

B1 (Official Form 1)(04/13)

**United States Bankruptcy Court
Central District of California**

Voluntary Petition

| | |
|--|---|
| Name of Debtor (if individual, enter Last, First, Middle): Good Shepherd Ambulance, LLC | 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) 51-0647278 | 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): 5330 Harbor Street Commerce, CA | Street Address of Joint Debtor (No. and Street, City, and State): |
| ZIP Code 90040 | ZIP Code |
| County of Residence or of the Principal Place of Business: Los Angeles | 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). |
|--|---|

Statistical/Administrative Information

Debtor estimates that funds will be available for distribution to unsecured creditors.
 Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.

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 checked="" type="checkbox"/> \$100,001 to \$500,000 | <input 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 |
|--|--|---|---|---|---|--|---|---|--|

THIS SPACE IS FOR COURT USE ONLY

| | | | |
|---|---|---|--|
| Voluntary Petition <i>(This page must be completed and filed in every case)</i> | | Name of Debtor(s): Good Shepherd Ambulance, LLC | |
| 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: | |
| Exhibit A (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.) <input type="checkbox"/> Exhibit A is attached and made a part of this petition. | Exhibit B <small>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</small> 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). X _____ Signature of Attorney for Debtor(s) (Date) | | |
| 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? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> 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.) <input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> 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) | | | |
| <input checked="" type="checkbox"/> 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. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> 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) | | | |
| <input type="checkbox"/> 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) | | | |
| <input type="checkbox"/> 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 <input type="checkbox"/> 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. <input type="checkbox"/> 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):

Good Shepherd Ambulance, LLC

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/ Paul Horn
Signature of Attorney for Debtor(s)

Paul Horn
Printed Name of Attorney for Debtor(s)

Law Offices of Paul Horn
Firm Name

**4703 Walnut Grove Avenue
Rosemead, CA 91770**

Address

Email: attorneypaul2000@yahoo.com

800-380-7076 Fax: 800-380-7079

Telephone Number

December 2, 2013

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/ Renato Paul Policarpio
Signature of Authorized Individual

Renato Paul Policarpio
Printed Name of Authorized Individual

Managing Member
Title of Authorized Individual

December 2, 2013

Date

B4 (Official Form 4) (12/07)

**United States Bankruptcy Court
Central District of California**

In re Good Shepherd Ambulance, LLC

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> |
| Central Market Place, LLC 1425 N. Cahuenga Blvd Los Angeles, CA 90028 | Central Market Place, LLC 1425 N. Cahuenga Blvd Los Angeles, CA 90028 | Trade Debt | | 6,700.00 |
| Critical Transport Services LLC 541 Laurel Ave Glendora, CA 91741 | Critical Transport Services LLC 541 Laurel Ave Glendora, CA 91741 | Trade Debt | | 12,900.00 |
| Dartran, Inc. 1409 W. Kenneth Rd., Glendale, CA 91201 | Dartran, Inc. 1409 W. Kenneth Rd., Glendale, CA 91201 | Trade Debt | | 6,789.14 |
| Der Manouel Insurance PO Box 28906 Fresno, CA 93729-8906 | Der Manouel Insurance PO Box 28906 Fresno, CA 93729-8906 | Trade Debt | | 16,850.74 |
| Eduardo Mairén-Pena 3455 Maine Ave Baldwin Park, CA 91706 | Eduardo Mairén-Pena 3455 Maine Ave Baldwin Park, CA 91706 | Labor dispute | | 9,127.62 |
| Employment Development Dept PO BOX 989061 West Sacramento, CA 95798-9061 | Employment Development Dept PO BOX 989061 West Sacramento, CA 95798-9061 | | | 75,000.00 |
| Employment Development Dept PO BOX 989061 West Sacramento, CA 95798-9061 | Employment Development Dept PO BOX 989061 West Sacramento, CA 95798-9061 | | | 50,000.00 |
| First Insurance Funding PO Box 66468 Chicago, IL 60666-0468 | First Insurance Funding PO Box 66468 Chicago, IL 60666-0468 | Trade Debt | | 27,750.11 |
| Internal Revenue Service P.O. BOX 7346 Philadelphia, PA 19101 | Internal Revenue Service P.O. BOX 7346 Philadelphia, PA 19101 | Payroll Taxes | | 350,000.00 |
| Internal Revenue Service P.O. BOX 7346 Philadelphia, PA 19101 | Internal Revenue Service P.O. BOX 7346 Philadelphia, PA 19101 | | | 250,000.00 |

B4 (Official Form 4) (12/07) - Cont.

In re **Good Shepherd Ambulance, LLC**

Case No. _____

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

| (1) <i>Name of creditor and complete mailing address including zip code</i> | (2) <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> | (3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i> | (4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i> | (5) <i>Amount of claim [if secured, also state value of security]</i> |
|---|---|--|---|--|
| John Patrick Policarpio 28218 Picadilly PI Castaic, CA 91384 | John Patrick Policarpio 28218 Picadilly PI Castaic, CA 91384 | Money owe to insider. | | 9,950.00 |
| Knollwood Tire Center 12000 Balboa Blvd #105 Granada Hills, CA 91344 | Knollwood Tire Center 12000 Balboa Blvd #105 Granada Hills, CA 91344 | | | 14,420.00 |
| Leonard Black 74 D Street Salt Lake City, UT 84103 | Leonard Black 74 D Street Salt Lake City, UT 84103 | Loan to the Business | | 12,000.00 |
| Manchih Luling Dixon 7815 Via Genova Burbank, CA 91504 | Manchih Luling Dixon 7815 Via Genova Burbank, CA 91504 | Loan to the business | | 181,250.00 |
| Maria Gomez 1213 N Myers St Burbank, CA 91506 | Maria Gomez 1213 N Myers St Burbank, CA 91506 | Loan to the Business | | 192,507.00 |
| Renato Paul Policarpio 28218 Picadilly PI Castaic, CA 91384 | Renato Paul Policarpio 28218 Picadilly PI Castaic, CA 91384 | Money owe to insider. | | 773,080.00 |
| RomanPower Financial Services Attn: Daryl Blackburn 11436 Hawthorne Blvd Hawthorne, CA 90250 | RomanPower Financial Services Attn: Daryl Blackburn 11436 Hawthorne Blvd Hawthorne, CA 90250 | Loan to the Business | | 166,906.93 |
| Shirley Kitamura 2302 Oak Haven Ave Simi Valley, CA 93063 | Shirley Kitamura 2302 Oak Haven Ave Simi Valley, CA 93063 | Loan to the Business | | 20,000.00 |
| State Compensation Insurance Fund c/o Bank of America P.O. Box 748170 Los Angeles, CA 90074-8170 | State Compensation Insurance Fund c/o Bank of America P.O. Box 748170 Los Angeles, CA 90074-8170 | Trade Debt | | 11,042.75 |
| Stryker Sales Corporation Attn: Stryker Medical PO BOX 9658 Minneapolis, MN 55440-9658 | Stryker Sales Corporation Attn: Stryker Medical PO BOX 9658 Minneapolis, MN 55440-9658 | Trade Debt | | 9,000.00 |

B4 (Official Form 4) (12/07) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor(s)

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

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

I, the Managing Member 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 December 2, 2013

Signature /s/ Renato Paul Policarpio

Renato Paul Policarpio
Managing Member

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
Central District of California**

In re Good Shepherd Ambulance, LLC
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 |
|---|------------------------------|--|------------------------------|
| Alexis Reyes 170 Cymbidium Cir South San Francisco, CA 94080 | Member of the LLC | 20% ownership interest in the LLC | Member of the LLC |
| Genbert De Rosales 7943 Longridge Avenue North Hollywood, CA 91605 | Member of the LLC | 20% ownership interest in the LLC | Member of the LLC |
| John Patrick Policarpio 28218 Picadilly Pl Castaic, CA 91384 | Member of the LLC | 25% ownership interest in the LLC | Member of the LLC |
| Renato Paul Policarpio 28218 Picadilly Pl Castaic, CA 91384 | Member of the LLC | 35% ownership interest in the LLC | Member of the LLC |

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the Managing Member 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 December 2, 2013

Signature /s/ Renato Paul Policarpio
Renato Paul Policarpio
Managing Member

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.

STATEMENT OF RELATED CASES
INFORMATION REQUIRED BY LBR 1015-2
UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A that was filed with any such prior proceeding(s).)

None

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at San Gabriel, California.

/s/ Renato Paul Policarpio

Renato Paul Policarpio

Signature of Debtor

Date: December 2, 2013

Signature of Joint Debtor

**United States Bankruptcy Court
Central District of California**

In re Good Shepherd Ambulance, LLC,
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 | 343,322.00 | | |
| 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 | 16 | | 482,175.55 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 12 | | 1,853,304.33 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | No | 0 | | | N/A |
| J - Current Expenditures of Individual Debtor(s) | No | 0 | | | N/A |
| Total Number of Sheets of ALL Schedules | | 36 | | | |
| | | | Total Assets | 343,322.00 | |
| | | | Total Liabilities | 2,335,479.88 | |

**United States Bankruptcy Court
Central District of California**

In re Good Shepherd Ambulance, LLC,
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 16) | |
| Average Expenses (from Schedule J, Line 18) | |
| 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) | | |

B6A (Official Form 6A) (12/07)

In re Good Shepherd Ambulance, LLC, 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 |
|--------------------------------------|---|------------------------------------|--|-------------------------|
|--------------------------------------|---|------------------------------------|--|-------------------------|

None

Sub-Total > **0.00** (Total of this page)
Total > **0.00**
(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re Good Shepherd Ambulance, LLC

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 | X | | | |
| 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. | | Citibank Checking Account | - | 100.00 |
| | | Citibank Checking Account | - | 150.00 |
| | | Chase Checking Account | - | 200.00 |
| 3. Security deposits with public utilities, telephone companies, landlords, and others. | | Security Deposits: Commerce \$11,000 | - | 23,372.00 |
| | | San Gabriel \$6,372 | | |
| | | Glendale \$6,000 | | |
| 4. Household goods and furnishings, including audio, video, and computer equipment. | X | | | |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | | |
| 6. Wearing apparel. | X | | | |
| 7. Furs and jewelry. | X | | | |
| 8. Firearms and sports, photographic, and other hobby equipment. | X | | | |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | X | | | |
| 10. Annuities. Itemize and name each issuer. | X | | | |
| | | | Sub-Total > | 23,822.00 |
| | | | (Total of this page) | |

3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|---|------------------|--------------------------------------|---|---|
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | X | | | |
| 13. Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. Accounts receivable. | | Account Receivables | - | 60,000.00 |
| 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 | | | |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |

Sub-Total > **60,000.00**
(Total of this page)

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

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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 |
|---|-------|---|------------------------------------|--|
| 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. | | 15 Ambulances: 1. 2007 Ford Ecoline, mileage: 120,000 2. 2007 Ford Ecoline, mileage: 120,000 3. 2007 Ford Ecoline, mileage: 100,000 4. 2007 Ford Ecoline, mileage: 100,000 5. 2008 Ford Ecoline, mileage: 90,000 6. 2008 Ford Ecoline, mileage: 90,000 7. 1997 Ford E350, mileage: 280,000 8. 2006 Ford E350, mileage: 180,000 9. 2006 Ford, mileage: 180,000 10. 2004 Ford E350 Type II, mileage: 180,000 11. 2004 Ford E350 Type II, mileage: 160,000 12. 2005 Ford E350 Type II, mileage: 170,000 13. 2005 Ford E350 Type II, mileage: 165,000 14. 2003 Ford 450, mileage: 210,000 15. 2000 Ford 3DC, mileage: 210,000 4 Medical Transportation Vans 1. 2008 Ford Econoline (Wheelchair), mileage: 80,000 2. 2007 Ford Econoline (Medical Transport), mileage: 60,000 3. 2007 Ford Econoline (Medical Transport), mileage: 60,000 4. 2004 Nissan Van, mileage: 130,000 1 Service Car 2006 Ford Focus | - | 173,000.00 |
| 26. Boats, motors, and accessories. | X | | | |
| 27. Aircraft and accessories. | X | | | |

Sub-Total > **215,000.00**
(Total of this page)

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

B6B (Official Form 6B) (12/07) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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 |
|--|----------|---|---|---|
| 28. Office equipment, furnishings, and supplies. | | Computers, printer, and furnitures | - | 16,500.00 |
| 29. Machinery, fixtures, equipment, and supplies used in business. | | 15 Gurneys | - | 28,000.00 |
| 30. Inventory. | X | | | |
| 31. Animals. | X | | | |
| 32. Crops - growing or harvested. Give particulars. | X | | | |
| 33. Farming equipment and implements. | X | | | |
| 34. Farm supplies, chemicals, and feed. | X | | | |
| 35. Other personal property of any kind not already listed. Itemize. | X | | | |

Sub-Total > **44,500.00**
(Total of this page)
Total > **343,322.00**

(Report also on Summary of Schedules)

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

B6D (Official Form 6D) (12/07)

In re Good Shepherd Ambulance, LLC Case No. _____
 Debtor

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 H W J C | 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 |
|--|-------------------------------------|--|----------|--|---------------------|-------------------------|-----------------|---|---------------------------|
| | | 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 Good Shepherd Ambulance, LLC

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.

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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 | 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. | | | | | | | | |
| Acevedo, Natalie 308 N. Vail Ave Montebello, CA 90640 | | - | | | | | 288.75 | 0.00 |
| | | | | | | | 288.75 | 288.75 |
| Account No. | | | | | | | | |
| Aileen M. Rosana PO Box 1525 Bellflower, CA 90707 | | - | | | | | 1,500.00 | 0.00 |
| | | | | | | | 1,500.00 | 1,500.00 |
| Account No. | | | | | | | | |
| Aiminh Phan 1106 Pecos Way Sunnyvale, CA 94089 | | - | | | | | 4,738.49 | 0.00 |
| | | | | | | | 4,738.49 | 4,738.49 |
| Account No. | | | | | | | | |
| Aldrich Policarpio 28218 Picadilly Pl Castaic, CA 91384 | | - | | | | | 1,080.00 | 0.00 |
| | | | | | | | 1,080.00 | 1,080.00 |
| Account No. | | | | | | | | |
| Alexis Reyes 170 Cymbidium Cir South San Francisco, CA 94080 | | - | | | | | 3,000.00 | 0.00 |
| | | | | | | | 3,000.00 | 3,000.00 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 10,607.24 | 10,607.24 |

Sheet 1 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC
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 | D I S P U T E D | U N L I Q U I D A T E D | C O N T I N G E N T | AMOUNT OF CLAIM | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|---|---------------------------------|------------------|------------------------------------|--------------------------------------|--|--|--------------------|---|
| | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. | | | | | | | | |
| Bashin, Scott 24711 Riverchase Dr #5105 Valencia, CA 91355 | | - | | | | | 736.00 | 0.00 |
| | | | | | | | | 736.00 |
| Account No. | | | | | | | | |
| Bautisa, Anthony 4427 Young Dr Montrose, CA 91020 | | - | | | | | 714.00 | 0.00 |
| | | | | | | | | 714.00 |
| Account No. | | | | | | | | |
| Berbee, Mereith 75 S. San Gabriel Blvd #3 Pasadena, CA 91107 | | - | | | | | 190.00 | 0.00 |
| | | | | | | | | 190.00 |
| Account No. | | | | | | | | |
| Borkowski, Sukanya 2226 N. Frederic St #C Burbank, CA 91504 | | - | | | | | 700.00 | 0.00 |
| | | | | | | | | 700.00 |
| Account No. | | | | | | | | |
| Brittney Ramirez 13144 La Tierra Way Sylmar, CA 91342 | | - | | | | | 369.00 | 0.00 |
| | | | | | | | | 369.00 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 2,709.00 | 2,709.00 |

Sheet 2 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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. | | | | | | | | |
| Castro, Eric 15331 Saranac Dr Whittier, CA 90604 | - | | | | | | 277.50 | 0.00 |
| | | | | | | | | 277.50 |
| Account No. | | | | | | | | |
| Chagoy, Angelo 310 S. Russell Ave Monterey Park, CA 91754 | - | | | | | | 530.00 | 0.00 |
| | | | | | | | | 530.00 |
| Account No. | | | | | | | | |
| Cheung, Sofia 2704 Cogswell Rd El Monte, CA 91732 | - | | | | | | 367.50 | 0.00 |
| | | | | | | | | 367.50 |
| Account No. | | | | | | | | |
| Chu, Dave 816 Stoneman Ave Alhambra, CA 91801 | - | | | | | | 140.00 | 0.00 |
| | | | | | | | | 140.00 |
| Account No. | | | | | | | | |
| Cortez, Cristina 5806 Lockhead Ave Whittier, CA 90606 | - | | | | | | 102.00 | 0.00 |
| | | | | | | | | 102.00 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 1,417.00 | 1,417.00 |

Sheet 3 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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 | 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. | | | | | | | | |
| Cynthia Cabrera 13144 La Tierra Way Sylmar, CA 91342 | | - | | | | | 2,000.00 | 0.00 |
| Account No. | | | | | | | | |
| Dyer, Glenn 7592 8th St Buena Park, CA 90621 | | - | | | | | 102.50 | 102.50 |
| Account No. | | | | | | | | |
| Edgar, Alexander 11562 Luzon St Cypress, CA 90630 | | - | | | | | 363.10 | 0.00 |
| Account No. | | | | | | | | |
| Eduardo Ornelas 524 N. Azusa Ave Azusa, CA 91702 | | - | | | | | 800.00 | 0.00 |
| Account No. | | | | | | | | |
| Enrique J. Unson 1213 N. Myers St. Burbank, CA 91506 | | - | | | | | 800.00 | 0.00 |
| Subtotal | | | | | | | 4,065.60 | 102.50 |
| (Total of this page) | | | | | | | 4,065.60 | 3,963.10 |

Sheet 4 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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. Francisco Morales 1500 Benito Ave, #D Alhambra, CA 91803 | | - | | | | | 800.00 | 0.00 |
| Account No. Garcia, Alfredo 2563 Temple Ave #E West Covina, CA 91793 | | - | | | | | 745.00 | 0.00 |
| Account No. Gianan, Gerry 507 S. New Ave #C Monterey Park, CA 91755 | | - | | | | | 560.00 | 0.00 |
| Account No. Giovanni Zamora 9012 Hegel St Bellflower, CA 90706 | | - | | | | | 2,230.77 | 0.00 |
| Account No. Grose, Andrew 16814 Armstead St Granada Hills, CA 91344 | | - | | | | | 80.00 | 0.00 |
| Subtotal | | | | | | | 4,415.77 | 0.00 |
| (Total of this page) | | | | | | | 4,415.77 | 4,415.77 |

Sheet 5 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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. Guarna, Julian 3845 Sycamore St Pasadena, CA 91107 | | - | | | | | 665.00 | 0.00 |
| | | | | | | | 665.00 | 665.00 |
| Account No. Jason Black 7940 Via Latina Burbank, CA 91504 | | - | | | | | 1,600.00 | 0.00 |
| | | | | | | | 1,600.00 | 1,600.00 |
| Account No. Jeofrey Sarmiento 8616 Willis Ave Panorama City, CA 91402 | | - | | | | | 1,040.00 | 0.00 |
| | | | | | | | 1,040.00 | 1,040.00 |
| Account No. Julian C. Lao 211 Calle Redonda Walnut, CA 91789 | | - | | | | | 1,596.15 | 0.00 |
| | | | | | | | 1,596.15 | 1,596.15 |
| Account No. Kim, Sam 2404 Muscatel Ave Rosemead, CA 91770 | | - | | | | | 632.50 | 0.00 |
| | | | | | | | 632.50 | 632.50 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 5,533.65 | 5,533.65 |

Sheet 6 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC
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 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. | | | | | | | | |
| La, Lee 2709 Willard Ave Rosemead, CA 91770 | | - | | | | | 758.50 | 0.00 |
| | | | | | | | 758.50 | 758.50 |
| Account No. | | | | | | | | |
| Landin, Kevin 1532 New Ave San Gabriel, CA 91776 | | - | | | | | 522.50 | 0.00 |
| | | | | | | | 522.50 | 522.50 |
| Account No. | | | | | | | | |
| Lee, Richard 2220 Sherwood Rd San Marino, CA 91108 | | - | | | | | 475.00 | 0.00 |
| | | | | | | | 475.00 | 475.00 |
| Account No. | | | | | | | | |
| Lenin Escobar 37712 Scomar St Palmdale, CA 93550 | | - | | | | | 660.00 | 0.00 |
| | | | | | | | 660.00 | 660.00 |
| Account No. | | | | | | | | |
| Leon, Nelson 308 S. Fifth Ave, #D Monrovia, CA 91016 | | - | | | | | 738.50 | 0.00 |
| | | | | | | | 738.50 | 738.50 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 3,154.50 | 3,154.50 |

Sheet 7 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC, 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. Lopez, Jorge 5702-D Skyview Way Agoura Hills, CA 91301 | | - | | | | | 728.50 | 0.00 |
| | | | | | | | 728.50 | 728.50 |
| Account No. Mara Rosales PO Box 10013 Fullerton, CA 92838 | | - | | | | | 1,300.00 | 0.00 |
| | | | | | | | 1,300.00 | 1,300.00 |
| Account No. Margett, Blake 11303 Freer Ave Arcadia, CA 91006 | | - | | | | | 735.00 | 0.00 |
| | | | | | | | 735.00 | 735.00 |
| Account No. Maria Gomez 211 Calle Redonda Walnut, CA 91789 | | - | | | | | 2,320.00 | 0.00 |
| | | | | | | | 2,320.00 | 2,320.00 |
| Account No. Maria R. Medina 3033 Amigos Dr Burbank, CA 91504 | | - | | | | | 1,141.00 | 0.00 |
| | | | | | | | 1,141.00 | 1,141.00 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 6,224.50 | 6,224.50 |

Sheet **8** of **15** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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 | 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. | | | | | | | | |
| Maria Victoria Reyes 22215 James Alan Cir Chatsworth, CA 91311 | | - | | | | | 1,160.00 | 0.00 |
| | | | | | | | 1,160.00 | 1,160.00 |
| Account No. | | | | | | | | |
| Maritza Meza 10033 San Vicente Ave South Gate, CA 90280 | | - | | | | | 1,006.25 | 0.00 |
| | | | | | | | 1,006.25 | 1,006.25 |
| Account No. | | | | | | | | |
| Mauro, Eric 4900 N. Grand Ave Covina, CA 91724 | | - | | | | | 333.75 | 0.00 |
| | | | | | | | 333.75 | 333.75 |
| Account No. | | | | | | | | |
| Murphy, Jonathan 2762 Avenida Marguerita Chino Hills, CA 91709 | | - | | | | | 430.00 | 0.00 |
| | | | | | | | 430.00 | 430.00 |
| Account No. | | | | | | | | |
| Myers, Christina 290 N. Hudson Ave #117E Pasadena, CA 91101 | | - | | | | | 945.00 | 0.00 |
| | | | | | | | 945.00 | 945.00 |
| Subtotal | | | | | | | 3,875.00 | 0.00 |
| (Total of this page) | | | | | | | 3,875.00 | 3,875.00 |

Sheet 9 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC
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. | | | | | | | | |
| Nora Castro 1173 Calada St Los Angeles, CA 90023 | | - | | | | | 1,194.00 | 0.00 |
| | | | | | | | 1,194.00 | 1,194.00 |
| Account No. | | | | | | | | |
| Pascall, Petula 15903 Prafie Ave #16 Lawndale, CA 90260 | | - | | | | | 585.00 | 0.00 |
| | | | | | | | 585.00 | 585.00 |
| Account No. | | | | | | | | |
| Perez, Danny 2419 Valhalla St Pomona, CA 91763 | | - | | | | | 520.00 | 0.00 |
| | | | | | | | 520.00 | 520.00 |
| Account No. | | | | | | | | |
| Plata, Jose 257 W. Bygrove St Covina, CA 91722 | | - | | | | | 212.50 | 0.00 |
| | | | | | | | 212.50 | 212.50 |
| Account No. | | | | | | | | |
| Postal, John 752 Van Ness Ave Los Angeles, CA 90038 | | - | | | | | 590.00 | 0.00 |
| | | | | | | | 590.00 | 590.00 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 3,101.50 | 3,101.50 |

Sheet 10 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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. | | | | | | | | |
| Rafael Luna 1204 N. Van Ness Ave #B Los Angeles, CA 90038 | | - | | | | | 2,500.00 | 0.00 |
| | | | | | | | 2,500.00 | 2,500.00 |
| Account No. | | | | | | | | |
| Ramy, Ibrahim 4014 Churchill Ct Cypress, CA 90630 | | - | | | | | 482.50 | 0.00 |
| | | | | | | | 482.50 | 482.50 |
| Account No. | | | | | | | | |
| Raygoza, Adrian 3628 Marybeth Ave Rosemead, CA 91770 | | - | | | | | 872.82 | 0.00 |
| | | | | | | | 872.82 | 872.82 |
| Account No. | | | | | | | | |
| Raygoza, David 3628 Marybeth Ave Rosemead, CA 91770 | | - | | | | | 375.00 | 0.00 |
| | | | | | | | 375.00 | 375.00 |
| Account No. | | | | | | | | |
| Roderico Reyes 22215 James Alan Cir Chatsworth, CA 91311 | | - | | | | | 1,040.00 | 0.00 |
| | | | | | | | 1,040.00 | 1,040.00 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 5,270.32 | 5,270.32 |

Sheet 11 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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. Ryan Policarpio 28218 Picadilly Pl Castaic, CA 91384 | | | | | | | 1,933.00 | 0.00 |
| | | - | | | | | 1,933.00 | 1,933.00 |
| Account No. Ryan, Scott 129 N. Bonnie Ave., #2 Pasadena, CA 91106 | | | | | | | 976.00 | 0.00 |
| | | - | | | | | 976.00 | 976.00 |
| Account No. Santucci, Erik 350 S. San Fernando Blvd Burbank, CA 91502 | | | | | | | 190.00 | 0.00 |
| | | - | | | | | 190.00 | 190.00 |
| Account No. Sophie Escobar 37712 Scomar St Palmdale, CA 93550 | | | | | | | 200.00 | 0.00 |
| | | - | | | | | 200.00 | 200.00 |
| Account No. Tamahsian, Tadeh 9257 Lashell Dr Tujunga, CA 91042 | | | | | | | 46.00 | 0.00 |
| | | - | | | | | 46.00 | 46.00 |
| Subtotal | | | | | | | 3,345.00 | 0.00 |
| (Total of this page) | | | | | | | 3,345.00 | 3,345.00 |

Sheet 12 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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. | | | | | | | | |
| Trejo, Justin 3827 Anderson Ave La Crescenta, CA 91214 | | - | | | | | 421.25 | 0.00 |
| | | | | | | | | 421.25 |
| Account No. | | | | | | | | |
| Tyrrell, Kevin 4266 Berkeley St Montclair, CA 91763 | | - | | | | | 700.00 | 0.00 |
| | | | | | | | | 700.00 |
| Account No. | | | | | | | | |
| Vara, Ricardo 14548 Manchester Ave Chino, CA 91710 | | - | | | | | 157.50 | 0.00 |
| | | | | | | | | 157.50 |
| Account No. | | | | | | | | |
| Vasquez, James 1208 S. Sixth St Alhambra, CA 91801 | | - | | | | | 175.00 | 0.00 |
| | | | | | | | | 175.00 |
| Account No. | | | | | | | | |
| Veloz, Cassandra 14320 Ducat St San Fernando, CA 91340 | | - | | | | | 887.72 | 0.00 |
| | | | | | | | | 887.72 |
| Subtotal | | | | | | | | 0.00 |
| (Total of this page) | | | | | | | 2,341.47 | 2,341.47 |

Sheet 13 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC, 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 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. Venegas, Matt 416 Andruss Pl Montebello, CA 90640 | | - | | | | | 470.00 | 0.00 | |
| | | | | | | | 470.00 | 470.00 | |
| Account No. Villa, Luis 3829 Richmond Ave El Monte, CA 91732 | | - | | | | | 527.50 | 0.00 | |
| | | | | | | | 527.50 | 527.50 | |
| Account No. Xu, Yun Peng (Eric) 818 W. Padilla St., #A San Gabriel, CA 91776 | | - | | | | | 117.50 | 0.00 | |
| | | | | | | | 117.50 | 117.50 | |
| Account No. | | | | | | | | | |
| Account No. | | | | | | | | | |
| Subtotal (Total of this page) | | | | | | | 1,115.00 | 0.00 | 1,115.00 |

Sheet 14 of 15 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re Good Shepherd Ambulance, LLC, 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 | 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 | 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 | AMOUNT NOT ENTITLED TO PRIORITY, IF ANY |
|--|-----------------|---------|------------------------------------|---|---------------------|-------------------------|-----------------|---------------------------|---|
| | | | | | | | | | AMOUNT ENTITLED TO PRIORITY |
| Account No. Employment Development Dept PO BOX 989061 West Sacramento, CA 95798-9061 | | | | | | | | 75,000.00 | 0.00 |
| Account No. Internal Revenue Service P.O BOX 7346 Philadelphia, PA 19101 | | | Payroll Taxes | | | | | 350,000.00 | 0.00 |
| Account No. | | | | | | | | | |
| Account No. | | | | | | | | | |
| Account No. | | | | | | | | | |

Sheet 15 of 15 continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

| | | | |
|---|-------------------|---------------|-------------------|
| Subtotal (Total of this page) | 425,000.00 | 0.00 | 425,000.00 |
| Total (Report on Summary of Schedules) | 482,175.55 | 102.50 | 482,073.05 |

B6F (Official Form 6F) (12/07)

In re Good Shepherd Ambulance, LLC

Case No. _____

Debtor

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.) | 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. Allied Administrators P.O. Box 45739 San Francisco, CA 94145-0739 | | | Trade Debt | | | | 446.11 |
| Account No. Angel's Auto Repair, Inc. 450 Agostino Rd. San Gabriel, CA 91776 | | | Trade Debt | | | | 2,532.05 |
| Account No. ARCO Gas Pro Plus PO Box 70887 Charlotte, NC 28272-0997 | | | Trade Debt | | | | 2,780.01 |
| Account No. xxxxxx1586 Arrowhead PO Box 856158 Louisville, KY 40285-6158 | | | Trade Debt | | | | 230.25 |
| Subtotal (Total of this page) | | | | | | | 5,988.42 |

11 continuation sheets attached

In re Good Shepherd Ambulance, LLC 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 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. AT & T Mobility PO Box 6463 Carol Stream, IL 60197-6463 | | - | | | | | 1,483.06 | |
| Account No. Athens Services PO Box 60009 City of Industry, CA 91716-0009 | | - | Trade Debt | | | | 277.72 | |
| Account No. xx4309 Auto Zone 16922 Devonshire Granada Hills, CA 91344 | | - | | | | | 1,907.37 | |
| Account No. Bound Tree Medical, LLC 23537 Network Place Chicago, IL 60673-1235 | | - | Trade Debt | | | | 1,908.34 | |
| Account No. Central Market Place, LLC 1425 N. Cahuenga Blvd Los Angeles, CA 90028 | | - | Trade Debt | | | | 6,700.00 | |
| Sheet no. <u>1</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | Subtotal (Total of this page) | 12,276.49 |

In re Good Shepherd Ambulance, LLC

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 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. Cintas Corporation PO Box 2250 Pico Rivera, CA 90662 | | - | Trade Debt | | | | 5,242.37 | |
| Account No. City of Los Angeles Attn Patricia Barker 100 S. Main St RM 01-080 Los Angeles, CA 90012 | | - | Trade Debt | | | | 2,923.42 | |
| Account No. xx7585 City of Montebello Attn: Business License Division 1600 West Beverly Blvd Montebello, CA 90640 | | - | | | | | 174.07 | |
| Account No. xx-xxx3480 Commercial Recovery Bureau Inc PO Box 59104 Dallas, TX 75229 | | - | Trade Debt | | | | 1,288.41 | |
| Account No. xxx6333 Cook Page PO Box 1380 Suisun City, CA 94585-4380 | | - | Trade Debt | | | | 1,112.82 | |
| Sheet no. <u>2</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | Subtotal (Total of this page) | 10,741.09 |

In re Good Shepherd Ambulance, LLC

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 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. Critical Transport Services LLC 541 Laurel Ave Glendora, CA 91741 | | - | Trade Debt | | | | 12,900.00 | |
| Account No. Daniel B. Spitzer 16311 Ventura Blvd., Ste 1200 Encino, CA 91436-2152 | | - | Notice only -- Case No. Unknown, Gish Seiden LLP vs. Good Sheppard Ambulance, LLC | | | | 0.00 | |
| Account No. Dartran, Inc. 1409 W. Kenneth Rd., Glendale, CA 91201 | | - | Trade Debt | | | | 6,789.14 | |
| Account No. Der Manouel Insurance PO Box 28906 Fresno, CA 93729-8906 | | - | GOODS02 Trade Debt | | | | 16,850.74 | |
| Account No. Dickson Motor Service 220 E. Agostino Rd San Gabriel, CA 91776 | | - | | | | | 1,975.00 | |
| Sheet no. <u>3</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | Subtotal (Total of this page) | 38,514.88 |

In re Good Shepherd Ambulance, LLC 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 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. Doctor Vincent Bennett 3315 Oceanfront Walk Marina Del Rey, CA 90292 | | - | | | | | 4,500.00 | |
| Account No. Eduardo Mairén-Pena 3455 Maine Ave Baldwin Park, CA 91706 | | - | Labor dispute | | | | 9,127.62 | |
| Account No. Emergency Nursing Registry 37030 Boxleaf Rd Palmdale, CA 93550 | | - | | | | | 1,762.50 | |
| Account No. Employment Development Dept PO BOX 989061 West Sacramento, CA 95798-9061 | | - | | | | | 50,000.00 | |
| Account No. xx3851 ERLA Inc dba EMSAR Inc 270 Davis Drive Wilmington, OH 45177 | | - | Trade Debt | | | | 1,465.70 | |
| Sheet no. <u>4</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | Subtotal (Total of this page) | 66,855.82 |

In re Good Shepherd Ambulance, LLC 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. xxxxxxxxxxxx5666 First Insurance Funding PO Box 66468 Chicago, IL 60666-0468 | | - | | | | 27,750.11 |
| Account No. xxxx6 002 Gish Seiden LLP 21700 Oxnard St., Ste 850 Woodland Hills, CA 91367 | | - | | X | | 4,716.22 |
| Account No. GOOD Golden Pacific Healthcare Products 17932 South Star of India Lane Carson, CA 90746 | | - | | | | 600.37 |
| Account No. xx6662 GUARDIANEMS 1384 Poinsettia Ave Suite D Vista, CA 92081 | | - | | | | 155.54 |
| Account No. xx946A HealthNet Collections 11971 Foundation Place Bldg C Rancho Cordova, CA 95670 | | - | | | | 6,198.94 |
| Sheet no. <u>5</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | Subtotal (Total of this page) | 39,421.18 |

In re Good Shepherd Ambulance, LLC

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 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. Healthy Advice Communications PO BOX 193810 Little Rock, AR 72219 | | - | Trade Debt | | | | 3,200.19 | |
| Account No. Henry Radio 2050 S. Bundy Dr. Ste 285 Los Angeles, CA 90025 | | - | Trade Debt | | | | 750.00 | |
| Account No. Internal Revenue Service P.O. BOX 7346 Philadelphia, PA 19101 | | - | | | | | 250,000.00 | |
| Account No. John Patrick Policarpio 28218 Picadilly Pl Castaic, CA 91384 | | - | Money owe to insider. | | | | 9,950.00 | |
| Account No. Knollwood Tire Center 12000 Balboa Blvd #105 Granada Hills, CA 91344 | | - | | | | | 14,420.00 | |
| Sheet no. <u>6</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | Subtotal (Total of this page) | 278,320.19 |

In re Good Shepherd Ambulance, LLC

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 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. Knollwood Tire Center GSA2 12000 Balboa Blvd #105 Granada Hills, CA 91344 | | - | | | | | 3,567.63 | |
| Account No. 7025 Leader Industries 10941 Weaver Ave South El Monte, CA 91733-2572 | | - | Trade Debt | | | | 324.85 | |
| Account No. Leonard Black 74 D Street Salt Lake City, UT 84103 | | - | Loan to the Business | | | | 12,000.00 | |
| Account No. Manchih Luling Dixon 7815 Via Genova Burbank, CA 91504 | | - | Loan to the business | | | | 181,250.00 | |
| Account No. ManfrediLevine Attorneys 3262 E. Thousand Oaks Blvd Ste 200 Westlake Village, CA 91362 | | - | | | | | 2,964.07 | |
| Sheet no. <u>7</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | Subtotal (Total of this page) | 200,106.55 |

In re Good Shepherd Ambulance, LLC 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 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. Maria Gomez 1213 N Myers St Burbank, CA 91506 | | - | Loan to the Business | | | | 192,507.00 | |
| Account No. Matsura Family Trust 718 N Poinsettia Ave Manhattan Beach, CA 90266 | | - | Rent | | | | 5,591.99 | |
| Account No. Michelman & Robinson, LLP Attn: Accounts Receivable 15760 Ventrue Blvd, 5th Fl Encino, CA 91436 | | - | | | | | 1,742.00 | |
| Account No. Montebello CAT Scale & Fuel 1436 Washington Blvd Montebello, CA 90640 | | - | | | | | 2,361.72 | |
| Account No. NTS, Inc 27702 Crown Valley Parkway D-4198 Ladera Ranch, CA 92694 | | - | | | | | 4,756.00 | |
| Sheet no. <u>8</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | Subtotal (Total of this page) | 206,958.71 |

In re Good Shepherd Ambulance, LLC

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. xxxx5556 Office Depot PO Box 70025 Los Angeles, CA 90074-0025 | | - | Trade Debt | | | 1,074.60 |
| Account No. Ophir J. Bitton Bitton & Associates 12080 Ventura Pl., Ste D Studio City, CA 91604 | | - | Notice only -- Case Number: EC057615 CENTRAL MARKET PLACE LLC VS. GOOD SHEPHERD AMBULANCE LLC, ET Filing Date: 02/09/2012 Case Type: Breach Rental/Lease | | | Unknown |
| Account No. xxxxx7-201 Payment Center 1138 Elm St PO Box 179 Manchester, NH 03101-1514 | | - | Re: Anthem Blue Cross REF 2012328132377 | | | 2,977.37 |
| Account No. xx-xxx3480 PMI-Progressive Medical Intrl PO BOX 59104 Dallas, TX 75229 | | - | Trade Debt | | | 1,288.41 |
| Account No. Renato Paul Policarpio 28218 Picadilly Pl Castaic, CA 91384 | | - | Money owe to insider. | | | 773,080.00 |
| Sheet no. <u>9</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | Subtotal (Total of this page) | 778,420.38 |

In re Good Shepherd Ambulance, LLC

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 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. RomanPower Financial Services Attn: Daryl Blackburn 11436 Hawthorne Blvd Hawthorne, CA 90250 | - | | Loan to the Business | | | | 166,906.93 | |
| Account No. Shirley Kitamura 2302 Oak Haven Ave Simi Valley, CA 93063 | - | | Loan to the Business | | | | 20,000.00 | |
| Account No. Southern California Edison PO Box 800 Rosemead, CA 91770 | - | | | | | | 688.29 | |
| Account No. State Compensation Insurance Fund c/o Bank of America P.O. Box 748170 Los Angeles, CA 90074-8170 | - | | Trade Debt | | | | 11,042.75 | |
| Account No. xxx2246 Stryker Sales Corporation Attn: Stryker Medical PO BOX 9658 Minneapolis, MN 55440-9658 | - | | Trade Debt | | | | 9,000.00 | |
| Sheet no. <u>10</u> of <u>11</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | | | | | Subtotal (Total of this page) | 207,637.97 |

In re Good Shepherd Ambulance, LLC

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. xx6096 Teletrac DEPT LA 23726 Pasadena, CA 91185-3726 | | - | | | | 2,977.54 |
| Account No. Trimline Specialty Paint c/o Gene Peterson 7451 Warner Ave., Ste E #289 Huntington Beach, CA 92647 | | - | | | | 750.00 |
| Account No. W. Jeffery Fulton C/O: Everest National Insurance 1545 Hotel Circle South, Ste 240 San Diego, CA 92108 | | - | | | | 3,999.66 |
| Account No. ZEP File 50188 Los Angeles, CA 90074-0188 | | - | | | | 335.45 |
| Account No. | | | | | | |

Sheet no. 11 of 11 sheets attached to Schedule of
Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page) **8,062.65**

Total
(Report on Summary of Schedules) **1,853,304.33**

In re Good Shepherd Ambulance, LLC 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. |
|---|--|
| Central Marketplace, LLC 730 South Central Avenue, #211 Glendale, CA 91204 | Office Building Lease -- Debtor intends to reject this lease. |
| Integrated Vehicle Leasing, Inc. 734 Walt Whitman Road Melville, NY 11747 | Lease 2007 Used Ford E350 --11 months remaining on lease @ \$716.03 per month. |
| Lamb Family Trust 5332 Harbor Stree Los Angeles, CA 90040 | Commercial Office Lease for business premises at 5330 Harbor Street, Commerce, CA 90040 |
| Matsuura Family Trust 718 N. Poinsettia Avenue Manhattan Beach, CA 90266 | Commercial Office lease at 109 Agostino Road, Suite 203, San Gabriel, 91776 |
| USA Financial Services LLC 1983 Marcus Avenue Ste 136 New Hyde Park, NY 11042 | Lease of 2006 Ford E350 -- 8 months remaining at \$670.90 |
| USA Financial Services, LLC 1983 Marcus Avenue Ste C136 Lake Success, NY 11042 | 2006 Ford Lease: with 5 Months left @ \$651.25 |

B6H (Official Form 6H) (12/07)

In re Good Shepherd Ambulance, LLC

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

0

_____ continuation sheets attached to Schedule of Codebtors

**United States Bankruptcy Court
Central District of California**

In re **Good Shepherd Ambulance, LLC**

Debtor(s)

Case No. _____

Chapter **11**

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the Managing Member 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 **38** sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **December 2, 2013**

Signature **/s/ Renato Paul Policarpio**

**Renato Paul Policarpio
Managing Member**

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.

B7 (Official Form 7) (04/13)

**United States Bankruptcy Court
Central District of California**

In re Good Shepherd Ambulance, LLC

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

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

DEFINITIONS

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

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

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|-----------------------|--|
| \$2,299,823.00 | 2013 YTD: Debtor Gross Receipts |
| \$3,260,073.00 | 2012: Debtor Gross Receipts |
| \$3,869,174.00 | 2011: Debtor Gross Receipts |

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCE |
|--------|--------|
|--------|--------|

B7 (Official Form 7) (04/13)

2

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 |
|---------------------------------|----------------------|-------------|-----------------------|

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 |
|--|------------------------------------|--|-----------------------|
| All Points Capital 275 Broadhollow Rd Melville, NY 11747 | within last 90 days | \$7,481.88 | \$0.00 |
| Chau's 76 Corporation 632 N. Garfield Ave Monterey Park, CA 91754 | within last 90 days | \$10,946.38 | \$0.00 |
| Cintas Corporation PO Box 2250 Pico Rivera, CA 90662 | within last 90 days | \$9,127.65 | \$6,975.29 |
| Critical Transport Services LLC 541 Laurel Ave Glendora, CA 91741 | within last 90 days | \$13,900.00 | \$5,175.00 |
| Dartran, Inc. 1409 W. Kenneth Rd. Glendale, CA 91201 | within last 90 days | \$7,228.75 | \$4,844.36 |
| Der Manouel Insurance P.O. Box 28906 Fresno, CA 93729-8906 | within last 90 days | \$8,659.35 | \$60,147.49 |
| Digital Direct Satellite Systems 3727 W. Magnolia Blvd., #292 Burbank, CA 91505 | within last 90 days | \$11,200.00 | \$0.00 |
| Galpin Ford Service 155505 Roscoe Blvd North Hills, CA 91343 | within last 90 days | \$8,329.10 | \$0.00 |
| Health Net Collections 11971 Foundation Pl., BLDG C Rancho Cordova, CA 95670 | within last 90 days | \$18,596.82 | \$0.00 |
| Imperial Premium Finance P.O. Box 100391 Pasadena, CA 91189-1391 | within last 90 days | \$6,781.25 | \$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.

B7 (Official Form 7) (04/13)

3

| NAME AND ADDRESS OF CREDITOR | DATES OF PAYMENTS/ TRANSFERS | AMOUNT PAID OR VALUE OF TRANSFERS | AMOUNT STILL OWING |
|---|---------------------------------|---|-----------------------|
| Knollwood Tire Center 12000 Balboa Blvd., #105 Granada Hills, CA 91344 | within last 90 days | \$10,816.29 | \$0.00 |
| Lamb Family Trust 5332 Habor St Commerce, CA 90040 | within last 90 days | \$24,400.00 | \$0.00 |
| Mahmood Sameh Saker 7940 Via Latina Burbank, CA 91504 | within last 90 days | \$8,265.00 | \$0.00 |
| Montebello CAT Scale & Fuel 1436 Washington Blvd Montebello, CA 90640 | within last 90 days | \$26,112.71 | \$0.00 |
| State Fund c/o Bank of America P.O. Box 748170 Los Angeles, CA 90074-8170 | within last 90 days | \$33,128.25 | \$11,042.75 |

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 |
|---|---|--------------------|-----------------------|
| Alexis Reyes 170 Cymbidium Cir South San Francisco, CA 94080 20% ownership of the LLC | 11/05/2012 11/19/2012 12/03/2012 12/17/2012 12/31/2012 01/14/2013 01/28/2013 02/11/2013 02/25/2013 03/11/2013 03/25/2013 04/08/2013 04/22/2013 04/24/2013 05/06/2013 05/20/2013 05/31/2013 06/03/2013 06/17/2013 07/01/2013 07/15/2013 07/29/2013 08/12/2013 08/26/2013 09/09/2013 10/01/2013 10/07/2013 10/21/2013 | \$50,685.08 | \$0.00 |
| Gabriel Granados 6302 Seaborn Street Lakewood, CA 90713 Previous 10% ownership of the LLC | 11/05/2012 11/19/2012 12/03/2012 12/17/2012 12/31/2012 03/01/2013 04/26/2013 06/10/2013 | \$15,000.00 | \$0.00 |

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| NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR | DATE OF PAYMENT | AMOUNT PAID | AMOUNT STILL OWING |
|--|-----------------------|--------------------|--------------------|
| Genbert De Rosales 7943 Longridge Avenue North Hollywood, CA 91605 20% ownership interest in the LLC | 11/05/2012 11/19/2012 | \$29,184.58 | \$0.00 |
| | 12/03/2012 | | |
| | 12/17/2012 12/31/2012 | | |
| | 01/14/2013 | | |
| | 01/28/2013 02/11/2013 | | |
| | 02/25/2013 | | |
| | 03/11/2013 03/25/2013 | | |
| | 04/08/2013 | | |
| | 04/22/2013 05/06/2013 | | |
| | 05/20/2013 | | |
| | 06/03/2013 6/17/2013 | | |
| | 07/01/2013 | | |
| | 07/01/2013 07/15/2013 | | |
| John Patrick Policarpio 28218 Picadilly Pl Castaic, CA 91384 25% ownership of the LLC | 11/19/2012 12/17/2012 | \$13,075.00 | \$0.00 |
| | 01/14/2013 | | |
| | 01/28/2013 02/11/2013 | | |
| | 03/11/2013 | | |
| | 04/08/2013 05/06/2013 | | |
| 08/05/2013 | | | |

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 |
|--|-----------------------------------|---|---|
| CENTRAL MARKET PLACE LLC VS. GOOD SHEPHERD AMBULANCE LLC, ET AL | Civil--Breach Rental/Lease | Los Angeles Superior Court - Glendale District | Dismissed 2/19/2013 -- (WITH PREJUDICE CROSS-COM PLAINT FILED BY; GOOD SHEPHERD AMBULANCE, LLC ENTIRE ACTION OF ALL PARTIES AND ALL CAUSES OF ACTION) |
| GISH SEIDEN LLP vs. GOOD SHEPPARD AMBULANCE, LLC | Breach of Contract | Los Angeles Superior Court | 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 |
|--|-----------------|-----------------------------------|
|--|-----------------|-----------------------------------|

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5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CREDITOR OR SELLER | DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN | DESCRIPTION AND VALUE OF PROPERTY |
|--|--|-----------------------------------|
|--|--|-----------------------------------|

6. Assignments and receiverships

None a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF ASSIGNEE | DATE OF ASSIGNMENT | TERMS OF ASSIGNMENT OR SETTLEMENT |
|------------------------------|--------------------|-----------------------------------|
|------------------------------|--------------------|-----------------------------------|

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF CUSTODIAN | NAME AND LOCATION OF COURT CASE TITLE & NUMBER | DATE OF ORDER | DESCRIPTION AND VALUE OF PROPERTY |
|-------------------------------|--|---------------|-----------------------------------|
|-------------------------------|--|---------------|-----------------------------------|

7. Gifts

None List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| NAME AND ADDRESS OF PERSON OR ORGANIZATION | RELATIONSHIP TO DEBTOR, IF ANY | DATE OF GIFT | DESCRIPTION AND VALUE OF GIFT |
|--|--------------------------------|--------------|-------------------------------|
|--|--------------------------------|--------------|-------------------------------|

8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| DESCRIPTION AND VALUE OF PROPERTY | DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS | DATE OF LOSS |
|-----------------------------------|--|--------------|
|-----------------------------------|--|--------------|

9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

| NAME AND ADDRESS OF PAYEE | DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY |
|--|---|--|
| Law Offices of Paul Horn 4703 Walnut Grove Avenue Rosemead, CA 91770 | 10/21/13 and 11/4/2013 | \$11,000 and 5,787.00 |

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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 |
|---|------|---|

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

| | | |
|----------------------------------|---------------------------|---|
| NAME OF TRUST OR OTHER DEVICE | DATE(S) OF TRANSFER(S) | AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY |
|----------------------------------|---------------------------|---|

11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| | | |
|---------------------------------|--|---------------------------------------|
| NAME AND ADDRESS OF INSTITUTION | TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE | AMOUNT AND DATE OF SALE OR CLOSING |
|---------------------------------|--|---------------------------------------|

12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| | | | |
|---|---|----------------------------|--|
| NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY | NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY | DESCRIPTION OF CONTENTS | DATE OF TRANSFER OR SURRENDER, IF ANY |
|---|---|----------------------------|--|

13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| | | |
|------------------------------|----------------|------------------|
| NAME AND ADDRESS OF CREDITOR | DATE OF SETOFF | AMOUNT OF SETOFF |
|------------------------------|----------------|------------------|

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 |
|---------|-----------|--------------------|

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 |
|-----------------------|---------------------------------------|----------------|-------------------|

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 |
|-----------------------|---------------------------------------|----------------|-------------------|

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 |
|------------------------------------|--|--|--|----------------------------|
| Good Shepherd Ambulance LLC | 51-0647278 | 5330 Harbor Street Commerce, CA 90040 | Emergency and non-emergency transportation services | January 2008 |

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

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 |
|---|-------------------------|
| Stein & Company, LLP 655 N. Central Avenue 17th Place Glendale, CA 91203 | Since 2011 |

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

NAME ADDRESS DATES SERVICES RENDERED

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

NAME ADDRESS

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

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NAME AND ADDRESS

DATE ISSUED

20. Inventories

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

| DATE OF INVENTORY | INVENTORY SUPERVISOR | DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis) |
|-------------------|----------------------|---|
|-------------------|----------------------|---|

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 | NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS |
|-------------------|--|
|-------------------|--|

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 |
|--|--------------------|------------------------|
| Alexis Reyes 170 Cymbidium Cir South San Francisco, CA 94080 | | 20% |
| Genbert De Rosales Genbert De Rosales North Hollywood, CA 91605 | | 20% |
| John Patrick Policarpio 28218 Picadilly Pl Castaic, CA 91384 | | 25% |
| Renato Paul Policarpio 28218 Picadilly Pl Castaic, CA 91384 | | 35% |

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

| NAME AND ADDRESS | TITLE | NATURE AND PERCENTAGE OF STOCK OWNERSHIP |
|------------------|-------|---|
|------------------|-------|---|

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 |
|-------------------------|---|--------------------|
| Gabriel Granados | 6302 Seaborn Street Lakewood, CA 90713 | May 2012 |

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 |
|------------------|-------|---------------------|
|------------------|-------|---------------------|

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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 |
|--|---------------------------------------|---|
| Gabriel Granados 6302 Seaborn Street Lakewood, CA 90713 20% ownership | May 2012 -- Financial Hardship | \$30,000 + Plus 2007 Tahoe Vehicle value at \$15,000 |

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

| NAME OF PARENT CORPORATION | TAXPAYER IDENTIFICATION NUMBER (EIN) |
|----------------------------|--------------------------------------|
|----------------------------|--------------------------------------|

25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

| NAME OF PENSION FUND | TAXPAYER IDENTIFICATION NUMBER (EIN) |
|----------------------|--------------------------------------|
|----------------------|--------------------------------------|

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

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

| | |
|-------------------------------------|---|
| Date <u>December 2, 2013</u> | Signature <u>/s/ Renato Paul Policarpio</u> Renato Paul Policarpio Managing Member |
|-------------------------------------|---|

[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 CENTRAL DISTRICT OF CALIFORNIA | |
| In re Good Shepherd Ambulance, LLC Debtor. | Case No.: <div style="text-align: center;">DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR</div> |

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(s) 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>\$325 Hourly</u> |
| Prior to the filing of this statement I have received | \$ | <u>16,787.00</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]

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

| | |
|---|--|
| 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. | |
| <u>October 31, 2013</u> Date | <u>Paul Horn</u> Signature of Attorney <u>Law Offices of Paul Horn</u> Name of Law Firm 4703 Walnut Grove Avenue Rosemead, CA 91770 800-380-7076 Fax: 800-380-7079 |

MASTER MAILING LIST
Verification Pursuant to Local Bankruptcy Rule 1007-2(d)

Name Paul Horn

Address 4703 Walnut Grove Avenue Rosemead, CA 91770

Telephone 800-380-7076 Fax: 800-380-7079

- Attorney for Debtor(s)
 Debtor in Pro Per

| | |
|---|--------------------|
| UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA | |
| List all names including trade names used by Debtor(s) within last 8 years: Good Shepherd Ambulance, LLC | Case No.: |
| | Chapter: 11 |
| | |

VERIFICATION OF CREDITOR MAILING LIST

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors, consisting of 17 sheet(s) is complete, correct, and consistent with the debtor's schedules pursuant to Local Rule 1007-2(d) and I/we assume all responsibility for errors and omissions.

Date: December 2, 2013

/s/ Renato Paul Policarpio
Renato Paul Policarpio/Managing Member
Signer/Title

Date: December 2, 2013

/s/ Paul Horn
Signature of Attorney
Paul Horn
Law Offices of Paul Horn
4703 Walnut Grove Avenue
Rosemead, CA 91770
800-380-7076 Fax: 800-380-7079

Good Shepherd Ambulance, LLC
5330 Harbor Street
Commerce, CA 90040

Paul Horn
Law Offices of Paul Horn
4703 Walnut Grove Avenue
Rosemead, CA 91770

Acevedo, Natalie
308 N. Vail Ave
Montebello, CA 90640

Aileen M. Rosana
PO Box 1525
Bellflower, CA 90707

Aiminh Phan
1106 Pecos Way
Sunnyvale, CA 94089

Aldrich Policarpio
28218 Picadilly Pl
Castaic, CA 91384

Alexis Reyes
170 Cymbidium Cir
South San Francisco, CA 94080

Allied Administrators
P.O. Box 45739
San Francisco, CA 94145-0739

Angel's Auto Repair, Inc.
450 Agostino Rd.
San Gabriel, CA 91776

ARCO Gas Pro Plus
PO Box 70887
Charlotte, NC 28272-0997

Arrowhead
PO Box 856158
Louisville, KY 40285-6158

AT & T Mobility
PO Box 6463
Carol Stream, IL 60197-6463

Athens Services
PO Box 60009
City of Industry, CA 91716-0009

Auto Zone
16922 Devonshire
Granada Hills, CA 91344

Bashin, Scott
24711 Riverchase Dr #5105
Valencia, CA 91355

Bautisa, Anthony
4427 Young Dr
Montrose, CA 91020

Berbee, Mereith
75 S. San Gabriel Blvd #3
Pasadena, CA 91107

Borkowski, Sukanya
2226 N. Frederic St #C
Burbank, CA 91504

Bound Tree Medical, LLC
23537 Network Place
Chicago, IL 60673-1235

Brittney Ramirez
13144 La Tierra Way
Sylmar, CA 91342

Castro, Eric
15331 Saranac Dr
Whittier, CA 90604

Central Market Place, LLC
1425 N. Cahuenga Blvd
Los Angeles, CA 90028

Central Marketplace, LLC
730 South Central Avenue, #211
Glendale, CA 91204

Chagoy, Angelo
310 S. Russell Ave
Monterey Park, CA 91754

Cheung, Sofia
2704 Cogswell Rd
El Monte, CA 91732

Chu, Dave
816 Stoneman Ave
Alhambra, CA 91801

Cintas Corporation
PO Box 2250
Pico Rivera, CA 90662

City of Los Angeles
Attn Patricia Barker
100 S. Main St RM 01-080
Los Angeles, CA 90012

City of Montebello
Attn: Business License Division
1600 West Beverly Blvd
Montebello, CA 90640

Commercial Recovery Bureau Inc
PO Box 59104
Dallas, TX 75229

Cook Page
PO Box 1380
Suisun City, CA 94585-4380

Cortez, Cristina
5806 Lockhead Ave
Whittier, CA 90606

Critical Transport Services LLC
541 Laurel Ave
Glendora, CA 91741

Cynthia Cabrera
13144 La Tierra Way
Sylmar, CA 91342

Daniel B. Spitzer
16311 Ventura Blvd., Ste 1200
Encino, CA 91436-2152

Dartran, Inc.
1409 W. Kenneth Rd.,
Glendale, CA 91201

Der Manouel Insurance
PO Box 28906
Fresno, CA 93729-8906

Dickson Motor Service
220 E. Agostino Rd
San Gabriel, CA 91776

Doctor Vincent Bennett
3315 Oceanfront Walk
Marina Del Rey, CA 90292

Dyer, Glenn
7592 8th St
Buena Park, CA 90621

Edgar, Alexander
11562 Luzon St
Cypress, CA 90630

Eduardo Mairén-Pena
3455 Maine Ave
Baldwin Park, CA 91706

Eduardo Ornelas
524 N. Azusa Ave
Azusa, CA 91702

Emergency Nursing Registry
37030 Boxleaf Rd
Palmdale, CA 93550

Employment Development Dept
PO BOX 989061
West Sacramento, CA 95798-9061

Employment Development Dept
PO BOX 989061
West Sacramento, CA 95798-9061

Enrique J. Unson
1213 N. Myers St.
Burbank, CA 91506

ERLA Inc dba EMSAR Inc
270 Davis Drive
Wilmington, OH 45177

First Insurance Funding
PO Box 66468
Chicago, IL 60666-0468

Francisco Morales
1500 Benito Ave, #D
Alhambra, CA 91803

Garcia, Alfredo
2563 Temple Ave #E
West Covina, CA 91793

Gianan, Gerry
507 S. New Ave #C
Monterey Park, CA 91755

Giovanni Zamora
9012 Hegel St
Bellflower, CA 90706

Gish Seiden LLP
21700 Oxnard St., Ste 850
Woodland Hills, CA 91367

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Granada Hills, CA 91344

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Vista, CA 92081

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Pasadena, CA 91107

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Rancho Cordova, CA 95670

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Little Rock, AR 72219

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Los Angeles, CA 90025

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Los Angeles, CA 90074-8170

Stryker Sales Corporation
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Montclair, CA 91763

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C/O: Everest National Insurance
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San Diego, CA 92108

Xu, Yun Peng (Eric)
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File 50188
Los Angeles, CA 90074-0188

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| Attorney or Party Name, Address, Telephone & FAX Nos., and State Bar No. & Email Address Paul Horn 4703 Walnut Grove Avenue Rosemead, CA 91770 800-380-7076 Fax: 800-380-7079 California State Bar Number: attorneypaul2000@yahoo.com | FOR COURT USE ONLY |
| <input checked="" type="checkbox"/> <i>Attorney for:</i> | |
| UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA | |
| In re: Good Shepherd Ambulance, LLC Debtor(s), Plaintiff(s), Defendant(s). | CASE NO.: ADVERSARY NO.: CHAPTER: 11 <div style="text-align: center; border: 1px solid black; padding: 5px;"> CORPORATE OWNERSHIP STATEMENT PURSUANT TO FRBP 1007(a)(1) and 7007.1, and LBR 1007-4 </div> <div style="text-align: center; border: 1px solid black; padding: 5px; margin-top: 5px;"> [No hearing] </div> |

Pursuant to FRBP 1007(a)(1) and 7007.1, and LBR 1007-4, any corporation, other than a governmental unit, that is a debtor in a voluntary case or a party to an adversary proceeding or a contested matter shall file this Statement identifying all its parent corporations and listing any publicly held company, other than a governmental unit, that directly or indirectly own 10% or more of any class of the corporation's equity interest, or state that there are no entities to report. This Corporate Ownership Statement must be filed with the initial pleading filed by a corporate entity in a case or adversary proceeding. A supplemental statement must promptly be filed upon any change in circumstances that renders this Corporate Ownership Statement inaccurate.

I, Renato Paul Policarpio, the undersigned in the above-captioned case, hereby declare
 (Print Name of Attorney or Declarant)
 under penalty of perjury under the laws of the United States of America that the following is true and correct:

[Check the appropriate boxes and, if applicable, provide the required information.]

1. I have personal knowledge of the matters set forth in this Statement because:
- I am the president or other officer or an authorized agent of the Debtor corporation
 - I am a party to an adversary proceeding
 - I am a party to a contested matter
 - I am the attorney for the Debtor corporation
- 2.a. The following entities, other than the debtor or a governmental unit, directly or indirectly own 10% or more of any class of the corporation's(s') equity interests:
See Addendum
- b. There are no entities that directly or indirectly own 10% or more of any class of the corporation's equity interest.

November 26, 2013
Date

By: _____
Signature of Debtor, or attorney for Debtor

Name: Renato Paul Policarpio
Printed name of Debtor, or attorney for Debtor

**Addendum to Corporate Ownership Statement Pursuant to
F.R.B.P. 1007(a)(1) and 7007.1, and Local Bankruptcy Rule 1002-5**

The following entities, other than the debtor or a governmental unit, directly or indirectly own 10% or more of any class of the corporation's(s') equity interests:
