

**United States Bankruptcy Court
District of Arizona**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Arizona Neurological Institute, P.C.	Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) 86-0859566	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): 10474 W thunderbird Blvd #200 Sun City, AZ	Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code 85351	ZIP Code
County of Residence or of the Principal Place of Business: Maricopa	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	

Type of Debtor (Form of Organization) (Check one box) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input checked="" type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.

Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
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Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.	THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000	
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion	
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion	

Voluntary Petition <i>(This page must be completed and filed in every case)</i>	Name of Debtor(s): Arizona Neurological Institute, P.C.
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All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

Location Where Filed: - None -	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)

Name of Debtor: - None -	Case Number:	Date Filed:
District:	Relationship:	Judge:

<p style="text-align: center;">Exhibit A</p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>	<p style="text-align: center;">Exhibit B</p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b).</p> <p>X _____ Signature of Attorney for Debtor(s) (Date)</p>
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Exhibit C

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

Yes, and Exhibit C is attached and made a part of this petition.

No.

Exhibit D

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

Exhibit D completed and signed by the debtor is attached and made a part of this petition.

If this is a joint petition:

Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.

Information Regarding the Debtor - Venue

(Check any applicable box)

Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.

There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.

Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

Certification by a Debtor Who Resides as a Tenant of Residential Property

(Check all applicable boxes)

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, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

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

Name of Debtor(s):

Arizona Neurological Institute, P.C.

Signatures

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 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 Attorney*

X /s/ Christopher C Simpson
Signature of Attorney for Debtor(s)

Christopher C Simpson 018626
Printed Name of Attorney for Debtor(s)

Stinson Leonard Street LLP
Firm Name

1850 N Central Ave #2100
Phoenix, AZ 85004-4584

Address

Email: anne.finch@stinsonleonard.com
602-279-1600 Fax: 602-240-6925

Telephone Number

November 26, 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 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 bankruptcy 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.)

Address

X _____
Date

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.

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/ Eric Chappell
Signature of Authorized Individual

Eric Chappell
Printed Name of Authorized Individual

Chief Operating Officer
Title of Authorized Individual

November 26, 2014
Date

**United States Bankruptcy Court
District of Arizona**

In re Arizona Neurological Institute, P.C.

Debtor(s)

Case No. _____

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)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Tiffany & Bosco 2525 E Camelback Rd 3rd Fl Phoenix, AZ 85016-9240	Tiffany & Bosco 2525 E Camelback Rd 3rd Fl Phoenix, AZ 85016-9240			136,416.18
Lawrence Kutz, DO 7324 E. Kalil Dr. Scottsdale, AZ 85260	Lawrence Kutz, DO 7324 E. Kalil Dr. Scottsdale, AZ 85260			131,651.22
Swaraj Singh, MD 7577 W. Firebird Dr. Glendale, AZ 85308	Swaraj Singh, MD 7577 W. Firebird Dr. Glendale, AZ 85308			103,710.27
Toby Yaltho, MD 5116 Pocahontas St. Bellaire, TX 77401	Toby Yaltho, MD 5116 Pocahontas St. Bellaire, TX 77401			99,649.01
Allergan USA Inc 12975 Collection Center Dr Chicago, IL 60693	Allergan USA Inc 12975 Collection Center Dr Chicago, IL 60693			98,891.29
Andrew Gorman 6202 E Via Estrella Ave. Paradise Valley, AZ 85253	Andrew Gorman 6202 E Via Estrella Ave. Paradise Valley, AZ 85253			84,045.12
National PT 980 N Michigan Ave #1379 Chicago, IL 60611	National PT 980 N Michigan Ave #1379 Chicago, IL 60611		Unliquidated Disputed	75,433.73
Intrafusion Attn: Terry Seaman 1920 N Memorial Wy #112 Houston, TX 77007	Intrafusion Attn: Terry Seaman 1920 N Memorial Wy #112 Houston, TX 77007		Unliquidated Disputed	72,914.79
Biologix Direct 12601 Collections Center Dr Chicago, IL 60693	Biologix Direct 12601 Collections Center Dr Chicago, IL 60693			71,355.50
Todd Herman, MD 8094 W. Zoe Ella Way Peoria, AZ 85382	Todd Herman, MD 8094 W. Zoe Ella Way Peoria, AZ 85382			70,273.91
Atul Syal 6025 E. Caron Cir. Paradise Valley, AZ 85253	Atul Syal 6025 E. Caron Cir. Paradise Valley, AZ 85253			65,091.30
PSS World Medical Inc PO Box 749499 Los Angeles, CA 90074-9499	PSS World Medical Inc PO Box 749499 Los Angeles, CA 90074-9499			64,901.75

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Jatin Shah 15227 N 15th Drive Phoenix, AZ 85023	Jatin Shah 15227 N 15th Drive Phoenix, AZ 85023			64,825.35
Ogletree Deakins Nash Smoak & Steward Patewood Bldg IV 50 International Dr #200 Greenville, SC 29615	Ogletree Deakins Nash Smoak & Steward Patewood Bldg IV 50 International Dr #200 Greenville, SC 29615			54,009.25
Cox Communications Phoenix PO Box 53249 Phoenix, AZ 85072-3249	Cox Communications Phoenix PO Box 53249 Phoenix, AZ 85072-3249			43,588.75
Jason Reinhart 44 W Monroe St. Phoenix, AZ 85003	Jason Reinhart 44 W Monroe St. Phoenix, AZ 85003			43,324.04
Evan Freedman, DO 3609 E Half Hitch Pl. Phoenix, AZ 85050	Evan Freedman 3609 E Half Hitch Place Phoenix, AZ 85050			42,203.09
Besse Medical 9075 Centre Point Dr #140 West Chester, OH 45069	Besse Medical 9075 Centre Point Dr #140 West Chester, OH 45069			39,651.07
Brian Klinck, Psy.D 3138 N 53rd St. Phoenix, AZ 85018	Brian Klinck, Psy.D 3138 N 53rd St. Phoenix, AZ 85018			35,076.01
CliftonLarsonAllen LLP 20 E Thomas Rd #2300 Phoenix, AZ 85012-3111	CliftonLarsonAllen LLP 20 E Thomas Rd #2300 Phoenix, AZ 85012-3111			34,893.16

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

I, the Chief Operating Officer 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 November 26, 2014Signature /s/ Eric Chappell

Eric Chappell
Chief Operating Officer

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.

**United States Bankruptcy Court
District of Arizona**

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

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	449,035.36		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	1		0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	6		862,074.28	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	25		1,082,045.36	
G - Executory Contracts and Unexpired Leases	Yes	2			
H - Codebtors	Yes	2			
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 Schedules		41			
Total Assets			449,035.36		
Total Liabilities				1,944,119.64	

**United States Bankruptcy Court
District of Arizona**

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

Chapter 11

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

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:

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:

1. 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. Total from Schedule F		
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		

In re Arizona Neurological Institute, P.C.

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 the debtor's own benefit. 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 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.

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

In re Arizona Neurological Institute, P.C.

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 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
1. Cash on hand	None		-	Unknown
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Wells Fargo Bank 9901 W. Thunderbird Blvd. Sun City, AZ 85351 ANI Operations Account #xxxxxx1198	-	203,314.57
3. Security deposits with public utilities, telephone companies, landlords, and others.		Sun City West Office/Lease HTA-SCW Mountain View LLC 16435 N. Scottsdale Rd., #320 Scottsdale, AZ 85254	-	7,034.79
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.		Artwork	-	60.00
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 >				210,409.36
(Total of this page)				

3 continuation sheets attached to the Schedule of Personal Property

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	NON 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
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.		Arizona Neurological Institute, PC Profit Sharing Plan The Retirement Company 162 Westgate Circle, Suite 170 Brentwood, TN 37027 Kyle Brown 615-515-4459	-	0.00
		Arizona Neurological Institute, PC Defined Benefit Plan Morgan Stanley 609 Deep Valley Drive, Suite 400 Rolling Hills Estates, CA 90274 Kristian Widor 800-544-3617	-	0.00
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.		Non-disclosable; protected by HIPAA	-	200,000.00
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.	X			
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			

Sub-Total > **200,000.00**
(Total of this page)

Sheet 1 of 3 continuation sheets attached to the Schedule of Personal Property

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

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
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.		Maricopa County Superior Court Case No. CV2014-004847 (Praful Reddy v. Arizona Neurological Institute, PC, et al.)	-	Unknown
		Maricopa County Superior Court Case No. CV2014-007211 (Maninder Kahlon v. Arizona Neurological Institute, PC)	-	Unknown
		Maricopa County Superior Court Case No. CV2014-012390 (Karen Hudson v. Arizona Neurological Institute, PC)	-	Unknown
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
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.	X			
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	Estimate		-	38,626.00
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.		CORE consumed inventory.	-	Unknown
31. Animals.	X			
			Sub-Total >	38,626.00
			(Total of this page)	

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

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

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
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 >	449,035.36

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

(Report also on Summary of Schedules)

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

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.

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 "Amount of Claim" also on the 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.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		H W J C	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN					
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Account No.								
			Value \$					
Subtotal (Total of this page)								
Total (Report on Summary of Schedules)							0.00	0.00

0 continuation sheets attached

In re Arizona Neurological Institute, P.C.

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 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 total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority 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 total 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 of 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 trustee 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 representatives 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 business, 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 Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No.								
Amir Buljina, MD 7737 W. Villa Rita Dr. Glendale, AZ 85308		-					17,574.77	
							30,049.77	12,475.00
Account No.								
Amy Knapp Psy.D 18440 N 68th St. Unit 1070 Phoenix, AZ 85054		-					12,564.75	
							25,039.75	12,475.00
Account No.								
Andre Hagevik 13360 W. Via Caballo Blanco Peoria, AZ 85383		-					16,723.64	
							29,198.64	12,475.00
Account No.								
Andrew Gorman 6202 E Via Estrella Ave. Paradise Valley, AZ 85253		-					71,570.12	
							84,045.12	12,475.00
Account No.								
Atul Syal 6025 E. Caron Cir. Paradise Valley, AZ 85253		-					52,616.30	
							65,091.30	12,475.00
Subtotal								171,049.58
(Total of this page)							233,424.58	62,375.00

Sheet 1 of 5 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
								AMOUNT ENTITLED TO PRIORITY	
Account No. Brian Klinck, Psy.D 3138 N 53rd St. Phoenix, AZ 85018								22,601.01	
		-					35,076.01	12,475.00	
Account No. Eross, Eric, DO 13616 N Bonita Dr Fountain Hills, AZ 85268					X	X		0.00	
		-					0.00	0.00	
Account No. Evan Freedman, DO 3609 E Half Hitch Pl. Phoenix, AZ 85050								29,728.09	
		-					42,203.09	12,475.00	
Account No. Jason Reinhart 44 W Monroe St. Phoenix, AZ 85003								30,849.04	
		-					43,324.04	12,475.00	
Account No. Jatin Shah 15227 N 15th Drive Phoenix, AZ 85023								52,350.35	
		-					64,825.35	12,475.00	
Subtotal								135,528.49	
Schedule of Creditors Holding Unsecured Priority Claims							(Total of this page)	185,428.49	49,900.00

Sheet 2 of 5 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Total of this page)

135,528.49
49,900.00

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
								AMOUNT ENTITLED TO PRIORITY	
Account No. Lawrence Kutz, DO 7324 E. Kalil Dr. Scottsdale, AZ 85260	-						119,176.22		
						131,651.22		12,475.00	
Account No. Luis Arrangula - c/o Paula A. Williams May Potenza Baran & Gillespie, PC 201 N Central Ave., 22nd Floor Phoenix, AZ 85004	-				X	X		0.00	
						0.00		0.00	
Account No. Nirmala Aryal 6721 N 65th St. Paradise Valley, AZ 85253	-							15,351.80	
						27,826.80		12,475.00	
Account No. Pradful Reddy, MD 6636 E. Caron Dr. Paradise Valley, AZ 85253	-				X	X		0.00	
						0.00		0.00	
Account No. Stacy Donlon, MD 13420 N 35th St. Phoenix, AZ 85032	-							0.00	
						10,000.00		10,000.00	
Subtotal								134,528.02	
Schedule of Creditors Holding Unsecured Priority Claims							(Total of this page)	169,478.02	34,950.00

Sheet 3 of 5 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Total of this page)

169,478.02 34,950.00

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No.								
Swaraj Singh, MD 7577 W. Firebird Dr. Glendale, AZ 85308		-					103,710.27	91,235.27
								12,475.00
Account No.								
Toby Yaltho, MD 5116 Pocahontas St. Bellaire, TX 77401		-					99,649.01	87,174.01
								12,475.00
Account No.								
Todd Herman, MD 8094 W. Zoe Ella Way Peoria, AZ 85382		-					70,273.91	57,798.91
								12,475.00
Account No.								
Account No.								
Subtotal							273,633.19	236,208.19
(Total of this page)								37,425.00

Sheet **4** of **5** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No.								
City of Scottsdale Tax & License 7447 E Indian School Rd #110 Scottsdale, AZ 85251		-					110.00	0.00
								110.00
Account No.								
Account No.								
Account No.								
Account No.								

Sheet 5 of 5 continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims	Subtotal (Total of this page)	110.00	0.00	110.00
	Total (Report on Summary of Schedules)	862,074.28	677,314.28	184,760.00

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	Husband, Wife, Joint, or Community		CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
	C O D E B T O R	H W J C				
Account No. None						
5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013	X	-		X	X	6,156.82
Account No. none						
Accent PO Box 952366 Saint Louis, MO 63195-2366		-				61.98
Account No.						
Adamowicz, John PO Box 26176 Phoenix, AZ 85068-6176		-				136.00
Account No. 01200 189061312						
ADT Security Services PO Box 371956 Pittsburgh, PA 15250-7956		-				939.87
Subtotal (Total of this page)						7,294.67

24 continuation sheets attached

In re Arizona Neurological Institute, P.C.,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		D I S P U T E D	A M O U N T O F C L A I M	
		H W J C	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.			C O N T I N G E N T
Account No. none Aetna Attn: Refund Dept 31355 Oak Crest Dr #100 Westlake Village, CA 91361		-			134.97	
Account No. none Aetna PO Box 14079 Lexington, KY 40512-4079		-			30.40	
Account No. none Aiken Schenk Hawkins & Ricciardi PC 2390 E Camelback Rd #400 Phoenix, AZ 85016		-			3,405.66	
Account No. none AIP TB Plaza I LLC Main Street Real Estate Advisors 7333 E Doubletree Ranch Rd #280 Scottsdale, AZ 85258	X	-		X X	14,549.27	
Account No. none Air Dynamics Refrigeration 3655 W Anthem Wy #A 109-408 Phoenix, AZ 85086		-			497.85	
Sheet no. <u>1</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	18,618.15

In re Arizona Neurological Institute, P.C.,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.					
Account No. 171320 Allergan USA Inc 12975 Collection Center Dr Chicago, IL 60693	-						98,891.29	
Account No. none Allied Fire Protection Inc 2845 N Norfolk Mesa, AZ 85215	-						324.62	
Account No. 072871 ALSCO 4707 W Camelback Rd Phoenix, AZ 85031	-						3,560.79	
Account No. 4000019357 Ambu Inc PO Box 347818 Pittsburgh, PA 15251-4818	-						5,341.80	
Account No. none American Academy of Neurology SDS 12-1147 PO Box 86 Minneapolis, MN 55486-1147	-						225.00	
Sheet no. <u>2</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	108,343.50

In re Arizona Neurological Institute, P.C. Case No. _____
 Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. none American College of Osteopathic Neuro 28595 Orchard Lake Rd #200 Farmington, MI 48334	-					300.00
Account No. none American Fidelity Assurance Co PO Box 268805 Oklahoma City, OK 73126-8805	-					418.50
Account No. none APS PO Box 2906 Phoenix, AZ 85062-2906	-					7,270.41
Account No. Arizona Dept of Revenue Special Operations Section 1600 W Monroe 7th Fl Phoenix, AZ 85007-2612	-					0.00
Account No. none Arizona Doppler Specialists 727 E Bethany Home Rd #A106 Phoenix, AZ 85014	-					9,850.00
Sheet no. <u>3</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)
						17,838.91

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
		H W J C						
Account No. none Arizona Osteopathic Medical Assn 5150 N 16th St #A-122 Phoenix, AZ 85016		-					475.00	
Account No. none Association Career Network 9620 Executive Center Dr. N., #200 Saint Petersburg, FL 33702		-					440.00	
Account No. none Besse Medical 9075 Centre Point Dr #140 West Chester, OH 45069		-					39,651.07	
Account No. none Biologix Direct 12601 Collections Center Dr Chicago, IL 60693		-					71,355.50	
Account No. 341452 Boston Scientific Corporation PO Box 951653 Dallas, TX 75395-1653		-					2,108.49	
Sheet no. <u>4</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	114,030.06

In re Arizona Neurological Institute, P.C.

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C					
Account No. none							
Brookside Office Park Trust Account c/o Case Huff & Associates Inc 14861 N Scottsdale Rd #105 Scottsdale, AZ 85254		-			X	X	2,150.00
Account No. C147363							
Cadwell Laboratories Inc 909 N Kellogg St Kennewick, WA 99336		-					4,070.83
Account No. none							
Caesar's Uniforms 18795 N Reems Rd #111 Surprise, AZ 85374		-					2,973.49
Account No.							
CenturyLink PO Box 29040 Phoenix, AZ 85038-9040		-					1,011.40
Account No.							
Cintas Document Management PO Box 631025 Cincinnati, OH 45263-1025		-					2,883.70
Sheet no. <u>5</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	13,089.42

In re Arizona Neurological Institute, P.C.

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. Cities West Publishing Inc 15169 N Scottsdale Rd #C310 Scottsdale, AZ 85254	-					2,060.92
Account No. CliftonLarsonAllen LLP 20 E Thomas Rd #2300 Phoenix, AZ 85012-3111	-					34,893.16
Account No. 3008112290 CNA Insurance PO Box 790094 Saint Louis, MO 63179-0092	-					60.00
Account No. CompuGroup Medical Inc 125 High St 8th Fl Boston, MA 02110	-					30,224.82
Account No. N09-0360133850 Concentra Occupational Health Centers SW 1818 E Sky Harbor Cir #150 Phoenix, AZ 85034-3407	-					1,597.66
Sheet no. <u>6</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	68,836.56

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C						
Account No. none								
Confidential Claimant #1	-				X	X	80.00	
Account No.								
Confidential Claimant #2	-				X	X	100.00	
Account No.								
Confidential Claimant #3	-				X	X	36.56	
Account No.								
Confidential Claimant #4	-				X	X	50.00	
Account No. none								
Confidential Claimant #5	-				X	X	25.00	
Sheet no. <u>7</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	291.56

In re Arizona Neurological Institute, P.C.

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
Account No. none								
Confidential Claimant #6	-			X	X		40.00	
Account No.								
Confidential Claimant #7	-			X	X		164.67	
Account No.								
Cornerstone Medical Transcription LLC Attn: Sheryl Lynn Markel PO Box 5849 Peoria, AZ 85385-5849	-						1,153.58	
Account No. 001 8501 207567701								
Cox Communications Phoenix PO Box 53249 Phoenix, AZ 85072-3249	-						43,588.75	
Account No. 8255 7070 8059 1774								
Dish Network PO Box 94063 Palatine, IL 60094-4063	-						238.00	
Sheet no. <u>8</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	45,185.00

In re Arizona Neurological Institute, P.C.,
 Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. none						
Ehtisham, Asad 7240 W. Monte Cristo Ave. Peoria, AZ 85382		-				3,995.34
Account No. MED-23630						
Emdeon Business Services PO Box 572490 Murray, UT 84157-2490		-				100.00
Account No.						
Eross, Eric, DO 13616 N Bonita Dr Fountain Hills, AZ 85268		-		X	X	575.00
Account No. 2541-6870-0						
FedEx PO Box 7221 Pasadena, CA 91109-7321		-				42.02
Account No.						
Ft McDowell Yavapai Nation c/o Claims Recovery Dept PO Box 998 Covington, LA 70434		-				582.74
Sheet no. <u>9</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	5,295.10

In re Arizona Neurological Institute, P.C.

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C					
Account No. 1399568-2736077							
GE Capital c/o Ricoh c/o Ricoh USA Program PO Box 650073 Dalls, TX 75265-0073	-			X	X	X	10,626.46
Account No.							
HCP MOB Scottsdale LLC Attn: Ann Bohlke #2022 File #50065 Los Angeles, CA 90074-0065	-				X	X	6,354.62
Account No.							
Health Smart Benefit Solutions Inc 7202 E Rosewood #220 Tucson, AZ 85710	-						30.00
Account No.							
HealthNet of AZ Attn: Refunds PO Box 749801 Los Angeles, CA 90074-9801	-						14.88
Account No.							
HMWS Healthcare Medical Waste Serv #2326 PO Box 10958 Casa Grande, AZ 85130-0958	-						1,401.73
Sheet no. <u>10</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	18,427.69

In re Arizona Neurological Institute, P.C. Case No. _____
 Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C					
Account No. Holt, James Law Firm 1255 W 15th St #400 Plano, TX 75075	-					3,018.00	
Account No. Internal Revenue Service Centralized Insolvency Operations PO Box 21126 Philadelphia, PA 19114-0326	-					0.00	
Account No. Intrafusion Revenue Intrafusion Attn: Terry Seaman 1920 N Memorial Wy #112 Houston, TX 77007	-			X	X	72,914.79	
Account No. Kopy Print LLC 5920 N 132nd Dr Litchfield Park, AZ 85340	-					3,916.33	
Account No. KSS MEDICAL OFFICES LLC 10474 W Thunderbird Blvd., #200 Sun City, AZ 85351	-					Unknown	
Sheet no. <u>11</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	79,849.12

In re Arizona Neurological Institute, P.C.,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		D I S P U T E D	A M O U N T O F C L A I M	
		H W J C	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.			
Account No. KSSGHAPCVB, LLC 10474 W Thunderbird Blvd #200 Sun City, AZ 85351	-				21,046.00	
Account No. KSSRGH Real Estate Holdings, LLC 10474 W Thunderbird Blvd #200 Sun City, AZ 85351	-				Unknown	
Account No. KSSRGH Real Estate LLC 10474 W Thunderbird Blvd #200 Sun City, AZ 85351	-				23,367.10	
Account No. ANI-Bldg 1 La Paz Medical Ctr Condo Assoc LLC 10240 W Indian School Rd #140 Phoenix, AZ 85037	-	HOA dues			5,360.20	
Account No. Laboratory Corporation of Amer PO Box 12140 Burlington, NC 27216	-			X X	562.25	
Sheet no. <u>12</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	50,335.55

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
		H W J C						
Account No. KSSMED Lakes Medical Plaza Condominium Assoc 9401 W Thunderbird Rd #200 Peoria, AZ 85381	-						21,391.52	
Account No. Landauer 2 Science Rd Glenwood, IL 60425	-						1,328.63	
Account No. Maninder Kahlon 14631 N 15th Drive Phoenix, AZ 85023	-						Unknown	
Account No. Maricopa County Treasurer PO Box 52133 Phoenix, AZ 85072-2133	-						0.00	
Account No. 401-1398983-001 Phone Lease Marlin Business Services/Lease Phone Eqp PO Box 13604 Philadelphia, PA 19101	-			X	X	X	5,592.90	
Sheet no. <u>13</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	28,313.05

In re Arizona Neurological Institute, P.C.,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
		H W J C						
Account No. 14278 Maximum Exterminating Inc 515 E Carefree Hwy #549 Phoenix, AZ 85085		-					88.00	
Account No. C4467812 Medial Arts Press Corporation PO Box 37647 Philadelphia, PA 19101-0647		-					346.44	
Account No. Medica Attn Recovery Services PO Box 740804 Atlanta, GA 30374-0804		-					31.30	
Account No. Merz North America Inc PO Box 912073 Denver, CO 80291-2073		-					637.50	
Account No. MICA PO Box 53238 Phoenix, AZ 85072-3238		-		X	X		0.00	
Sheet no. <u>14</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	1,103.24

In re Arizona Neurological Institute, P.C.

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. Milligan Lawless, PC 5050 N 40th St #200 Phoenix, AZ 85018	-					2,254.50
Account No. 196272 Muzak LLC PO Box 71070 Charlotte, NC 28272-1070	-					136.66
Account No. 6199 MVAP Medical Supplies Inc 1415 Lawrence Dr Newbury Park, CA 91320	-					1,795.42
Account No. National PT 980 N Michigan Ave #1379 Chicago, IL 60611	-			X	X	75,433.73
Account No. 1509035 NCS Pearson Inc 13036 Collections Center Dr Chicago, IL 60693	-					1,978.89
Sheet no. <u>15</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	81,599.20

In re Arizona Neurological Institute, P.C.,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 0033441254 Nestle Pure Life Direct PO Box 856158 Louisville, KY 40285-6158	-					1,794.11
Account No. Ogletree Deakins Nash Smoak & Steward Patewood Bldg IV 50 International Dr #200 Greenville, SC 29615	-					54,009.25
Account No. OptumHealth PO Box 740804 Atlanta, GA 30374-0804	-					122.14
Account No. 105805700 Patterson Medical PO Box 93040 Chicago, IL 60673-3040	-					5,773.30
Account No. PCIP PO Box 412611 Kansas City, MO 64141	-					497.60
Sheet no. <u>16</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	62,196.40

In re Arizona Neurological Institute, P.C.

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community			A M O U N T O F C L A I M
		H W J C	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	
Account No.					
Pension Benefit Guaranty Corporation Office of the Chief Counsel 1200 K St., N.W. Washington, DC 20005-4026	-			X X X	0.00
Account No. 8000-9000-0745-6928					
Pitney Bowes PO Box 856390 Louisville, KY 40285-6042	-				14.10
Account No. 5483996					
Pitney Bowes Global Financial Svcs LLC PO Box 371887 Pittsburgh, PA 15250-7887	-				1,767.14
Account No. lmo2507-t0021153-ANI					
PMB Arrowhead #1LLC Lockbox 16541 Collection Center Dr Chicago, IL 60693	-			X X	5,861.89
Account No.					
PSS World Medical Inc PO Box 749499 Los Angeles, CA 90074-9499	-				64,901.75
Sheet no. <u>17</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims				Subtotal (Total of this page)	72,544.88

In re Arizona Neurological Institute, P.C.,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community			C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H	W	J C				
Account No. 8000-9000-0745-6928 Purchase Power PO Box 371874 Pittsburgh, PA 15250-7874	-						23,702.31	
Account No. 047486 Recruiting.com PO Box 29386 Phoenix, AZ 85038-9386	-						1,728.00	
Account No. REDW LLC 5353 N 16th St #200 Phoenix, AZ 85016	-						9,635.00	
Account No. Reimbursement Services PO Box 16800 Mesa, AZ 85211	-						6,777.37	
Account No. RICOH Box 650073 Dallas, TX	-				X	X	X	10,626.46
Sheet no. <u>18</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	52,469.14

In re Arizona Neurological Institute, P.C.

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U E D I S S U E D S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
		H W J C						
Account No. 6194140 Ricoh USA Inc PO Box 31001-0850 Pasadena, CA 91110-0850	-			X	X	X	10,010.78	
Account No. Ridenour Hienton & Lewis Chase Tower 201 N Central Ave #3300 Phoenix, AZ 85004-1052	-						1,857.50	
Account No. Ross, Mitchell, MD c/o Arizona Cardiology Group 340 E Palm Ln #175 Phoenix, AZ 85004	-						4,455.78	
Account No. E-100 pmsroc-t0000320-KSSRGH-S Scottsdale Ridge Office Condo Assoc c/o Evergreen Commercial Realty LLC 2390 E Camelback Rd #410 Phoenix, AZ 85016	-						5,129.53	
Account No. Screen Inc 4026 NE 55th St #C-115 Seattle, WA 98105	-						980.00	
Sheet no. <u>19</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	22,433.59

In re Arizona Neurological Institute, P.C.,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	
		H W J C						
Account No. 27540 Sightcare Vision Plan 220 N McKemy Ave Chandler, AZ 85226	-					X	0.00	
Account No. Softnet Systems INC 12635 N 2nd St Phoenix, AZ 85022	-						3,432.33	
Account No. 04232013 Solstice Neurosciences Inc Dept 8341 Carol Stream, IL 60122-8341	-						2,180.00	
Account No. SRP PO Box 80062 Prescott, AZ 86304-8062	-					X	0.00	
Account No. 1000197084 St Jude Medical 22400 Network Pl Chicago, IL 60673-1224	-						1,686.00	
Sheet no. <u>20</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	7,298.33

In re Arizona Neurological Institute, P.C.,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
		H W J C						
Account No. LA 1812989 Staples Advantage Dept LA PO Box 83689 Chicago, IL 60696-3689		-					19,233.92	
Account No. Staples Dept 82 0004451100 PO Box 9020 Des Moines, IA 50368-9020		-					2,720.57	
Account No. Statewide Interpreting Services PO Box 39916 Phoenix, AZ 85069-0916		-					3,786.25	
Account No. 95420 Stryker Sales Corp PO Box 70119 Chicago, IL 60673-0119		-					25,823.02	
Account No. Telco of Phoenix 1515 W Univesity Dr #104 Tempe, AZ 85281		-		X	X	X	1,914.05	
Sheet no. <u>21</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	53,477.81

In re Arizona Neurological Institute, P.C.,
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	
		H W J C						
Account No. 5909090.6338446.7605524 Terminix Processing Center PO Box 742592 Cincinnati, OH 45274-2592		-					735.00	
Account No. The Retirement Plan Company, LLC PO Box 1429 Brentwood, TN 37024-1429		-					0.00	
Account No. Tiffany & Bosco 2525 E Camelback Rd 3rd Fl Phoenix, AZ 85016-9240		-					136,416.18	
Account No. 11092 Titan Alarm Inc 2401 W Behrend Dr #25 Phoenix, AZ 85027		-					134.97	
Account No. Tricare West Region PO Box 100268 Columbia, SC 29202		-					80.37	
Sheet no. <u>22</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)	137,366.52

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. UCI Attn: Aleta Rawdon PO Box 159019 Columbus, OH 43215	-						163.20
Account No. Ultrasound of America 5303 W Angela Dr Glendale, AZ 85308	-						6,075.38
Account No. 3732854-9 USA Mobility Wireless PO Box 660324 Dallas, TX 75266-0324	-						181.44
Account No. Verizon Wireless PO Box 660108 Dallas, TX 75266-0108	-						3,895.95
Account No. 1023129 Voss Lighting Attn: Accounts Receivable PO Box 22159 Lincoln, NE 68542-2159	-						122.53
Sheet no. <u>23</u> of <u>24</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	10,438.50

In re Arizona Neurological Institute, P.C.

Case No. _____

Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community			C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H	W	J C				
Account No. 603-0053952 Wells Fargo Financial Leasing PO Box 6434 Carol Stream, IL 60197-6434	-				X	X	X	0.00
Account No. Wolters Kluwer Health PO BOx 1590 Hagerstown, MD 21741-1590	-							25.07
Account No. 16911 XLTEK c/o T45919U; PO Box 4591 Stn A Toronto Ontario M5W 4X5	-							5,344.34
Account No.								
Account No.								

Sheet no. 24 of 24 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) **5,369.41**

Total
(Report on Summary of Schedules) **1,082,045.36**

In re Arizona Neurological Institute, P.C.

Case No. _____

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.
5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013	LEASE: 6/28/13 PROPERTY: 3411 N 5th Ave #201, Phoenix AZ 85013 (1,802 sq ft) TERM: 8/1/13 - 11/30/16
AIP TB Plaza I LLC Main Street Real Estate Advisors 7333 E Doubletree Ranch Rd #280 Scottsdale, AZ 85258	LEASE: 4/ /12 PROPERTY: Thunderbird Plaza (5,850 sq ft) TERM: 120 months AMEND: 5/21/12 AMEND: 2/1/13 (through 1/31/23) AMEND: 11/1/13 (through 1/31/23) AMEND: 11/1/13 (through 1/31/23)
ANI Pain, LLC Attn: Syal Atul, MD 10474 W Thunderbird Blvd #200 Sun City, AZ 85351	LEASE: 5/28/13; PROPERTY: TERM: 2/1/13 - 1/31/23
Compugroup Medical 125 High Street Boston, MA 02110	PM and EHR system. Lessee.
KSS MEDICAL OFFICES LLC 10474 W Thunderbird Blvd Suite 200 Sun City, AZ 85351	LEASE: 11/10/08; PROPERTY: Unit 2, Lakes Medical Plaza (12,399 sq ft) TERM: 11/15/08 - 11/30/18
KSSGHAPCVB, LLC Attn: Jatin Shah, MD 10474 W Thunderbird Blvd #200 Sun City, AZ 85351	LEASE: 5/28/13; PROPERTY: 11851 N 51st. Avenue Building E, #210 Glendale, AZ 85304 TERM: 5/1/10 - 2/28/20
KSSRGH Real Estate Holdings, LLC c/o ANI Attn: Maninder Kahlon, MD 10474 W Thunderbird Blvd #200 Sun City, AZ 85351	LEASE: 2/8/7; PROPERTY: 10240 W Indian School Rd #115, Phoenix AZ 85037 (4,979 sq ft) TERM: 120 months
KSSRGH Scottsdale Real Estate Holdings 10474 W Thunderbird Blvd #2001 Attn: Justin Shah, MD Sun City, AZ 85351	LEASE: 9/1/07 PROPERTY: Scottsdale Ridge building E, #100, 7304 Deer Valley Rd Scottsdale AZ (4,141.7 sq ft) TERM: 120 months
Marlin Business Lease Phone Equip PO Box 13604 Philadelphia, PA 19101	401-1398983-001 Phone Lease

In re Arizona Neurological Institute, P.C.

Case No. _____

Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

(Continuation Sheet)

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.
Pitney Bowes Global PO Box 371887 Pittsburgh, PA 15250	Postage meter. Expires 1/2015. Lessee
PMB Arrohead #1 LLC 12348 High Bluff Dr #100 San Diego, CA 92130	LEASE: 9/12/13 PROPERTY: Arrowhead Medical Plaza I, #202, 6525 W Sack Dr, Glendale AZ 85308 (1,425 sq ft) TERM: 11/1/13 - 1/31/17
RICOH Box 650073 Dallas, TX	Copier leases
Ricoh USA Inc PO Box 31001-0850 Pasadena, CA 91110-0850	Equipment lease.
Sageland Financing 1350 N. Grant St. Kennewick, WA 99336	AEE6 machine. Expires 2015. Lessee.
Wells Fargo Leasing PO Box 6434 Carol Stream, IL 60197	Color copier. 1/2015. Lessee.

In re Arizona Neurological Institute, P.C.

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
Andre Hagevick 13360 W. Via Caballo Blanco Peoria, AZ 85383	5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013
Andrew Gorman 6202 E. Via Estrella Ave. Paradise Valley, AZ 85253	5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013
Atul Syal 6025 E. Caron Cir. Paradise Valley, AZ 85253	5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013
Atul Syal 6025 E. Caron Cir. Paradise Valley, AZ 85253	AIP TB Plaza I LLC Main Street Real Estate Advisors 7333 E Doubletree Ranch Rd #280 Scottsdale, AZ 85258
Jason Reinhart 10474 W. Thunderbird Rd. Suite 200 Sun City, AZ 85351	5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013
Jatin Shah 15227 N 15th Dr. Phoenix, AZ 85023	5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013
Jatin Shah 15227 N 15th Dr. Phoenix, AZ 85023	AIP TB Plaza I LLC Main Street Real Estate Advisors 7333 E Doubletree Ranch Rd #280 Scottsdale, AZ 85258
Lawrence Kutz 7324 E. Kalil Dr. Scottsdale, AZ 85260	5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013
Maninder Kahlon 14631 N 15th Dr. Phoenix, AZ 85023	5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013
Maninder Kahlon 14631 N 15th Dr. Phoenix, AZ 85023	AIP TB Plaza I LLC Main Street Real Estate Advisors 7333 E Doubletree Ranch Rd #280 Scottsdale, AZ 85258
Nirmala Aryal 6721 N 65th St. Paradise Valley, AZ 85253	5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

SCHEDULE H - CODEBTORS
(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Praful Reddy 6636 E. Caron Dr. Paradise Valley, AZ 85253	5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013

**United States Bankruptcy Court
District of Arizona**

In re Arizona Neurological Institute, P.C.
Debtor(s)

Case No. _____
Chapter 11

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the Chief Operating Officer 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 43 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date November 26, 2014

Signature /s/ Eric Chappell
Eric Chappell
Chief Operating Officer

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.

United States Bankruptcy Court
District of Arizona

In re Arizona Neurological Institute, P.C.

Debtor(s)

Case No.

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.

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.

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:

"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.

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.

Table with 2 columns: AMOUNT, SOURCE. Rows for 2014 YTD, 2013, and 2012.

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.

Table with 2 columns: AMOUNT, SOURCE

3. Payments to creditors

None **Complete a. or b., as appropriate, and c.**

a. *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
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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.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
See attached		\$1,414,616.63	\$807,487.63

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	AMOUNT PAID	AMOUNT STILL OWING
Jatin Shah 15227 N 15th Drive Phoenix, AZ 85023	Salary and expenses - 12 months	\$567,395.29	\$64,825.35
Andre Hagevik 13360 W. Via Caballo Blanco Peoria, AZ 85383	Salary and expenses - 12 months	\$179,912.68	\$29,198.64
Atul Syal 6025 E. Caron Cir. Paradise Valley, AZ 85253	Salary and expenses - 12 months	\$548,714.93	\$65,091.30
Andrew Gorman 6202 E Via Estrella Ave. Paradise Valley, AZ 85253	Salary and expenses - 12 months	\$339,769.46	\$84,045.12
Nirmala Aryal 6721 N 65th St. Paradise Valley, AZ 85253	Salary and expenses - 12 months	\$278,856.83	\$27,826.80
Jason Reinhart 44 W Monroe St. Phoenix, AZ 85003	Salary and expenses - 12 months	\$436,403.00	\$43,324.04
Maninder Kahlon 14631 N 15th Drive Phoenix, AZ 85023	Various	\$858,381.39	\$0.00

* 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.

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
Lawrence Kutz 7324 E. Kalil Dr. Scottsdale, AZ 85260	Salary and expenses	\$482,528.73	\$131,651.22
Praful Reddy 6636 E. Caron Dr. Paradise Valley, AZ 85253	Salary and expenses	\$3,593.32	\$0.00
Eric Chappell 2084 N 159th Ave. Goodyear, AZ 85395	Salary	\$67,360.36	\$0.00
KSS MEDICAL OFFICES LLC 10474 W Thunderbird Blvd., Ste. 200 Sun City, AZ 85351	Rent 12/1/13 - petition	\$302,790.78	\$0.00
KSSGHAPCVB, LLC 10474 W Thunderbird Blvd #200 Sun City, AZ 85351	Rent 12/1/13 - petition	\$168,368.00	\$21,046.00
KSSRGH Scottsdale Real Estate Holdings 10474 W Thunderbird Blvd #200 Sun City, AZ 85351	Rent 12/1/13 - petition	\$111,612.15	\$0.00
KSSRGH Real Estate Holdings, LLC 10474 W Thunderbird Blvd #200 Sun City, AZ 85351	Rent 12/1/13 to petition	\$98,691.75	\$23,367.10

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.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Praful Reddy v. Arizona Neurological Institute P.C., et al., CV2014-004847	Shareholder dispute	Arizona Superior Court - Downtown	Pending
Maninder Kahlon v. Arizona Neurological Institute, PC, CV2014-007211	Shareholder dispute	Arizona Superior, Downtown	Pending
Karen Hudson v. Arizona Neurological Institute PC, CV2014-012390	Employee wage dispute	Arizona Superior, Downtown	Pending

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
5th Avenue Professional Office LLC 3411 N 5th Ave #300 Phoenix, AZ 85013	9/31/14	Personal property - \$3,000
PMB Arrowhead #1LLC Lockbox 16541 Collection Center Dr Chicago, IL 60693	9/30/14	Personal property - \$3,000

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
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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
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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
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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
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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
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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	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Stinson Leonard Street LLP 1850 N Central Ave #2100 Phoenix, AZ 85004-4584	9/9/14	114,641.50

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	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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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
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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
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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
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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	AMOUNT OF SETOFF
Thunderbird Plaza 7333 E. Doubletree Ranch Rd. Scottsdale, AZ 85258	10/1/14	8287.5
5th Avenue Office/Lease 5th Avenue Professional Office 3411 N 5th Ave., Ste. 300 Phoenix, AZ 85013	10/1/14	2252.5
Osborn Office Lease/HCP, Inc. File #50065 Los Angeles, CA 90074	10/1/14	5272.96
Arrowhead Office/Lease PMB Arrowhead #1, LLC 16541 Collections Center Dr. Chicago, IL 60693	10/1/14	2321.67

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
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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
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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	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None 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.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None 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
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18 . Nature, location and name of business

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.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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None 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.

NAME	ADDRESS
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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	DATES SERVICES RENDERED
Eric Chappell 2084 N 159th Ave. Goodyear, AZ 85395	09/26/14 - present
Jessica Ticer 1317 W Windrift Way Gilbert, AZ 85233	12/2013 - 09/2014
Randy Shannon 4750 W Michigan Ave. Glendale, AZ 85308	03/2012 - 03/2014
Karen Hudson 4439 E Sierra Sunset Trail Cave Creek, AZ 85331	2007 - 12/2013

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 REDW LLC	ADDRESS 5353 N 16th St #200 Phoenix, AZ 85016	DATES SERVICES RENDERED July 2013 - July 2014
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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 REDW LLC	ADDRESS 5353 N 16th St #200 Phoenix, AZ 85016
Eric Chappell	2084 N 159th Ave. Goodyear, AZ 85395

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 The Core Institute, Inc. 18444 N 26th Ave. Suite 210 Phoenix, AZ 85023	DATE ISSUED 06/2014
Wells Fargo Sun City, AZ	Various

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 09/05/14	INVENTORY SUPERVISOR George Mitnacht	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis) 15,000 - cost
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None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY 09/05/14	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS The CORE Institute, PC 18444 N 26th Ave., Ste. 210 Phoenix, AZ 85023
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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
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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 Jatin B. Shah 15227 N 15th Drive Phoenix, AZ 85023	TITLE Treasurer	NATURE AND PERCENTAGE OF STOCK OWNERSHIP 16.67
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NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
Syal, Atul 6025 E. Caron Cir. Paradise Valley, AZ 85253	President	16.67
Reinhart, Jason C 44 W. Monroe St. Phoenix, AZ 85003	Vice-president	16.67
Gorman, Andrew Scott 6202 E. Via Estrella Ave. Paradise Valley, AZ 85253	Treasurer	16.67
Hagevik, Andre 13360 W. Via Caballo Blanco Peoria, AZ 85383	Secretary	16.67
Aryal, Nirmala 6721 N 65th St. Paradise Valley, AZ 85253	Secretary	16.67

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
Kirk Puttlitz, MD 21605 N 46th Place Phoenix, AZ 85050	Shareholder	2/14
Praful Reddy, MD 6636 E Caron Dr. Paradise Valley, AZ 85253	Shareholder	04/30/2014
Kahlon, Maninder S 14631 N 15th Dr. Phoenix, AZ 85023	President	04/30/2014
Lawrence Kutz, DO 7324 E Kalil Dr. Scottsdale, AZ 85260	Shareholder	04/30/14

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
See 3(c)		

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)

**Arizona Neurological Institute, PC Profit Sharing Plan
The Retirement Company
162 Westgate Circle, Suite 170
Brentwood, TN 37027
Kyle Brown 615-515-4459**

86-0859566

**Arizona Neurological Institute, PC Defined Benefit Plan
Morgan Stanley
609 Deep Valley Drive, Suite 400
Rolling Hills Estates, CA 90274
Kristian Widor 800-544-3617**

86-0859566

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 **November 26, 2014** _____

Signature **/s/ Eric Chappell** _____
Eric Chappell
Chief Operating Officer

[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

**United States Bankruptcy Court
District of Arizona**

In re Arizona Neurological Institute, P.C.

Debtor(s)

Case No.

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. 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 to 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	\$	<u>46,936.10</u>
Prior to the filing of this statement I have received	\$	<u>46,936.10</u>
Balance Due	\$	<u>0.00</u>

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):

4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: November 26, 2014

/s/ Christopher C Simpson

**Christopher C Simpson
Stinson Leonard Street LLP
1850 N Central Ave #2100
Phoenix, AZ 85004-4584
602-279-1600 Fax: 602-240-6925
anne.finch@stinsonleonard.com**

**United States Bankruptcy Court
District of Arizona**

In re Arizona Neurological Institute, P.C.
Debtor

Case No. _____

Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with Rule 1007(a)(3) for filing in this chapter 11 case.

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Aryal, Nirmala 6721 N 65th Street Paradise Valley, AZ 85253		16.67%	LLC
Gorman, Andrew Scott 6202 E. Via Estrella Ave. Paradise Valley, AZ 85253		16.67%	LLC
Hagevik, Andre 13360 W. Via Caballo Blanco Peoria, AZ 85383		16.67%	LLC
Reinhart, Jason C 44 W. Monroe St. Phoenix, AZ 85003		16.67%	LLC
Shah, Jatin B 15227 N 15th Dr. Phoenix, AZ 85023		16.67%	LLC
Syal, Atul 6025 E Caron Cir. Paradise Valley, AZ 85253		16.67%	LLC

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the Chief Operating Officer of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date November 26, 2014

Signature /s/ Eric Chappell
Eric Chappell
Chief Operating Officer

*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.*

**United States Bankruptcy Court
District of Arizona**

In re Arizona Neurological Institute, P.C.

Debtor(s)

Case No.

Chapter 11

DECLARATION

I, the Chief Operating Officer of the corporation named as the debtor in this case, do hereby certify, under penalty of perjury, that the Master Mailing List, consisting of 16 sheet(s), is complete, correct and consistent with the debtor(s)' schedules.

Date: November 26, 2014

/s/ Eric Chappell

Eric Chappell/Chief Operating Officer

Signer/Title

Date: November 26, 2014

/s/ Christopher C Simpson

Signature of Attorney

Christopher C Simpson

Stinson Leonard Street LLP

1850 N Central Ave #2100

Phoenix, AZ 85004-4584

602-279-1600 Fax: 602-240-6925

MML-5

Arizona Neurological Institute, P.C. -

5TH AVENUE PROFESSIONAL OFFICE LLC
3411 N 5TH AVE #300
PHOENIX AZ 85013

ACCENT
Acct No none
PO BOX 952366
SAINT LOUIS MO 63195-2366

ADAMOWICZ, JOHN
PO BOX 26176
PHOENIX AZ 85068-6176

ADT SECURITY SERVICES
Acct No 01200 189061312
PO BOX 371956
PITTSBURGH PA 15250-7956

AETNA
Acct No none
ATTN: REFUND DEPT
31355 OAK CREST DR #100
WESTLAKE VILLAGE CA 91361

AETNA
Acct No none
PO BOX 14079
LEXINGTON KY 40512-4079

AIKEN SCHENK HAWKINS & RICCIARDI PC
Acct No none
2390 E CAMELBACK RD #400
PHOENIX AZ 85016

AIP TB PLAZA I LLC
MAIN STREET REAL ESTATE ADVISORS
7333 E DOUBLETREE RANCH RD #280
SCOTTSDALE AZ 85258

AIR DYNAMICS REFRIGERATION
Acct No none
3655 W ANTHEM WY #A 109-408
PHOENIX AZ 85086

Arizona Neurological Institute, P.C. -

ALLERGAN USA INC
Acct No 171320
12975 COLLECTION CENTER DR
CHICAGO IL 60693

ALLIED FIRE PROTECTION INC
Acct No none
2845 N NORFOLK
MESA AZ 85215

ALSCO
Acct No 072871
4707 W CAMELBACK RD
PHOENIX AZ 85031

AMBU INC
Acct No 4000019357
PO BOX 347818
PITTSBURGH PA 15251-4818

AMERICAN ACADEMY OF NEUROLOGY
Acct No none
SDS 12-1147
PO BOX 86
MINNEAPOLIS MN 55486-1147

AMERICAN COLLEGE OF OSTEOPATHIC NEURO
Acct No none
28595 ORCHARD LAKE RD #200
FARMINGTON MI 48334

AMERICAN FIDELITY ASSURANCE CO
Acct No none
PO BOX 268805
OKLAHOMA CITY OK 73126-8805

AMIR BULJINA, MD
7737 W. VILLA RITA DR.
GLENDALE AZ 85308

AMY KNAPP PSY.D
18440 N 68TH ST.
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PHOENIX AZ 85054

Arizona Neurological Institute, P.C. -

ANDRE HAGEVICK
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PEORIA AZ 85383

ANDRE HAGEVIK
13360 W. VIA CABALLO BLANCO
PEORIA AZ 85383

ANDREW GORMAN
6202 E. VIA ESTRELLA AVE.
PARADISE VALLEY AZ 85253

ANI PAIN, LLC
ATTN: SYAL ATUL, MD
10474 W THUNDERBIRD BLVD #200
SUN CITY AZ 85351

APS
Acct No none
PO BOX 2906
PHOENIX AZ 85062-2906

ARIZONA DEPT OF REVENUE
SPECIAL OPERATIONS SECTION
1600 W MONROE 7TH FL
PHOENIX AZ 85007-2612

ARIZONA DOPPLER SPECIALISTS
Acct No none
727 E BETHANY HOME RD #A106
PHOENIX AZ 85014

ARIZONA OSTEOPATHIC MEDICAL ASSN
Acct No none
5150 N 16TH ST #A-122
PHOENIX AZ 85016

ASSOCIATION CAREER NETWORK
Acct No none
9620 EXECUTIVE CENTER DR. N., #200
SAINT PETERSBURG FL 33702

ATUL SYAL
6025 E. CARON CIR.
PARADISE VALLEY AZ 85253

Arizona Neurological Institute, P.C. -

BESSE MEDICAL

Acct No none
9075 CENTRE POINT DR #140
WEST CHESTER OH 45069

BIOLOGIX DIRECT

Acct No none
12601 COLLECTIONS CENTER DR
CHICAGO IL 60693

BOSTON SCIENTIFIC CORPORATION

Acct No 341452
PO BOX 951653
DALLAS TX 75395-1653

BRIAN KLINCK, PSY.D

3138 N 53RD ST.
PHOENIX AZ 85018

BROOKSIDE OFFICE PARK TRUST ACCOUNT

Acct No none
C/O CASE HUFF & ASSOCIATES INC
14861 N SCOTTSDALE RD #105
SCOTTSDALE AZ 85254

CADWELL LABORATORIES INC

Acct No C147363
909 N KELLOGG ST
KENNEWICK WA 99336

CAESAR'S UNIFORMS

Acct No none
18795 N REEMS RD #111
SURPRISE AZ 85374

CENTURYLINK

PO BOX 29040
PHOENIX AZ 85038-9040

CINTAS DOCUMENT MANAGEMENT

PO BOX 631025
CINCINNATI OH 45263-1025

CITIES WEST PUBLISHING INC

15169 N SCOTTSDALE RD #C310
SCOTTSDALE AZ 85254

Arizona Neurological Institute, P.C. -

CITY OF SCOTTSDALE TAX & LICENSE
7447 E INDIAN SCHOOL RD #110
SCOTTSDALE AZ 85251

CLIFTONLARSONALLEN LLP
20 E THOMAS RD #2300
PHOENIX AZ 85012-3111

CNA INSURANCE
Acct No 3008112290
PO BOX 790094
SAINT LOUIS MO 63179-0092

COMPUGROUP MEDICAL
125 HIGH STREET
BOSTON MA 02110

COMPUGROUP MEDICAL INC
125 HIGH ST 8TH FL
BOSTON MA 02110

CONCENTRA OCCUPATIONAL HEALTH CENTERS SW
Acct No N09-0360133850
1818 E SKY HARBOR CIR #150
PHOENIX AZ 85034-3407

CONFIDENTIAL CLAIMANT #1
Acct No none

CONFIDENTIAL CLAIMANT #2

CONFIDENTIAL CLAIMANT #3

CONFIDENTIAL CLAIMANT #4

CONFIDENTIAL CLAIMANT #5
Acct No none

Arizona Neurological Institute, P.C. -

CONFIDENTIAL CLAIMANT #6
Acct No none

CONFIDENTIAL CLAIMANT #7

CORNERSTONE MEDICAL TRANSCRIPTION LLC
ATTN: SHERYL LYNN MARKEL
PO BOX 5849
PEORIA AZ 85385-5849

COX COMMUNICATIONS PHOENIX
Acct No 001 8501 207567701
PO BOX 53249
PHOENIX AZ 85072-3249

DISH NETWORK
Acct No 8255 7070 8059 1774
PO BOX 94063
PALATINE IL 60094-4063

EHTISHAM, ASAD
Acct No none
7240 W. MONTE CRISTO AVE.
PEORIA AZ 85382

EMDEON BUSINESS SERVICES
Acct No MED-23630
PO BOX 572490
MURRAY UT 84157-2490

EROSS, ERIC, DO
13616 N BONITA DR
FOUNTAIN HILLS AZ 85268

EVAN FREEDMAN, DO
3609 E HALF HITCH PL.
PHOENIX AZ 85050

FEDEX
Acct No 2541-6870-0
PO BOX 7221
PASADENA CA 91109-7321

Arizona Neurological Institute, P.C. -

FT MCDOWELL YAVAPAI NATION
C/O CLAIMS RECOVERY DEPT
PO BOX 998
COVINGTON LA 70434

GE CAPITAL C/O RICOH
Acct No 1399568-2736077
C/O RICOH USA PROGRAM
PO BOX 650073
DALLS TX 75265-0073

HCP MOB SCOTTSDALE LLC
ATTN: ANN BOHLKE
#2022 FILE #50065
LOS ANGELES CA 90074-0065

HEALTH SMART BENEFIT SOLUTIONS INC
7202 E ROSEWOOD #220
TUCSON AZ 85710

HEALTHNET OF AZ
ATTN: REFUNDS
PO BOX 749801
LOS ANGELES CA 90074-9801

HMWS HEALTHCARE MEDICAL WASTE SERV #2326
PO BOX 10958
CASA GRANDE AZ 85130-0958

HOLT, JAMES LAW FIRM
1255 W 15TH ST #400
PLANO TX 75075

INTERNAL REVENUE SERVICE
CENTRALIZED INSOLVENCY OPERATIONS
PO BOX 21126
PHILADELPHIA PA 19114-0326

INTRAFUSION ATTN: TERRY SEAMAN
Acct No Intrafusion Revenue
1920 N MEMORIAL WY #112
HOUSTON TX 77007

JASON REINHART
44 W MONROE ST.
PHOENIX AZ 85003

Arizona Neurological Institute, P.C. -

JATIN SHAH
15227 N 15TH DR.
PHOENIX AZ 85023

KOPY PRINT LLC
5920 N 132ND DR
LITCHFIELD PARK AZ 85340

KSS MEDICAL OFFICES LLC
10474 W THUNDERBIRD BLVD
SUITE 200
SUN CITY AZ 85351

KSSGHAPCVB, LLC
10474 W THUNDERBIRD BLVD #200
SUN CITY AZ 85351

KSSRGH REAL ESTATE HOLDINGS, LLC
C/O ANI ATTN: MANINDER KAHLON, MD
10474 W THUNDERBIRD BLVD #200
SUN CITY AZ 85351

KSSRGH REAL ESTATE LLC
10474 W THUNDERBIRD BLVD #200
SUN CITY AZ 85351

KSSRGH SCOTTSDALE REAL ESTATE HOLDINGS
10474 W THUNDERBIRD BLVD #2001
ATTN: JUSTIN SHAH, MD
SUN CITY AZ 85351

LA PAZ MEDICAL CTR CONDO ASSOC LLC
Acct No ANI-Bldg 1
10240 W INDIAN SCHOOL RD #140
PHOENIX AZ 85037

LABORATORY CORPORATION OF AMER
PO BOX 12140
BURLINGTON NC 27216

LAKES MEDICAL PLAZA CONDOMINIUM ASSOC
Acct No KSSMED
9401 W THUNDERBIRD RD #200
PEORIA AZ 85381

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LANDAUER
2 SCIENCE RD
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LAWRENCE KUTZ
7324 E. KALIL DR.
SCOTTSDALE AZ 85260

LAWRENCE KUTZ, DO
7324 E. KALIL DR.
SCOTTSDALE AZ 85260

LUIS ARRANGULA - C/O PAULA A. WILLIAMS
MAY POTENZA BARAN & GILLESPIE, PC
201 N CENTRAL AVE., 22ND FLOOR
PHOENIX AZ 85004

MANINDER KAHLON
14631 N 15TH DRIVE
PHOENIX AZ 85023

MARICOPA COUNTY TREASURER
PO BOX 52133
PHOENIX AZ 85072-2133

MARLIN BUSINESS LEASE PHONE EQUIP
PO BOX 13604
PHILADELPHIA PA 19101

MARLIN BUSINESS SERVICES/LEASE PHONE EQP
Acct No 401-1398983-001 Phone Lease
PO BOX 13604
PHILADELPHIA PA 19101

MAXIMUM EXTERMINATING INC
Acct No 14278
515 E CAREFREE HWY #549
PHOENIX AZ 85085

MEDIAL ARTS PRESS CORPORATION
Acct No C4467812
PO BOX 37647
PHILADELPHIA PA 19101-0647

Arizona Neurological Institute, P.C. -

MEDICA
ATTN RECOVERY SERVICES
PO BOX 740804
ATLANTA GA 30374-0804

MERZ NORTH AMERICA INC
PO BOX 912073
DENVER CO 80291-2073

MICA
PO BOX 53238
PHOENIX AZ 85072-3238

MILLIGAN LAWLESS, PC
5050 N 40TH ST #200
PHOENIX AZ 85018

MUZAK LLC
Acct No 196272
PO BOX 71070
CHARLOTTE NC 28272-1070

MVAP MEDICAL SUPPLIES INC
Acct No 6199
1415 LAWRENCE DR
NEWBURY PARK CA 91320

NATIONAL PT
980 N MICHIGAN AVE #1379
CHICAGO IL 60611

NCS PEARSON INC
Acct No 1509035
13036 COLLECTIONS CENTER DR
CHICAGO IL 60693

NESTLE PURE LIFE DIRECT
Acct No 0033441254
PO BOX 856158
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NIRMALA ARYAL
6721 N 65TH ST.
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OGLETREE DEAKINS NASH SMOAK & STEWARD
PATEWOOD BLDG IV
50 INTERNATIONAL DR #200
GREENVILLE SC 29615

OPTUMHEALTH
PO BOX 740804
ATLANTA GA 30374-0804

PATTERSON MEDICAL
Acct No 105805700
PO BOX 93040
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PCIP
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KANSAS CITY MO 64141

PENSION BENEFIT GUARANTY CORPORATION
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WASHINGTON DC 20005-4026

PITNEY BOWES
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PO BOX 856390
LOUISVILLE KY 40285-6042

PITNEY BOWES GLOBAL
PO BOX 371887
PITTSBURGH PA 15250

PITNEY BOWES GLOBAL FINANCIAL SVCS LLC
Acct No 5483996
PO BOX 371887
PITTSBURGH PA 15250-7887

PMB ARROHEAD #1 LLC
12348 HIGH BLUFF DR #100
SAN DIEGO CA 92130

PMB ARROWHEAD #1LLC
Acct No lmo2507-t0021153-ANI
LOCKBOX 16541 COLLECTION CENTER DR
CHICAGO IL 60693

Arizona Neurological Institute, P.C. -

PRADFUL REDDY, MD
6636 E. CARON DR.
PARADISE VALLEY AZ 85253

PRAFUL REDDY
6636 E. CARON DR.
PARADISE VALLEY AZ 85253

PSS WORLD MEDICAL INC
PO BOX 749499
LOS ANGELES CA 90074-9499

PURCHASE POWER
Acct No 8000-9000-0745-6928
PO BOX 371874
PITTSBURGH PA 15250-7874

RECRUITING.COM
Acct No 047486
PO BOX 29386
PHOENIX AZ 85038-9386

REDW LLC
5353 N 16TH ST #200
PHOENIX AZ 85016

REIMBURSEMENT SERVICES
PO BOX 16800
MESA AZ 85211

RICOH
BOX 650073
DALLAS TX

RICOH USA INC
PO BOX 31001-0850
PASADENA CA 91110-0850

RIDENOUR HIENTON & LEWIS
CHASE TOWER
201 N CENTRAL AVE #3300
PHOENIX AZ 85004-1052

Arizona Neurological Institute, P.C. -

ROSS, MITCHELL, MD
C/O ARIZONA CARDIOLOGY GROUP
340 E PALM LN #175
PHOENIX AZ 85004

SAGELAND FINANCING
1350 N. GRANT ST.
KENNEWICK WA 99336

SCOTTSDALE RIDGE OFFICE CONDO ASSOC
Acct No E-100 pmsroc-t0000320-KSSRGH-S
C/O EVERGREEN COMMERCIAL REALTY LLC
2390 E CAMELBACK RD #410
PHOENIX AZ 85016

SCREEN INC
4026 NE 55TH ST #C-115
SEATTLE WA 98105

SIGHTCARE VISION PLAN
Acct No 27540
220 N MCKEMY AVE
CHANDLER AZ 85226

SOFTNET SYSTEMS INC
12635 N 2ND ST
PHOENIX AZ 85022

SOLSTICE NEUROSCIENCES INC
Acct No 04232013
DEPT 8341
CAROL STREAM IL 60122-8341

SRP
PO BOX 80062
PRESCOTT AZ 86304-8062

ST JUDE MEDICAL
Acct No 1000197084
22400 NETWORK PL
CHICAGO IL 60673-1224

STACY DONLON, MD
13420 N 35TH ST.
PHOENIX AZ 85032

Arizona Neurological Institute, P.C. -

STAPLES ADVANTAGE DEPT LA
Acct No LA 1812989
PO BOX 83689
CHICAGO IL 60696-3689

STAPLES DEPT 82 0004451100
PO BOX 9020
DES MOINES IA 50368-9020

STATEWIDE INTERPRETING SERVICES
PO BOX 39916
PHOENIX AZ 85069-0916

STRYKER SALES CORP
Acct No 95420
PO BOX 70119
CHICAGO IL 60673-0119

SWARAJ SINGH, MD
7577 W. FIREBIRD DR.
GLENDALE AZ 85308

TELCO OF PHOENIX
1515 W UNIVESITY DR #104
TEMPE AZ 85281

TERMINIX PROCESSING CENTER
Acct No 5909090.6338446.7605524
PO BOX 742592
CINCINNATI OH 45274-2592

THE RETIREMENT PLAN COMPANY, LLC
PO BOX 1429
BRENTWOOD TN 37024-1429

TIFFANY & BOSCO
2525 E CAMELBACK RD 3RD FL
PHOENIX AZ 85016-9240

TITAN ALARM INC
Acct No 11092
2401 W BEHREND DR #25
PHOENIX AZ 85027

Arizona Neurological Institute, P.C. -

TOBY YALTHO, MD
5116 POCAHONTAS ST.
BELLAIRE TX 77401

TODD HERMAN, MD
8094 W. ZOE ELLA WAY
PEORIA AZ 85382

TRICARE WEST REGION
PO BOX 100268
COLUMBIA SC 29202

UCI
ATTN: ALETA RAWDON
PO BOX 159019
COLUMBUS OH 43215

ULTRASOUND OF AMERICA
5303 W ANGELA DR
GLENDALE AZ 85308

USA MOBILITY WIRELESS
Acct No 3732854-9
PO BOX 660324
DALLAS TX 75266-0324

VERIZON WIRELESS
PO BOX 660108
DALLAS TX 75266-0108

VOSS LIGHTING
Acct No 1023129
ATTN: ACCOUNTS RECEIVABLE
PO BOX 22159
LINCOLN NE 68542-2159

WELLS FARGO FINANCIAL LEASING
Acct No 603-0053952
PO BOX 6434
CAROL STREAM IL 60197-6434

WELLS FARGO LEASING
PO BOX 6434
CAROL STREAM IL 60197

Arizona Neurological Institute, P.C. -

WOLTERS KLUWER HEALTH
PO BOX 1590
HAGERSTOWN MD 21741-1590

XLTEK
Acct No 16911
C/O T45919U; PO BOX 4591 STN A
TORONTO ONTARIO M5W 4X5

**United States Bankruptcy Court
District of Arizona**

In re Arizona Neurological Institute, P.C.
Debtor(s)

Case No. _____
Chapter 11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for Arizona Neurological Institute, P.C. in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

November 26, 2014
Date

/s/ Christopher C Simpson
Christopher C Simpson
Signature of Attorney or Litigant
Counsel for Arizona Neurological Institute, P.C.
Stinson Leonard Street LLP
1850 N Central Ave #2100
Phoenix, AZ 85004-4584
602-279-1600 Fax:602-240-6925
anne.finch@stinsonleonard.com