S. 7th Street			
Louisville, KY 40203	Louisville, KY 40203			
Financial Pacific	Financial Pacific	Inventory		85,975.14
3455 S. 344th Way, Ste 300	3455 S. 344th Way, Ste 300	•		'
Auburn, WA 98001-9546	Auburn, WA 98001-9546			
Great Western Bank	Great Western Bank	Factoring		332,918.00
1721 N. Arizona Avenue	1721 N. Arizona Avenue	receivables		, , , , , , , , , , , , , , , , , , , ,
Chandler, AZ 85225	Chandler, AZ 85225			
IOU Central, Inc.	IOU Central, Inc.	Commercial		22,000.00
c/o Joyce Childers, LLP	c/o Joyce Childers, LLP	Promissory Note		,
PO Box 550291	PO Box 550291	,		
Atlanta, GA 30355	Atlanta, GA 30355			
Kenco Equipment Lease	Kenco Equipment Lease	Inventory		21,745.15
PO Box 220	PO Box 220			
Tualatin, OR 97062	Tualatin, OR 97062			

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Best Case Bankruptcy

Case No.

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured, also state value of security]
Key Equipment 11030 Circle Point Road Broomfield, CO 80020	Key Equipment 11030 Circle Point Road Broomfield, CO 80020	Inventory		24,601.36
Medline/CKB Firm 30 N. Lasalle St #1520 Chicago, IL 60602	Medline/CKB Firm 30 N. Lasalle St #1520 Chicago, IL 60602	Inventory		6,957.04
Neb Group 9363 E. Sandy Vista Drive Scottsdale, AZ 85260	Neb Group 9363 E. Sandy Vista Drive Scottsdale, AZ 85260	Commissions		156,300.00
Philips Respironics PO Box 405740 Atlanta, GA 30384-5740	Philips Respironics PO Box 405740 Atlanta, GA 30384-5740	Inventory		10,963.90
Pro Consulting Services, Inc. PO Box 66510 Houston, TX 77266-6510	Pro Consulting Services, Inc. PO Box 66510 Houston, TX 77266-6510	Wright Express		13,665.55
Ryan, Rapp & Underwood 3200 N. Central Avenue Phoenix, AZ 85012-2424	Ryan, Rapp & Underwood 3200 N. Central Avenue Phoenix, AZ 85012-2424	Legal services		10,337.00
The Foothills Bank c/o Garcia, Hengl, Kinsey & Villarreal 241 S. Main Street Yuma, AZ 85364	The Foothills Bank c/o Garcia, Hengl, Kinsey & Villarreal 241 S. Main Street Yuma, AZ 85364	Stipulated Judgment	Disputed	1,334,248.50
The Foothills Bank c/o Garcia, Hengl, Kinsey & Villarreal 241 S. Main Street Yuma, AZ 85364	The Foothills Bank c/o Garcia, Hengl, Kinsey & Villarreal 241 S. Main Street Yuma, AZ 85364	Deficiency Note	Disputed	325,000.00
Wright Express PO Box 66510 Houston, TX 77266-6510	Wright Express PO Box 66510 Houston, TX 77266-6510	Gas for vehicles		13,665.55

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date	May 22, 2014	Signature	/s/ Herbert Greenbeck
		•	Herbert Greenbeck
			President

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

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Best Case Bankruptcy

In re	H & L Medical Specialist, Inc.		Case No.	
	·	Debtor	,	
			Chapter	11

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	606,984.00		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	4		568,288.69	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	5		2,591,335.08	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	No	0			N/A
J - Current Expenditures of Individual Debtor(s)	No	0			N/A
Total Number of Sheets of ALL Schedu	ıles	18			
	To	otal Assets	606,984.00		
		l	Total Liabilities	3,159,623.77	

_	H & L Medical Specialist, Inc.		Case No.	
		Debtor	Chapter	11
	STATISTICAL SUMMARY OF CERTAIN	LIABILITIES AN	ND RELATED DA	TA (28 U.S.C. § 1
If a	you are an individual debtor whose debts are primarily consum case under chapter 7, 11 or 13, you must report all information	er debts, as defined in § requested below.	101(8) of the Bankruptcy	Code (11 U.S.C.§ 101(8
	☐ Check this box if you are an individual debtor whose debts report any information here.	are NOT primarily cons	umer debts. You are not re	equired to
Γl	his information is for statistical purposes only under 28 U.S.	C. § 159.		
Sı	ummarize the following types of liabilities, as reported in the	Schedules, and total th	em.	
,	Type of Liability	Amount		
]	Domestic Support Obligations (from Schedule E)			
	Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)			
	Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)			
;	Student Loan Obligations (from Schedule F)			
]	Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E			
(Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)			
	TOTAL			
;	State the following:			
7	Average Income (from Schedule I, Line 12)			
	Average Expenses (from Schedule J, Line 22)			
	Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)			
	State the following:			
т	Total from Schedule D, "UNSECURED PORTION, IF ANY" column			
-	2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column			
	3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column			
4	4. Total from Schedule F			
	5. Total of non-priority unsecured debt (sum of 1, 3, and 4)			

101(8)), filing

In re	H & L Medical Specialist, Inc.	Case No.	
_	• •		
		Debtor	

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Current Value of Husband, Debtor's Interest in Wife, Nature of Debtor's Amount of Description and Location of Property Property, without Interest in Property Joint, or Secured Claim Deducting any Secured Claim or Exemption Community

None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

Entered 05/22/14 16:59:52

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Case No.		

Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

	Type of Property	N O Descript E	tion and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1.	Cash on hand	x			
2.	Checking, savings or other financial accounts, certificates of deposit, or	Chase checking acc	t ending in 2510	-	10.00
	shares in banks, savings and loan, thrift, building and loan, and	Foothills Business of	checking acct ending in 0019	-	250.00
	homestead associations, or credit unions, brokerage houses, or cooperatives.	Colorado Business	checking account	-	20,000.00
3.	Security deposits with public utilities, telephone companies, landlords, and others.	x			
4.	Household goods and furnishings, including audio, video, and computer equipment.	x			
5.	Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	x			
6.	Wearing apparel.	x			
7.	Furs and jewelry.	x			
8.	Firearms and sports, photographic, and other hobby equipment.	x			
9.	Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	x			
10.	Annuities. Itemize and name each issuer.	x			

Sub-Total >	20,260.00
(Total of this page)	

3 continuation sheets attached to the Schedule of Personal Property

In re H & L Medical Specialist, Inc.

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Propert	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
 Government and corporate bonds and other negotiable and nonnegotiable instruments. 	X			
16. Accounts receivable.	Accounts Re	ceivable	-	267,305.50
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars				
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	x			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
			Sub-Total (Total of this page)	al > 267,305.50

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

In re H & L Medical Specialist, Inc.

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

	Type of Property	N O Description and Location of Property E	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22.	Patents, copyrights, and other intellectual property. Give particulars.	Х		
23.	Licenses, franchises, and other general intangibles. Give particulars.	Transaction Privilege Tax License-City of Scottsdale	-	0.00
	particulars.	Insurance contracts	-	Unknown
24.	Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X		
25.	Automobiles, trucks, trailers, and other vehicles and accessories.	2011 Chevrolet van-142,000 miles	-	8,649.00
	other venicles and accessories.	1998 Chevrolet Astro van- 350,000 miles	-	1,000.00
		2009 Chevrolet van- 160,000 miles	-	7,389.00
26.	Boats, motors, and accessories.	x		
27.	Aircraft and accessories.	x		
28.	Office equipment, furnishings, and supplies.	4 Dell Optiplex 360 computers 1 Compact Presario computer 1 Dell Vostro computer 1 Dell Optiplex GX260 computer 2 Dell Vostro 200 computer 1 Dell Dimension 3000 (old system) 1 Sharp MX 4100N printer 1 Konica Minolta Page Pro 5650EN printer 1 HP PSC 2510 Photo Smart all in one printer 1 HP Photo Smart 7760 printer 11 Inter-Tel 1250 phones 1 Dell Poweredge 1800 Server 1 Pitney Bowes D1200 (folding machine) 1 Pitney Bowes DM225 (stamp machine) 1 Captaris Alchemy, Alchemy MFP Module (scanning system) 1 Medisoft Network Professional Version 15 (billir software)	- ng	12,000.00
29.	Machinery, fixtures, equipment, and supplies used in business.	Medical equipment	-	290,380.50

Sub-Total > 319,418.50 (Total of this page)

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

H & L Medical Specialist, Inc. In re

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 0.00 (Total of this page)

Total > 606,984.00

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)
Filed 05/22/14 Entered 05/22/14 16:59:52 Desc

In re	H & L Medical Specialist, Inc.	Case No

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

Debtor

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBHOR	Hu H W J C	sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	NT I NG E	LLQULD	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.			2011 Chevrolet van-142,000 miles	╹	A T E D			
Ally Financial PO Box 380902 Minneapolis, MN 55438-0902		-			D			
			Value \$ 8,649.00	Ш			12,967.27	4,318.27
Account No.			2009 Chevrolet van- 160,000 miles					
Ally Financial PO Box 380902 Minneapolis, MN 55438-0902		-						
			Value \$ 7,389.00	Ш			8,121.60	732.60
Account No.								
Bank of America PO Box 84448 Seattle, WA 98124		-	Value \$ Unknown			x	Unknown	Unknown
Account No. xx2946	_		UCC Security Agreement	Н			Ulkilowii	Olikilowii
DeVilbiss Healthcare LLC 100 DeVilbiss Drive Somerset, PA 15501		_	Inventory					
			Value \$ Unknown				13,460.80	Unknown
3 continuation sheets attached			S (Total of th	ubto			34,549.67	5,050.87

In re	H & L Medical Specialist, Inc.	Case No.	
		Debtor	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Hu H W J C	Stand, Wife, Joint, or Community				D SPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.					Т	A T E D			
Falcon Leasing 183 Cedar Drive Foley, MN 56329		-	Value \$ Unknow			D	x		
Account No.	+	H	Value \$ Unknow UCC Security Agreement	vn			-	Unknown	Unknown
George W. Simmons 4619 E. Rowell Road Phoenix, AZ 85050		-	Equipment						
			Value \$ 5,000.0	00				5,000.00	0.00
Account No. Invacare Corporation 1320 Taylor Street Elyria, OH 44035		-	UCC Security Agreement Inventory						
			Value \$ Unknow	vn				226,565.00	Unknown
Account No. Key Equipment Finance Inc. 1000 South McCaslin Blvd Superior, CO 80027		-	UCC Security Agreement Inventory Value \$ Unknown	vn				14,146.00	Unknown
Account No.		T	UCC Security Agreement					,	
Pawnee Leasing Corporation 700 Centre Avenue Fort Collins, CO 80526		-	Inventory						
			Value \$ Unknow	vn				30,746.25	Unknown
Sheet <u>1</u> of <u>3</u> continuation sheets at Schedule of Creditors Holding Secured Clair		d to		S otal of th	ubto iis p			276,457.25	0.00

In re	H & L Medical Specialist, Inc.	Case No.	
		Debtor	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	Hu H V J	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	COZH-ZGEZ	UNLIQUIDAT	ロヨーのロコロロ	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.				╹	T E D			
Rhino Services 245 Townpark Dr, Ste 400 Kennesaw, GA 30144		-	Value \$ Unknown		<u> </u>	x	Unknown	Unknown
Account No.	t	H	UCC Security Agreement	П				
Sunrise Medical 7477 E. Dry Creek Parkway Longmont, CO 80503		-	Inventory				54 000 77	Halmann.
Account No.	╁	<u> </u>	Value \$ Unknown	H			51,303.77	Unknown
Synergy Resources 1310 Madrid St, Ste. 106 Marshall, MN 56258		-				x		
	╀	_	Value \$ Unknown	Н			Unknown	Unknown
TCF Equipment Finance, Inc. 1111 W. San Marnan Waterloo, IA 50701		-	Inventory					
A account No	╀	-	Value \$ Unknown UCC Security Agreement	Н			101,208.00	Unknown
Team Funding Solutions 5351 Thunder Creek Rd Austin, TX 78759		-	Inventory					
			Value \$ Unknown				22,731.00	Unknown
Sheet 2 of 3 continuation sheets atta		d to	S (Total of the	ubto			175,242.77	0.00

In re	H & L Medical Specialist, Inc.	Case No	
-		Debtor	

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR	NATURE OF LIEN, AND DESCRIPTION AND VALUE	Zm0ZZ0U	H>U-CO-rzc	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No.		UCC Security Agreement	Ť	HD	İ		
Vendor Lease Management Group 1719 Route 10 E. Ste 306 Parsippany, NJ 07054	-	Inventory		D			
		Value \$ Unknown				54,447.00	Unknown
Account No.		UCC Security Agreement					
VGM Financial Services 1111 W. San Marnan Waterloo, IA 50701	-	Inventory					
		Value \$ Unknown				871.00	Unknown
Account No.		UCC Security Agreement					
Wells Fargo Bank Sixth and Marquette Minneapolis, MN 55479	-	Inventory			x		
		Value \$ Unknown				26,721.00	Unknown
Account No.		Value \$					
Account No.	+	, and \$	H		H		
		Value \$					
Sheet 3 of 3 continuation sheets attack	ned 1	O .	Subt			82,039.00	0.00
Schedule of Creditors Holding Secured Claims		(Total of t			ŀ		
		(Report on Summary of So		ota ule	- 1	568,288.69	5,050.87

In re	HRI	Madica

H & L Medical Specialist, Inc.

Case No.

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority

sted on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total lso on the Statistical Summary of Certain Liabilities and Related Data.
Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to riority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this otal also on the Statistical Summary of Certain Liabilities and Related Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
Domestic support obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative f such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a rustee or the order for relief. 11 U.S.C. § 507(a)(3).
Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales epresentatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).
Contributions to employee benefit plans
Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busines

whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5)

☐ Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

■ Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re H & L Medical Specialist, Inc.

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY Husband, Wife, Joint, or Community AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, ODEBTOR ONTINGENT NLIQUIDATED S P U T E D AND MAILING ADDRESS Н DATE CLAIM WAS INCURRED **AMOUNT** INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER J С (See instructions.) **Notice Only** Account No. **Arizona Department of Revenue** 0.00 1600 Monroe 7th Floor Phoenix, AZ 85007 0.00 0.00 **Notice Only** Account No. Internal Revenue Service 0.00 P.O. Box 7346 Philadelphia, PA 19101 0.00 0.00 Account No. Account No. Account No. Subtotal 0.00 Sheet <u>1</u> of <u>1</u> continuation sheets attached to (Total of this page) 0.00 0.00 Schedule of Creditors Holding Unsecured Priority Claims Total 0.00

(Report on Summary of Schedules)

0.00

In re	H & L Medical Specialist, Inc.	Case No.	_
_		Debtor	

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

			1				_
CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Hu H C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGEN	UNLIQUIDAT	DISPUTED	AMOUNT OF CLAIM
Account No.			Payroll taxes	Ť	T E D		
ADP 7000 E. Village Drive Whittier, CA 90606		-			D		11,787.82
Account No.	t		Credit card	+	\vdash	H	
American Express PO Box 0001 Los Angeles, CA 90096-8000		-					9,846.26
Account No.			Commissions	T		T	
Apple Medical 7007 E. Fifth Avenue Scottsdale, AZ 85251		-					115,000.00
Account No.	╁		Business Ioan	\vdash	\vdash	├	110,000.00
Boardroom Suites 8426 E. Shea Blvd Scottsdale, AZ 85260	-	-					22.020.00
				上	L	L	22,020.00
_4 continuation sheets attached			(Total of t	Subt his j			158,654.08

In re	H & L Medical Specialist, Inc.	Case No	
		Debtor	

CREDITOR'S NAME,	ļç	Hu	sband, Wife, Joint, or Community	Č	Ü	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER	CODEBTOR	H W J	CONSIDERATION FOR CLAIM. IF CLAIM	CONFLX	UNLLQU		AMOUNT OF CLAIM
(See instructions above.)	O R	c	IS SUBJECT TO SETOFF, SO STATE.	N G E N T	Ĭ D	E D	AMOUNT OF CLAIM
Account No.			Business credit card	T N	DATED		
Chan					D		
Chase PO Box 15123		_					
Wilmington, DE 19850-5123							
							26,553.00
Account No.	Γ		Credit card				
Citbank							
PO Box 6004		_					
Sioux Falls, SD 57117-6004							
							4,778.62
Account No.			Credit card				
Citi Business							
Citi Business PO Box 6235		_					
Sioux Falls, SD 57117-6235							
							10,564.81
Account No.			CPA services				
Educard M. Osinski, Ir							
Edward M. Osinski, Jr 717 W. Dunlap Ave, Ste. 110		_					
Phoenix, AZ 85021-3528							
· ·							
							4,218.00
Account No.			Medical Depot, Inc.				
Fular Harman Callestian - Namib							
Euler Hermes Collections North America		_					
600 S. 7th Street	1						
Louisville, KY 40203							
							21,498.06
Sheet no. 1 of 4 sheets attached to Schedule of	_			Sub	tota	1	07.040.45
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pag	e)	67,612.49

In re	H & L Medical Specialist, Inc.	Case No	
-		Debtor	

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	Ç	Ų	Ţ	РΤ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	ODE BTOR	C A M	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT		F		AMOUNT OF CLAIM
Account No.			Inventory	T	ΙE			
Financial Pacific 3455 S. 344th Way, Ste 300 Auburn, WA 98001-9546		_			D			85,975.14
Account No.			Inventory			Τ	T	
Golden Technologies c/o Johnson, Morgan, & White 6800 Broken Sound Parkway Boca Raton, FL 33487-2788		_						6,043.74
Account No.		\vdash	Factoring receivables	+	╁	+	+	•
Great Western Bank 1721 N. Arizona Avenue Chandler, AZ 85225		-						332,918.00
Account No.			Commercial Promissory Note		T	T	T	
IOU Central, Inc. c/o Joyce Childers, LLP PO Box 550291 Atlanta, GA 30355		_						22,000.00
Account No.		Г	Inventory	T	T	†	†	
Kenco Equipment Lease PO Box 220 Tualatin, OR 97062		_						21,745.15
Sheet no. 2 of 4 sheets attached to Schedule of		_		Sub	tota	- L	†	400 000 00
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	ge	a [468,682.03

In re	H & L Medical Specialist, Inc.		Case No.	
-		Debtor		

CREDITOR'S NAME,	C	Hu	sband, Wife, Joint, or Community	Ç	Ų	P	эΤ	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	O D E B T O R	C A M	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	COZHLZGEZH	ΙQ			AMOUNT OF CLAIM
Account No.			Inventory	T	Е			
Key Equipment 11030 Circle Point Road Broomfield, CO 80020		_			D			24,601.36
Account No.			Inventory					
Medline/CKB Firm 30 N. Lasalle St #1520 Chicago, IL 60602		_						6,957.04
Account No.		\vdash	Commissions	+	╁	╁	+	
Neb Group 9363 E. Sandy Vista Drive Scottsdale, AZ 85260		_						156,300.00
Account No.			Inventory			T	T	
Philips Respironics PO Box 405740 Atlanta, GA 30384-5740		-						10,963.90
Account No.		Т	Wright Express		T	T	†	
Pro Consulting Services, Inc. PO Box 66510 Houston, TX 77266-6510		_						13,665.55
Sheet no. 3 of 4 sheets attached to Schedule of		_		Sub	tota	ıl	†	040 407 05
Creditors Holding Unsecured Nonpriority Claims			(Total of t	his	pas	ze)) [212,487.85

In re	H & L Medical Specialist, Inc.	Case No.		
-		Debtor	,	

					_		
CREDITOR'S NAME,	CO	Hu	sband, Wife, Joint, or Community	CON	U N L	D	
MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	C A M	CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	TINGEN	1,	P U T E	AMOUNT OF CLAIM
Account No.			Legal services	Т	E		
Ryan, Rapp & Underwood 3200 N. Central Avenue Phoenix, AZ 85012-2424		-					10,337.00
Account No.	┢		Deficiency Note		T		
The Foothills Bank c/o Garcia, Hengl, Kinsey & Villarreal 241 S. Main Street Yuma, AZ 85364		-				x	
					╄		325,000.00
Account No. The Foothills Bank c/o Garcia, Hengl, Kinsey & Villarreal 241 S. Main Street Yuma, AZ 85364		-	Stipulated Judgment			x	
							1,334,248.50
Account No.							
Watertown Credit Bureau Inc. 925 16th St SW PO Box 234 Watertown, SD 57201-0234		-					
					L		647.58
Account No. Wright Express PO Box 66510 Houston, TX 77266-6510		-	Gas for vehicles				13,665.55
Sheet no4 of _4 sheets attached to Schedule of	_	_		Sub	tota	1	
Creditors Holding Unsecured Nonpriority Claims			(Total of t				1,683,898.63
				7	Γota	al	0.504.005.00
			(Report on Summary of So	ched	anle	(25	2,331,333.00

-	r	
	n	re

Н	& L	. Medical	Specialist,	Inc
---	-----	-----------	-------------	-----

Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

All Copy Products, Inc. 4141 Colorado Blvd Denver, CO 80216

Arizona Medsource Holdings, LLC 9847 South 500 West, Ste. 200 Sandy, UT 84070

De Lage Landen PO Box 41602 Philadelphia, PA 19101-1602

Pitney Bowes Global Financial Services Attn: Box 371887 500 Ross Street, Ste. 154-0470 Pittsburgh, PA 15262-0001

Ron Sigh 5552 W. Parkview Lane Glendale, AZ 85310 •

Exclusive Agent to bill claims and collect sums.

Copier lease.

Copier lease

Stamp machine lease.

Commercial lease- expires June 30, 2014

In re	H & L Medical Specialist, Inc.		Case No.	
_		Debtor	,	

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

In re	H & L Medical Specialist, Inc.			Case No.			
			Debtor(s)	Chapter	11		
	DECLARATION C	ONCEDN	INC DEPTODIS SO		F.C		
	DECLARATION C	UNCERN	ING DEDIOR S SC	nedul	LO LO		
	DECLARATION UNDER PENALTY OF	FPERJURY	ON BEHALF OF CORPO	RATION (OR PARTNERSHIP		
I, the President of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best of my knowledge, information, and belief.							
Date	May 22, 2014	Signature	/s/ Herbert Greenbeck Herbert Greenbeck President				

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

In re	H & L Medical Specialist, Inc.		Case No.	
		Debtor(s)	Chapter	11

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$1,000,000.00 2014 YTD: Gross Receipts \$1,260,408.44 2013: Gross Receipts

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF **PAYMENTS**

AMOUNT PAID

AMOUNT STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

> DATES OF PAYMENTS/ TRANSFERS Monthly

AMOUNT PAID OR VALUE OF TRANSFERS \$45.000.00

AMOUNT STILL **OWING** \$15,000.00

Ron Sigh 5552 W. Parkview Lane Glendale, AZ 85310

NAME AND ADDRESS OF CREDITOR

None

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

NATURE OF

Civil action

Civil action

PROCEEDING

AMOUNT PAID

AMOUNT STILL **OWING**

4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AND CASE NUMBER IOU Central, Inc. v. H&L Medical Specialist, Inc., an Arizona corporation, and Herb Greenbeck, a

Arizona resident 14A118-4

CAPTION OF SUIT

Pawnee Leasing Corporation, a Colorado corporation authorized to do business in Arizona, Plaintiff, v. H&L Medical Specialist, Inc., an Arizona corporation; Herbert A. Greenbeck and Lori H. Greenbeck, individually and as husband and wife; John Does I-V; Jane Does I-V; and ABC Business Entities I-V, Defendants

COURT OR AGENCY AND LOCATION

State Court of Cobb County, State of

Georgia

Pending

Pending

STATUS OR

DISPOSITION

Maricopa Superior Court 201 W. Jefferson

Phoenix, AZ 85003-2243

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B7 (Official Form 7) (04/13)

3

CAPTION OF SUIT AND CASE NUMBER NATURE OF PROCEEDING Civil Action COURT OR AGENCY
AND LOCATION
Superior Court, County of Yuma, State

STATUS OR DISPOSITION Judgment

The Foothills Bank, an Arizona corporation, Plaintiff v. Greenbeck Properties, LLC, an Arizona limited liability company; Herbert A. Greenbeck and Lori H. Greenbeck, husband and wife; and H & L Medical Specialist, Inc., an Arizona corporation; Defendants

of Arizona

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF

PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

Carmichael & Powell, P.C. 7301 N. 16th Street Suite 103 Phoenix, AZ 85020

DATE OF PAYMENT. NAME OF PAYER IF OTHER THAN DEBTOR April 2014

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$15,000,00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE,

RELATIONSHIP TO DEBTOR

Third Party

DATE

5/9/2014

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

1999 Ford vehicle- \$1,000.00

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF February 28, 2014

AMOUNT OF SETOFF

\$7,999.16

7000 E. Village Drive Whittier, CA 90606

14. Property held for another person

None

List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS NAME USED DATES OF OCCUPANCY

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS

SITE NAME AND ADDRESS

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DATE OF NOTICE

ENVIRONMENTAL.

LAW

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF

DATE OF

ENVIRONMENTAL

GOVERNMENTAL UNIT NOTICE LAW

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

18. Nature, location and name of business

None

NAME

None

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO.

(ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS

ENDING DATES

NAME **ADDRESS**

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS Edward M. Osinski, Jr 717 W. Dunlap Ave, Ste. 110 Phoenix, AZ 85021-3528

DATES SERVICES RENDERED 2008 to current

7

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)

 August 2013
 Herb Greenbeck
 \$566,169.00

 April 2014
 Herb Greenbeck
 \$290,380.00

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

RECORDS

August 2013 Herb Greenbeck

April 2014 Herb Greenbeck

21 . Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE
OF STOCK OWNERSHIP

Herbert Greenbeck President 50%

8307 E. Davenport Drive Scottsdale, AZ 85260

DATE OF INVENTORY

Lori Greenbeck Secretary 50%

8307 E. Davenport Drive Scottsdale, AZ 85260

Q

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date May 22, 2014

Signature /s/ Herbert Greenbeck

Herbert Greenbeck President

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

In re	H & L Medical Specialist, Inc.		(Case No.		
		Debtor(s)		Chapter	11	
	DISCLOSURE OF COMPENSAT	TION OF ATTOR	NEY F	OR DE	BTOR(S)	
(Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:					
	For legal services, I have agreed to accept		\$.00 per hour	
	Prior to the filing of this statement I have received		\$		\$15,000.00	
	Balance Due		\$.00 per hour es and costs	
2.	The source of the compensation paid to me was:					
	Debtor Other (specify):					
3.	The source of compensation to be paid to me is:					
	Debtor Other (specify):					
1.	I have not agreed to share the above-disclosed compensatio	on with any other person u	nless they	y are memb	ers and associate	s of my law firm.
	I have agreed to share the above-disclosed compensation we copy of the agreement, together with a list of the names of the share the above-disclosed compensation we copy of the agreement, together with a list of the names of the share the above-disclosed compensation we copy of the agreement.					y law firm. A
5.	n return for the above-disclosed fee, I have agreed to render le	gal service for all aspects	of the ba	nkruptcy ca	ase, including:	
l (Analysis of the debtor's financial situation, and rendering ad Preparation and filing of any petition, schedules, statement of Representation of the debtor at the meeting of creditors and [Other provisions as needed] 	of affairs and plan which r	nay be re	quired;	-	ankruptcy;
(By agreement with the debtor(s), the above-disclosed fee do		ng servic	e:		
	СЕК	RTIFICATION				
	certify that the foregoing is a complete statement of any agree ankruptcy proceeding.	ment or arrangement for p	ayment to	o me for re	presentation of th	e debtor(s) in
Dated	: May 19, 2014	/s/ Cindy L. Greene				
		Cindy L. Greene 27 Carmichael & Pow				
		7301 N. 16th Street	•			
		Suite 103				
		Phoenix, AZ 85020 (602) 861-0777 Fa		870-0296	}	
		c.greene@cplawfir				

Desc

District of Arizona		
	Case No	
Debtor	, Chapter	11
		3) for filing in this chapter 11 ca
Security Class	Number of Securities	Kind of Interest
that it is true and correct	to the best of my inform	
F	lerbert Greenbeck	
	Debtor Debtor DUITY SECURITY So which is prepared in according to the security Class ERJURY ON BEHAI as the debtor in this case, that it is true and correct Signature_ Figure Debtor	Case No

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.

18 U.S.C §§ 152 and 3571.

In re	H & L Medical Specialist, Inc.		Case No.
		Debtor(s)	Chapter 11
		DECLARATION	
	I, the President of the corporati	on named as the debtor in this case, do hereby	certify, under penalty of perjury, that the Maste
Mailing	g List, consisting of 5 sheet(s)), is complete, correct and consistent with the d	ebtor(s)' schedules.
Data	May 22, 2014	/s/ Herbert Greenbeck	
Date:	Way 22, 2014	Herbert Greenbeck/President	
		Signer/Title	
Date:	May 22, 2014	/s/ Cindy L. Greene	
		Signature of Attorney	
		Cindy L. Greene 27001	
		Carmichael & Powell, P.C. 7301 N. 16th Street	
		Suite 103	
		Phoenix, AZ 85020	
		(602) 861-0777 Fax: (602) 870	J-0296

MML-5

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ALLY FINANCIAL PO BOX 380902 MINNEAPOLIS MN 55438-0902

AMERICAN EXPRESS PO BOX 0001 LOS ANGELES CA 90096-8000

APPLE MEDICAL 7007 E. FIFTH AVENUE SCOTTSDALE AZ 85251

ARIZONA DEPARTMENT OF REVENUE 1600 MONROE 7TH FLOOR PHOENIX AZ 85007

ARIZONA MEDSOURCE HOLDINGS, LLC 9847 SOUTH 500 WEST, STE. 200 SANDY UT 84070

BANK OF AMERICA PO BOX 84448 SEATTLE WA 98124

BOARDROOM SUITES 8426 E. SHEA BLVD SCOTTSDALE AZ 85260

CHASE PO BOX 15123 WILMINGTON DE 19850-5123 CITBANK
PO BOX 6004
SIOUX FALLS SD 57117-6004

CITI BUSINESS PO BOX 6235 SIOUX FALLS SD 57117-6235

DE LAGE LANDEN
PO BOX 41602
PHILADELPHIA PA 19101-1602

DEVILBISS HEALTHCARE LLC 100 DEVILBISS DRIVE SOMERSET PA 15501

DICKINSON WRIGHT MARISCAL WEEKS 2901 N. CENTRAL AVENUE, STE 200 PHOENIX AZ 85012-2705

EDWARD M. OSINSKI, JR 717 W. DUNLAP AVE, STE. 110 PHOENIX AZ 85021-3528

EULER HERMES COLLECTIONS NORTH AMERICA 600 S. 7TH STREET LOUISVILLE KY 40203

FALCON LEASING 183 CEDAR DRIVE FOLEY MN 56329

FINANCIAL PACIFIC 3455 S. 344TH WAY, STE 300 AUBURN WA 98001-9546

GEORGE W. SIMMONS 4619 E. ROWELL ROAD PHOENIX AZ 85050

GOLDEN TECHNOLOGIES C/O JOHNSON, MORGAN, & WHITE 6800 BROKEN SOUND PARKWAY BOCA RATON FL 33487-2788 GREAT WESTERN BANK 1721 N. ARIZONA AVENUE CHANDLER AZ 85225

INTERNAL REVENUE SERVICE P.O. BOX 7346 PHILADELPHIA PA 19101

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KENCO EQUIPMENT LEASE PO BOX 220 TUALATIN OR 97062

KEY EQUIPMENT 11030 CIRCLE POINT ROAD BROOMFIELD CO 80020

KEY EQUIPMENT FINANCE INC. 1000 SOUTH MCCASLIN BLVD SUPERIOR CO 80027

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NEB GROUP 9363 E. SANDY VISTA DRIVE SCOTTSDALE AZ 85260

PAWNEE LEASING CORPORATION 700 CENTRE AVENUE FORT COLLINS CO 80526

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RYAN, RAPP & UNDERWOOD 3200 N. CENTRAL AVENUE PHOENIX AZ 85012-2424

SUNRISE MEDICAL 7477 E. DRY CREEK PARKWAY LONGMONT CO 80503

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TEAM FUNDING SOLUTIONS 5351 THUNDER CREEK RD AUSTIN TX 78759

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WELLS FARGO BANK SIXTH AND MARQUETTE MINNEAPOLIS MN 55479

WRIGHT EXPRESS PO BOX 66510 HOUSTON TX 77266-6510

		Case No.	
	Debtor(s)	Chapter	11
CORPORATI	E OWNERSHIP STATEMENT	(RULE 7007.1)	
recusal, the undersigned counsel for Hallowing is a (are) corporation(s), other that ore of any class of the corporation's(s') equation (a)	& L Medical Specialist, Inc. in the an the debtor or a governmental us	e above captioned nit, that directly o	action, certifies that the or indirectly own(s) 10% or
None [Check if applicable]			
[over [over or]			
Date May 19, 2014	/s/ Cindy L. Greene Cindy L. Greene 27001		
Jaic Way 17, 2014	Signature of Attorney Counsel for H&L Medical S	Specialist, Inc.	
	Carmichael & Powell, P.C. 7301 N. 16th Street		
	Suite 103 Phoenix, AZ 85020		
	(602) 861-0777 Fax:(602) 870-0		