

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): D&C Care Center, Inc.		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): Sunrise Convalescent Hospital		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): 95-4215374		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State): 1640 North Fair Oaks Avenue Pasadena, California		Street Address of Joint Debtor (No. and Street, City, and State):
ZIP CODE 91103		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):		
ZIP CODE		
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 checked="" 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 <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input checked="" type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input 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		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): D&C Care Center, Inc.	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)			
Location Where Filed: NONE	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet.)			
Name of Debtor: NONE	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
<p style="text-align: center;">Exhibit A</p> <p>(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)</p> <p><input type="checkbox"/> Exhibit A is attached and made a part of this petition.</p>		<p style="text-align: center;">Exhibit B</p> <p>(To be completed if debtor is an individual whose debts are primarily consumer debts.)</p> <p>I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).</p> <p>X _____ Signature of Attorney for Debtor(s) (Date)</p>	
<p>Exhibit C</p> <p>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?</p> <p><input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition.</p> <p><input checked="" type="checkbox"/> No.</p>			
<p>Exhibit D</p> <p>(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)</p> <p><input type="checkbox"/> Exhibit D, completed and signed by the debtor, is attached and made a part of this petition.</p> <p>If this is a joint petition:</p> <p><input type="checkbox"/> Exhibit D, also completed and signed by the joint debtor, is attached and made a part of this petition.</p>			
<p>Information Regarding the Debtor - Venue (Check any applicable box.)</p> <p><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.</p> <p><input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.</p> <p><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.</p>			
<p>Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.)</p> <p><input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)</p> <p style="text-align: right; margin-right: 100px;">_____ (Name of landlord that obtained judgment)</p> <p style="text-align: right; margin-right: 100px;">_____ (Address of landlord)</p> <p><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</p> <p><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.</p> <p><input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).</p>			

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<p>Voluntary Petition <i>(This page must be completed and filed in every case.)</i></p>	<p>Name of Debtor(s): D&C Care Center, Inc.</p>
Signatures	
<p style="text-align: center;">Signature(s) of Debtor(s) (Individual/Joint)</p> <p>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).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Debtor</p> <p>X _____ Signature of Joint Debtor</p> <p>_____ Telephone Number (if not represented by attorney)</p> <p>_____ Date</p> <p style="text-align: center;">_____ Signature of Attorney*</p> <p>X _____ Signature of Attorney for Debtor(s) J. Bennett Friedman Printed Name of Attorney for Debtor(s) Friedman Law Group, P.C. Firm Name 1900 Avenue of the Stars, 11th Floor Los Angeles, California 90067 Address (310) 552-8210 Telephone Number 9/22/14 Date Bar No.: 147056 Fax: (310) 733-5442 E-mail: jfriedman@flg-law.com</p> <p><small>*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.</small></p>	<p style="text-align: center;">Signature of a Foreign Representative</p> <p>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.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> 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.</p> <p>X _____ (Signature of Foreign Representative)</p> <p>_____ (Printed Name of Foreign Representative)</p> <p>_____ Date</p>
<p style="text-align: center;">Signature of Debtor (Corporation/Partnership)</p> <p>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.</p> <p>The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X Felipe Chu Signature of Authorized Individual Felipe T. Chu Printed Name of Authorized Individual President _____ Title of Authorized Individual 9/22/14 Date</p>	<p style="text-align: center;">Signature of Non-Attorney Bankruptcy Petition Preparer</p> <p>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.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ 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.)</p> <p>_____ Address</p> <p>X _____ Signature</p> <p>_____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.</p> <p>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.</p> <p>If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><small>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.</small></p>

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

2007 USBC, Central District of California

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(If known)

SCHEDULE A - REAL PROPERTY

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				
Total ▶			\$0.00	

(Report also on Summary of Schedules.)

B 6B (Official Form 6B) (12/2007)

2007 USBC, Central District of California

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY

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.		Wells Fargo General Operating Account		\$236,828.11
		Wells Fargo Payroll Account		\$21,200.69
		Wells Fargo Patient Trust Account		\$7,859.80
		Bank of America Client Trust Account		\$14,000.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.	X			
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.	X			
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			

B 6B (Official Form 6B) (12/2007)

2007 USBC, Central District of California

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(If known)

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.		Moneys owed by patients, Medi-Cal and Medicare for services rendered.		\$1,054,048.39
		Money owed by Revital Care Hospice, Inc. for services provided.		\$28,000.00
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			

B 6B (Official Form 6B) (12/2007)

2007 USBC, Central District of California

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(If known)

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
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			
22. Patents, copyrights, and other intellectual property. Give particulars.		Fictitious Business Name "Sunrise Convalescent Hospital"		Unknown
23. Licenses, franchises, and other general intangibles. Give particulars.		Debtor holds a license from the State of California Department of Public Health to operate and maintain a Skilled Nursing Facility.		Unknown
		Debtor holds a Business Tax Permit issued by the City of Pasadena.		Unknown
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		1996 Lexus LX450 with approximately 233,554 miles		\$2,000.00
		2003 Lexus LX470 with approximately 159,713 miles		\$15,000.00
		2005 Lexus LX470		\$20,000.00
		2008 Toyota Tacoma with approximately 51,490 miles		\$15,000.00

B 6B (Official Form 6B) (12/2007)

2007 USBC, Central District of California

In re D&C Care Center, Inc., Debtor

Case No. _____ (If known)

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
		1995 Lexus SC400 with approximately 195,589 miles		\$500.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.		See attached Schedule B.29.		\$61,000.00
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			

3 continuation sheets attached Total ►
 (Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

\$1,475,436.99

SCHEDULE B.29

LOCATION	ASSET DESCRIPTION	QTY	FLV	FLV EXTENDED
KITCHEN	6' Stainless Steel Table	1	\$ 300.00	\$ 300.00
KITCHEN	L Shaped SS Prep table w/ 1 compartment sink and sm. basin	1	\$ 750.00	\$ 750.00
KITCHEN	5' SS Prep Table	2	\$ 250.00	\$ 500.00
KITCHEN	5 Shelf NSF Metro Style Storage Rack 6'x4'x2'	2	\$ 75.00	\$ 150.00
KITCHEN	3 tier SS Cart	1	\$ 125.00	\$ 125.00
KITCHEN	9' Tray SS Lakeside Tray Delivery Carry	7	\$ 350.00	\$ 2,450.00
KITCHEN	True 3 Door SS Freezer	1	\$ 1,500.00	\$ 1,500.00
KITCHEN	Kelvinator 2 Door Commercial Freezer	1	\$ 1,500.00	\$ 1,500.00
KITCHEN	Cold Tech 2 Door Glass Door Display Cooler	1	\$ 350.00	\$ 350.00
KITCHEN	3 Shelf NSF Metro Style Storage Shelving 3'x2'x2'	3	\$ 45.00	\$ 135.00
KITCHEN	SS Plate Dispenser Cart	1	\$ 350.00	\$ 350.00
KITCHEN	4' SS Prep Table	2	\$ 200.00	\$ 400.00
KITCHEN	Victory 2 door SS Commercial Fridge (new)	2	\$ 1,000.00	\$ 2,000.00
KITCHEN	2 Compartment SS Sink w/ Disposal and Drain Boards	1	\$ 750.00	\$ 750.00
KITCHEN	Asst'd Smallwares - pots, pans, racks, trays	1	\$ 200.00	\$ 200.00
KITCHEN	Assorted Melamine Dinnerware	1	\$ 50.00	\$ 50.00

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KITCHEN	Assorted Utensils	1	\$ 50.00	\$	50.00
KITCHEN	6- SS 5 compartment Steam Table	1	\$ 500.00	\$	500.00
KITCHEN	Imperial 6 burner Stove with Griddle	1	\$ 1,500.00	\$	1,500.00
KITCHEN	Wilbur Curtis RU 300 Twin 3 Gallon Coffee Brewer	1	\$ 250.00	\$	250.00
KITCHEN	SS Cabinet 3'x2'x2'	1	\$ 150.00	\$	150.00
KITCHEN	3 Compartment SS Sink w/ Disposal and Drain Boards	1	\$ 850.00	\$	850.00
KITCHEN	Manitowac Ice Maker Model QY0214A	2	\$ 700.00	\$	1,400.00
KITCHEN	Hobart 20 Quart Mixer	1	\$ 800.00	\$	800.00
KITCHEN	5 Shelf NSF Metro Style Storage Rack 8'x4'x2'	5	\$ 100.00	\$	500.00
LOBBY	2 Leather Sofas, Love Seat and Coffee Table	1	\$ 750.00	\$	750.00
LOBBY	Oriental Style Planters	2	\$ 75.00	\$	150.00
LOBBY	Lg. Decorative Painting and Vases	1	\$ 50.00	\$	50.00
1ST FLOOR HALLS	Assorted Decorative Artworks	1	\$ 100.00	\$	100.00
1ST FLOOR BREAKROOM	2 Dark Finish Dining Tables with 6 Chairs	1	\$ 150.00	\$	150.00
1ST FLOOR BREAKROOM	Household Fridge-white	1	\$ 50.00	\$	50.00
1ST FLOOR BREAKROOM	2 Spigot Water Cooler	1	\$ 25.00	\$	25.00
1ST FLOOR BREAKROOM	Magic Chef Microwave	1	\$ 35.00	\$	35.00
1ST FLOOR BREAKROOM	Assorted Appliances-blender, toasters	1	\$ 25.00	\$	25.00

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1ST FLOOR BREAKROOM	SS Trash Can	1	\$ 15.00	\$ 15.00
1ST FLOOR BREAKROOM	Assorted Utensils	1	\$ 20.00	\$ 20.00
DIETICIANS OFFICE	Dell Laptop	1	\$ 50.00	\$ 50.00
DIETICIANS OFFICE	Metal Desk	1	\$ 20.00	\$ 20.00
DIETICIANS OFFICE	2 Drawer Particle Board Cabinet	1	\$ 10.00	\$ 10.00
DIETICIANS OFFICE	Decorative Art	1	\$ 10.00	\$ 10.00
1ST FLOOR STORAGE CLOSETS	3 Shelf NSF Metro Style Storage Rack 6'x4'x2'	5	\$ 45.00	\$ 225.00
1ST FLOOR OFFICE 1	Hon 4 Drawer Vertical File Cabinets	14	\$ 40.00	\$ 560.00
1ST FLOOR OFFICE 1	Particle Board Desk and Bookcase	1	\$ 50.00	\$ 50.00
1ST FLOOR OFFICE 1	Sanyo Dorm Fridge	1	\$ 25.00	\$ 25.00
1ST FLOOR OFFICE 1	Unk. Lg Paper Shredder	1	\$ 40.00	\$ 40.00
1ST FLOOR OFFICE 1	2 Door Storage Cabinet	1	\$ 35.00	\$ 35.00
1ST FLOOR OFFICE 1	Samsung SCX 6345N Multifunction Laser Printer/Copier	1	\$ 750.00	\$ 750.00
1ST FLOOR OFFICE 1	Md.Desk, Bookcase , Hutch and Exec Chair	1	\$ 150.00	\$ 150.00

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1ST FLOOR OFFICE 1	Dell 17" Flat Panel Monitor w/ XPS Tower and Keyboard	1	\$ 100.00	\$ 100.00
1ST FLOOR OFFICE 1	Rubbermaid 2 shelf carts	2	\$ 15.00	\$ 30.00
1ST FLOOR OFFICE 1	Decorative Art	5	\$ 10.00	\$ 50.00
1ST FLOOR OFFICE 2	4 Drawer File Cabinet	3	\$ 40.00	\$ 120.00
1ST FLOOR OFFICE 2	Upholstered Side Chairs	2	\$ 10.00	\$ 20.00
1ST FLOOR OFFICE 2	4 Panel Oriental Decorative Screen	1	\$ 150.00	\$ 150.00
1ST FLOOR OFFICE 2	Lg. Desk, Credenza with Hutch and Exec Chair	1	\$ 250.00	\$ 250.00
1ST FLOOR OFFICE 2	Dorm Style Fridge	1	\$ 25.00	\$ 25.00
1ST FLOOR OFFICE 2	3 Shelf NSF Metro Style Storage Rack 6'x4'x2'	1	\$ 45.00	\$ 45.00
1ST FLOOR OFFICE 2	HP 17" Monitor with Dell Tower and Keyboard	1	\$ 100.00	\$ 100.00
1ST FLOOR OFFICE 2	Sm. Samsung Printer	1	\$ 25.00	\$ 25.00
1ST FLOOR OFFICE 3	Leather Sofa	1	\$ 50.00	\$ 50.00
1ST FLOOR OFFICE 3	2 Door Particle Board Storage Cabinet	2	\$ 20.00	\$ 40.00
1ST FLOOR OFFICE 3	Md. Desk with Hutch and Steno Chair	1	\$ 100.00	\$ 100.00

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1ST FLOOR OFFICE 3	16" HP Flat Panel Monitor with Tower and Keyboard	1	\$ 75.00	\$ 75.00
1ST FLOOR OFFICE 3	Particle Board Bookcases	2	\$ 10.00	\$ 20.00
1ST FLOOR OFFICE 3	SS Danby Dorm Style Fridge	1	\$ 35.00	\$ 35.00
1ST FLOOR OFFICE 3	5 Drawer Vertical File Cabinet	1	\$ 50.00	\$ 50.00
1ST FLOOR OFFICE 3	4 Drawer Vertical File Cabinet	1	\$ 40.00	\$ 40.00
1ST FLOOR OFFICE 3	Steno Chair	2	\$ 5.00	\$ 10.00
1ST FLOOR OFFICE 3	Side Chair	1	\$ 5.00	\$ 5.00
1ST FLOOR OFFICE 3	4 Shelf Metal Storage Unit	1	\$ 20.00	\$ 20.00
BUSINESS OFFICE	Riveteer Style Shelving Unit 6'x4'x2'	2	\$ 35.00	\$ 70.00
BUSINESS OFFICE	6 Shelf NSF Metro Style Storage Rack 6'x4'x2' on wheels	1	\$ 100.00	\$ 100.00
BUSINESS OFFICE	Cisco 26 port Switch	1	\$ 100.00	\$ 100.00
BUSINESS OFFICE	Adran Total Access 924	1	\$ 100.00	\$ 100.00
BUSINESS OFFICE	Samsung Office Serv7100 Phone System with 15 handsets	1	\$ 950.00	\$ 950.00
BUSINESS OFFICE	Brother Fax Machine	1	\$ 15.00	\$ 15.00

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BUSINESS OFFICE	Assorted Office Supplies	1	\$ 50.00	\$	50.00
BUSINESS OFFICE	2 Door Metal Storage Cabinet	2	\$ 35.00	\$	70.00
BUSINESS OFFICE	Particle Board Tall Bookcases	2	\$ 20.00	\$	40.00
BUSINESS OFFICE	Sm. Glass Top Computer Desk with Steno Chair	1	\$ 40.00	\$	40.00
BUSINESS OFFICE	12" Dell Flat Panel Monitor with Lenovo Tower	1	\$ 50.00	\$	50.00
BUSINESS OFFICE	Side Chair	1	\$ 5.00	\$	5.00
BUSINESS OFFICE	Lg. Desk with Credenza and Hutch and Exec Chair	1	\$ 200.00	\$	200.00
BUSINESS OFFICE	Lg Desk	1	\$ 75.00	\$	75.00
BUSINESS OFFICE	17" Flat Panel Monitor with Tower	2	\$ 100.00	\$	200.00
BUSINESS OFFICE	Sm Bookshelf	1	\$ 25.00	\$	25.00
BUSINESS OFFICE	Kyocera 4050 Copier (new in 2006)	1	\$ 300.00	\$	300.00
BUSINESS OFFICE	Oriental Style Wood Side Chairs	2	\$ 25.00	\$	50.00
BUSINESS OFFICE	Sm. Paper Shredders	1	\$ 20.00	\$	20.00
CONFERENCE ROOM	8' Conference Table with (8)Oriental Style Side Chairs	1	\$ 350.00	\$	350.00

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CONFERENCE ROOM	Wood Hutch	1	\$ 50.00	\$ 50.00
CONFERENCE ROOM	Oriental Style Wood Side Chairs with Arms	3	\$ 25.00	\$ 75.00
CONFERENCE ROOM	Sm. Particle Board Desk	1	\$ 20.00	\$ 20.00
CONFERENCE ROOM	HP 16" Flat Panel Monitor, Keyboard and HP Tower	1	\$ 75.00	\$ 75.00
CONFERENCE ROOM	Security Camera System- (5) Stationary color cameras, Vizio Monitor, Swann 8 Channel 264 DVR	1	\$ 500.00	\$ 500.00
CONFERENCE ROOM	Decorative Art	1	\$ 30.00	\$ 30.00
ELEVATOR ROOM	Metal Storage Shelving 6'x4'x2'	4	\$ 20.00	\$ 80.00
ELEVATOR ROOM	Eco Lab Cleaning Caddy E0005631	1	\$ 150.00	\$ 150.00
MAINTANANCE ROOM	Metal Storage Shelf	1	\$ 35.00	\$ 35.00
MAINTANANCE ROOM	Assorted Handtools	1	\$ 200.00	\$ 200.00
MAINTANANCE ROOM	Wooden Work Bench	1	\$ 50.00	\$ 50.00
MAINTANANCE ROOM	Dual Function 2 Wheel Dolly	1	\$ 75.00	\$ 75.00
MAINTANANCE ROOM	4 Drawer Vertical File Cabinet	2	\$ 40.00	\$ 80.00
MAINTANANCE ROOM	Honda 6500 Watt Back Up Generator (outside)	1	\$ 600.00	\$ 600.00

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MAINTANANCE ROOM	Broken True SS 2 Door Commercial Freezer-SCRAP	1	\$ 50.00	\$ 50.00
MAINTANANCE ROOM	Assorted Building Supplies	1	\$ 100.00	\$ 100.00
DIRECTOR of NURSING OFFICE	Leather Side Chairs	2	\$ 25.00	\$ 50.00
DIRECTOR of NURSING OFFICE	Lg. Desk and Executive Chair	1	\$ 125.00	\$ 125.00
DIRECTOR of NURSING OFFICE	Security Camera System- (7) Stationary color cameras, Vizio Monitor, Qsec 8 Channel 264 DVR	1	\$ 700.00	\$ 700.00
DIRECTOR of NURSING OFFICE	Upholstered Sofa	1	\$ 50.00	\$ 50.00
DIRECTOR of NURSING OFFICE	Sm. Printer	1	\$ 25.00	\$ 25.00
DIRECTOR of NURSING OFFICE	Decorative Art	3	\$ 10.00	\$ 30.00
2nd FLOOR HALL	3 Seat Vinyl Reception Chair	1	\$ 50.00	\$ 50.00
2nd FLOOR HALL	Winco Reclining Geriatric PatientChairs	4	\$ 75.00	\$ 300.00
2nd FLOOR HALL	Assorted Decorative Artworks	1	\$ 200.00	\$ 200.00

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2nd FLOOR SUPPLY CLOSETS	5 Shelf NSF Metro Style Storage Rack 6'x4'x2'	1	\$ 75.00	\$ 75.00
2nd FLOOR SUPPLY CLOSETS	2 Tier Metal cart	1	\$ 25.00	\$ 25.00
2nd FLOOR SUPPLY CLOSETS	Rubbermaid Cleaning Cart	2	\$ 50.00	\$ 100.00
2nd FLOOR SUPPLY CLOSETS	Assorted Patient Gowns and Linens	1	\$ 150.00	\$ 150.00
2nd FLOOR SUPPLY CLOSETS	Assorted Mops and Mop Buckets	4	\$ 10.00	\$ 40.00
2nd FLOOR SUPPLY CLOSETS	Assorted Emergency Supplies- Flashlights, batteries	2	\$ 15.00	\$ 30.00
2nd FLOOR SUPPLY CLOSETS	Kleen Korner SS Electric Sterilizer	1	\$ 250.00	\$ 250.00
2nd FLOOR SUPPLY CLOSETS	EZ Lift Patient Hoist	2	\$ 150.00	\$ 300.00
SOUTH NURSES STATION	Samsung SCX 6345N Multifunction Laser Printer/Copier	1	\$ 750.00	\$ 750.00

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BRAUN
VALUATIONS · BROKERS · AUCTIONEERS

SOUTH NURSES STATION	Brother Fax Machine	1	\$ 25.00	\$ 25.00
SOUTH NURSES STATION	Sm. Metal File Cart	1	\$ 25.00	\$ 25.00
SOUTH NURSES STATION	Steno Chairs	3	\$ 10.00	\$ 30.00
SOUTH NURSES STATION	Sansui 14" Flat Panel Monitor and Gateway Tower	1	\$ 75.00	\$ 75.00
WEST NURSES STATION	Samsung SCX 6345N Multifunction Laser Printer/Copier	1	\$ 750.00	\$ 750.00
WEST NURSES STATION	Fax Machine	1	\$ 25.00	\$ 25.00
WEST NURSES STATION	14" Flat Panel Monitor Keyboard and Tower	1	\$ 75.00	\$ 75.00
WEST NURSES STATION	2 Steno Chairs	1	\$ 10.00	\$ 10.00
SHOWER ROOMS	Plastic Shower Chairs	20	\$ 10.00	\$ 200.00
DINING ROOM	Panasonic 50" Flat Panel TV	1	\$ 100.00	\$ 100.00
DINING ROOM	2 Door Storage Cabinet Particle Board	1	\$ 25.00	\$ 25.00
DINING ROOM	12' Banquet Table	4	\$ 35.00	\$ 140.00

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DINING ROOM	48" Round Table	2	\$ 25.00	\$ 50.00
DINING ROOM	Assorted Side Chairs	20	\$ 100.00	\$ 2,000.00
PT ROOM	Assorted Sm. Hand weights	1	\$ 50.00	\$ 50.00
PT ROOM	Detecto Wheelchair Scale	1	\$ 250.00	\$ 250.00
PT ROOM	Detecto Sitting Beam Scale	1	\$ 75.00	\$ 75.00
PT ROOM	Health O Meter Beam Scale	1	\$ 50.00	\$ 50.00
PT ROOM	Computer with Flat Panel Monitor	2	\$ 75.00	\$ 150.00
PT ROOM	Sm. Desk and Bookcase	2	\$ 50.00	\$ 100.00
PT ROOM	Full Length Mirror	1	\$ 25.00	\$ 25.00
PT ROOM	Dynatronics 4 Step Safety Stairs	1	\$ 100.00	\$ 100.00
PT ROOM	Dynatronics 10 Parallel Bars	1	\$ 150.00	\$ 150.00
PT ROOM	Dynatronics Lg. Raided Mat Treatment Table	1	\$ 250.00	\$ 250.00
PATIENT ROOM 2	Invacare Hospital Bed	4	\$ 125.00	\$ 500.00
PATIENT ROOM 2	Particle Board Nightstands	4	\$ 10.00	\$ 40.00
PATIENT ROOM 2	2 Door Particle Board Garment Closets	2	\$ 25.00	\$ 50.00
PATIENT ROOM 2	Over Bed Service Tray	4	\$ 20.00	\$ 80.00
PATIENT ROOM 3	Invacare Style Hospital Bed	4	\$ 125.00	\$ 500.00
PATIENT ROOM 3	Particle Board Nightstands	4	\$ 10.00	\$ 40.00
PATIENT ROOM 3	2 Door Particle Board Garment Closets	3	\$ 25.00	\$ 75.00
PATIENT ROOM 3	Over Bed Service Tray	1	\$ 20.00	\$ 20.00

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PATIENT ROOM 4	Invacare Style Hospital Bed	4	\$ 125.00	\$ 500.00
PATIENT ROOM 4	Particle Board Nightstands	4	\$ 10.00	\$ 40.00
PATIENT ROOM 4	2 Door Particle Board Garment Closets	2	\$ 25.00	\$ 50.00
PATIENT ROOM 4	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 4	Oriental Style Sofa with Wooden Frame	1	\$ 75.00	\$ 75.00
PATIENT ROOM 5	ZoneAire Sleep Surface Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 5	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 5	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 6	Invacare Hospital Bed	4	\$ 125.00	\$ 500.00
PATIENT ROOM 6	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 6	2 Door Particle Board Garment Closets	2	\$ 25.00	\$ 50.00
PATIENT ROOM 6	Over Bed Service Tray	1	\$ 20.00	\$ 20.00
PATIENT ROOM 7	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 7	Particle Board Nightstands	3	\$ 10.00	\$ 30.00

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PATIENT ROOM 7	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 8	Invacare Hospital Bed	4	\$ 125.00	\$ 500.00
PATIENT ROOM 8	Particle Board Nightstands	4	\$ 10.00	\$ 40.00
PATIENT ROOM 8	Over Bed Service Tray	4	\$ 20.00	\$ 80.00
PATIENT ROOM 8	2 Door Particle Board Garment Closets	2	\$ 25.00	\$ 50.00
PATIENT ROOM 9	Invacare Style Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 9	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 9	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 10	Invacare Hospital Bed	4	\$ 125.00	\$ 500.00
PATIENT ROOM 10	Particle Board Nightstands	4	\$ 10.00	\$ 40.00
PATIENT ROOM 10	Over Bed Service Tray	4	\$ 20.00	\$ 80.00
PATIENT ROOM 10	2 Door Particle Board Garment Closets	2	\$ 25.00	\$ 50.00
PATIENT ROOM 11	Invacare Style Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 11	Particle Board Nightstands	3	\$ 10.00	\$ 30.00

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PATIENT ROOM 11	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 11	Visitor Chair	1	\$ 15.00	\$ 15.00
PATIENT ROOM 12	Invacare Hospital Bed	4	\$ 125.00	\$ 500.00
PATIENT ROOM 12	Particle Board Nightstands	4	\$ 10.00	\$ 40.00
PATIENT ROOM 12	Over Bed Service Tray	4	\$ 20.00	\$ 80.00
PATIENT ROOM 12	2 Door Particle Board Garment Closets	2	\$ 25.00	\$ 50.00
PATIENT ROOM 14	Invacare Hospital Bed	4	\$ 125.00	\$ 500.00
PATIENT ROOM 14	Particle Board Nightstands	4	\$ 10.00	\$ 40.00
PATIENT ROOM 14	Over Bed Service Tray	4	\$ 20.00	\$ 80.00
PATIENT ROOM 14	2 Door Particle Board Garment Closets	2	\$ 25.00	\$ 50.00
PATIENT ROOM 15	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 15	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 15	Over Bed Service Tray	2	\$ 20.00	\$ 40.00
PATIENT ROOM 15	2 Door Particle Board Garment Closets	2	\$ 25.00	\$ 50.00

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PATIENT ROOM 16	Invacare Style Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 16	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 16	Over Bed Service Tray	1	\$ 20.00	\$ 20.00
PATIENT ROOM 16	2 Door Particle Board Garment Closets	1	\$ 25.00	\$ 25.00
PATIENT ROOM 17	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 17	Particle Board Nightstands	2	\$ 10.00	\$ 20.00
PATIENT ROOM 17	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 17	2 Door Particle Board Garment Closets	2	\$ 25.00	\$ 50.00
PATIENT ROOM 18	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 18	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 18	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 19	Invacare Hospital Bed	1	\$ 125.00	\$ 125.00
PATIENT ROOM 19	Particle Board Nightstands	1	\$ 10.00	\$ 10.00
PATIENT ROOM 19	Over Bed Service Tray	1	\$ 20.00	\$ 20.00

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PATIENT ROOM 21	Invacare Hospital Bed	1	\$ 125.00	\$ 125.00
PATIENT ROOM 21	Particle Board Nightstands	1	\$ 10.00	\$ 10.00
PATIENT ROOM 21	Over Bed Service Tray	1	\$ 20.00	\$ 20.00
PATIENT ROOM 23	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 23	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 23	Over Bed Service Tray	2	\$ 20.00	\$ 40.00
PATIENT ROOM 24	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 24	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 24	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 26	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 26	Particle Board Nightstands	2	\$ 10.00	\$ 20.00
PATIENT ROOM 26	Over Bed Service Tray	1	\$ 20.00	\$ 20.00
PATIENT ROOM 27	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 27	Particle Board Nightstands	3	\$ 10.00	\$ 30.00

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PATIENT ROOM 27	Over Bed Service Tray	2	\$ 20.00	\$ 40.00
PATIENT ROOM 27	Visitor Chair	1	\$ 15.00	\$ 15.00
PATIENT ROOM 28	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 28	Particle Board Nightstands	2	\$ 10.00	\$ 20.00
PATIENT ROOM 28	Over Bed Service Tray	2	\$ 20.00	\$ 40.00
PATIENT ROOM 29	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 29	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 29	Over Bed Service Tray	2	\$ 20.00	\$ 40.00
PATIENT ROOM 30	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 30	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 30	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 31	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 31	Particle Board Nightstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 31	Over Bed Service Tray	3	\$ 20.00	\$ 60.00

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PATIENT ROOM 32	Invacare Hospital Bed	2	\$ 125.00	\$ 250.00
PATIENT ROOM 32	Particle Board Nighstands	2	\$ 10.00	\$ 20.00
PATIENT ROOM 32	Over Bed Service Tray	1	\$ 20.00	\$ 20.00
PATIENT ROOM 32	Low Collapsible Plastic Tubing Cot	1	\$ 35.00	\$ 35.00
PATIENT ROOM 33	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 33	Particle Board Nighstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 33	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 34	Invacare Hospital Bed	1	\$ 125.00	\$ 125.00
PATIENT ROOM 34	Particle Board Nighstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 34	Over Bed Service Tray	3	\$ 20.00	\$ 60.00
PATIENT ROOM 34	Low Collapsible Plastic Tubing Cot	2	\$ 35.00	\$ 70.00
PATIENT ROOM 35	Invacare Hospital Bed	3	\$ 125.00	\$ 375.00
PATIENT ROOM 35	Particle Board Nighstands	3	\$ 10.00	\$ 30.00
PATIENT ROOM 35	Over Bed Service Tray	3	\$ 20.00	\$ 60.00

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PATIENT ROOM 36	Invacare Hospital Bed	1	\$ 125.00	\$ 125.00
PATIENT ROOM 36	Particle Board Nightstands	1	\$ 10.00	\$ 10.00
PATIENT ROOM 36	Over Bed Service Tray	1	\$ 20.00	\$ 20.00
PATIENT ROOM 37	Invacare Hospital Bed	4	\$ 125.00	\$ 500.00
PATIENT ROOM 37	Particle Board Nightstands	4	\$ 10.00	\$ 40.00
PATIENT ROOM 37	Over Bed Service Tray	4	\$ 20.00	\$ 80.00
OUTDOOR PATIENT AREA	Picnic Table	1	\$ 25.00	\$ 25.00
OUTDOOR PATIENT AREA	Bench	1	\$ 25.00	\$ 25.00
OUTDOOR PATIENT AREA	Plastic Chairs	10	\$ 3.00	\$ 30.00
LAUNDRY	Milnor 55lb Commercial Washers	3	\$ 1,500.00	\$ 4,500.00
LAUNDRY	Admiral Residential Sized Wasker	1	\$ 50.00	\$ 50.00
LAUNDRY	Canvas Laundry Hampers	2	\$ 50.00	\$ 100.00
LAUNDRY	Cissel 75lb Commercial Dryers	3	\$ 800.00	\$ 2,400.00
LAUNDRY	8' Wooden Tables for folding	2	\$ 20.00	\$ 40.00
LAUNDRY	8 Garment Rack	1	\$ 35.00	\$ 35.00
LAUNDRY	Soiled Laundry Carts	20	\$ 10.00	\$ 200.00
LAUNDRY	Clean Laundry Carts with shelves	15	\$ 15.00	\$ 225.00
SHED STORAGE	10'x 10' Tuff Shed	2	\$ 500.00	\$ 1,000.00

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SLED STORAGE	8'x 8' Storage Shed	2	\$ 200.00	\$ 400.00
SLED STORAGE	Assorted Parts and outdoor supplies	1	\$ 200.00	\$ 200.00
SLED STORAGE	SS BBQ Grill	1	\$ 100.00	\$ 100.00
SLED STORAGE	Floor Buffers	2	\$ 50.00	\$ 100.00
MISC.	Patient TV's- 20" Flat Panel-COUNT NOT CONFIRMED	20	\$ 50.00	\$ 1,000.00
MISC.	Salon Chair	1	\$ 75.00	\$ 75.00

Forced Liquidation Value	\$ 61,000.00
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B6C (Official Form 6C) (04/13)

2013 USBC, Central District of California

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

- 11 U.S.C. § 522(b)(2)
- 11 U.S.C. § 522(b)(3)

Check if debtor claims a homestead exemption that exceeds
\$155,675.*

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
NONE			

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

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

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 AN ACCOUNT NUMBER <i>(See Instructions Above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.			VALUE \$					

0 continuation sheets attached

Subtotal ►
(Total of this page)

Total ►
(Use only on last page)

\$	\$
\$	\$

(Report also on Summary of Schedules.) (If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

B 6E (Official Form 6E) (04/13)

2013 USBC, Central District of California

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

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).

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

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

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

Taxes and Certain Other Debts Owed to Governmental Units Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
California State Board of Equalization P.O. Box 942879 Sacramento, CA 94279-7072			State Taxes				\$1,283.13	\$1,283.13	\$0.00

Sheet no. 1 of 34 continuation sheets attached to Schedule
of Creditors Holding Priority Claims

Subtotals▶ (Totals of this page)	\$	1,283.13	\$	1,283.13	\$	0.00
Total▶ <small>(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)</small>	\$					
Totals▶ <small>(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)</small>			\$		\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Adela C. Reyes 407 N. Avenue 50 Apt. 310 Los Angeles, CA 90042			Wages, Salaries, Commissions				\$872.90	\$872.90	\$0.00	
Account No.										
Ailyn Roque 3329 E. Green St. Pasadena, CA 91107			Wages, Salaries, Commissions				\$376.03	\$376.03	\$0.00	
Account No.										
Alfred Duran 909 N. Frederic St. Burbank, CA 91505			Wages, Salaries, Commissions				\$94.79	\$94.79	\$0.00	
Sheet no. <u>2</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 1,343.72	\$ 1,343.72	\$0.00
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							Total▶	\$		
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							Totals▶	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Alfredo Buenaflor 397 W. Mendocino Altadena, CA 91001			Wages, Salaries, Commissions				\$591.53	\$591.53	\$0.00
Account No.									
Arnulfo Guzman 9540 Olrey St. Rosemead, CA 91770			Wages, Salaries, Commissions				\$892.99	\$892.99	\$0.00
Account No.									
Arthur Dawey 659 N. Occidental Blvd. Los Angeles , CA 90026			Wages, Salaries, Commissions				\$1,741.65	\$1,741.65	\$0.00
Subtotals▶ (Totals of this page)							\$ 3,226.17	\$ 3,226.17	\$0.00
Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							\$		
Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							\$	\$	

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Bonifacio L. Queral Jr. 4235 Maxson Rd. El Monte, CA 91732			Wages, Salaries, Commissions				\$861.27	\$861.27	\$0.00	
Account No.										
Brian Guzman 411 N. Summit Ave. #15 Pasadena, CA 91103			Wages, Salaries, Commissions				\$194.32	\$194.32	\$0.00	
Account No.										
Cassandra Gregoria 7881 Claybeck Ave. Sun Valley, CA 91352			Wages, Salaries, Commissions				\$979.66	\$979.66	\$0.00	
Sheet no. <u>4</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 2,035.25	\$ 2,035.25	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Cesar G. Bindoy 726 Manzanita Ave Pasadena, CA 91103			Wages, Salaries, Commissions				\$955.50	\$955.50	\$0.00	
Account No.										
Cesar Guerrero 6461 1/4 N. Figueroa St. Los Angeles, CA 90042			Wages, Salaries, Commissions				\$1,280.47	\$1,280.47	\$0.00	
Account No.										
Claudia Garcia 716 N. Grand Ave. #3 Covina , CA 91724			Wages, Salaries, Commissions				\$986.29	\$986.29	\$0.00	
Sheet no. <u>5</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 3,222.26	\$ 3,222.26	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Cleofer Tan 13929 S. Jersey Ave. Norwalk, CA 90650			Wages, Salaries, Commissions				\$1,956.78	\$1,956.78	\$0.00	
Account No.										
Concepcion Perez 142 W. Saxon Ave. Apt. B San Gabriel, CA 91776			Wages, Salaries, Commissions				\$636.78	\$636.78	\$0.00	
Account No.										
Danilo De Guzman 4536 Ellenwood Dr. Los Angeles, CA 90041			Wages, Salaries, Commissions				\$126.51	\$126.51	\$0.00	
Sheet no. <u>6</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 2,720.07	\$ 2,720.07	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re **D&C Care Center, Inc.**,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Delmy Arias 784 Sunset Ave. Pasadena, CA 91103			Wages, Salaries, Commissions				\$726.24	\$726.24	\$0.00	
Account No.										
Edwin P. Ignacio 1507 N. Avenue 47 Los Angeles, CA 90042			Wages, Salaries, Commissions				\$824.04	\$824.04	\$0.00	
Account No.										
Edwin Roldan 4634 York Blvd. #6 Los Angeles, CA 90041			Wages, Salaries, Commissions				\$129.48	\$129.48	\$0.00	
Sheet no. <u>7</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 1,679.76	\$ 1,679.76	\$0.00
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							Total▶	\$		
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							Totals▶	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Elbert Arceo 3347 Glenrose Avenue Altadena, CA 91001			Wages, Salaries, Commissions				\$322.07	\$322.07	\$0.00	
Account No.										
Elizabeth Serrano 5137 Eagle Rock Blvd. Los Angeles, CA 90041			Wages, Salaries, Commissions				\$738.34	\$738.34	\$0.00	
Account No.										
Elmer Naval 3138 Glenhurst Ave. Los Angeles, CA 90039			Wages, Salaries, Commissions				\$513.70	\$513.70	\$0.00	
Sheet no. 8 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 1,574.11	\$ 1,574.11	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Erlinda Hall 2010 W. Ash Ave. Fullerton, CA 92833			Wages, Salaries, Commissions				\$3,580.48	\$3,580.48	\$0.00
Account No.									
Eva Gamaz 1718 State St. South Pasadena, CA 91030			Wages, Salaries, Commissions				\$941.27	\$941.27	\$0.00
Account No.									
Fabiola Avila 4643 Earle Ave Rosemead, CA 91770			Wages, Salaries, Commissions				\$710.83	\$710.83	\$0.00

Sheet no. 9 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims

Subtotals > (Totals of this page) \$ **5,232.58** \$ **5,232.58** \$ **0.00**

Total > (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)

\$

Totals > (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)

\$ \$

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Fei Kong 5949 N. Walnut Grove San Gabriel, CA 91775			Wages, Salaries, Commissions				\$3,637.12	\$3,637.12	\$0.00
Account No.									
Fernan Castro 751 E. Orange Grove Blvd. Pasadena, CA 91104			Wages, Salaries, Commissions				\$849.45	\$849.45	\$0.00
Account No.									
Fidelia Ukemba 2275 Vandalia Ave. Los Angeles, CA 90032			Wages, Salaries, Commissions				\$791.61	\$791.61	\$0.00

Sheet no. 10 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims

Subtotals▶
(Totals of this page) \$ **5,278.18** \$ **5,278.18** \$ **0.00**

Total▶
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)

\$

Totals▶
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)

\$ \$

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Francesca Fausto 1743 W. 39th St. Los Angeles, CA 90062			Wages, Salaries, Commissions				\$627.73	\$627.73	\$0.00
Account No.									
Geno Dawn Garcia 402 S. Canyon Blvd. #4 Monrovia, CA 91016			Wages, Salaries, Commissions				\$728.18	\$728.18	\$0.00
Account No.									
Gerardo Tagle 45 S. Lotus Ave. Pasadena, CA 91107			Wages, Salaries, Commissions				\$818.12	\$818.12	\$0.00
Subtotals▶ (Totals of this page)							\$ 2,174.03	\$ 2,174.03	\$0.00
Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							\$		
Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Gilberto Cruz 4618 York Blvd. #312 Los Angeles, CA 90041			Wages, Salaries, Commissions				\$630.78	\$630.78	\$0.00	
Account No.										
Giorgio Garcia 402 S. Canyon Blvd. #4 Monrovia, CA 91016			Wages, Salaries, Commissions				\$250.17	\$250.17	\$0.00	
Account No.										
Glenda Romagoza 5113 Lincoln Ave. Los Angeles, CA 90042			Wages, Salaries, Commissions				\$808.69	\$808.69	\$0.00	
Sheet no. 12 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 1,689.64	\$ 1,689.64	\$0.00
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							Total▶	\$		
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							Totals▶	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Gloria Peralta 10210 Mountain Ave. #103 Tujunga , CA 91042			Wages, Salaries, Commissions				\$1,923.49	\$1,923.49	\$0.00	
Account No.										
Gretha Rajaguru 725 N. Keenwood St. #2 Glendale, CA 91206			Wages, Salaries, Commissions				\$1,276.51	\$1,276.51	\$0.00	
Account No.										
Heaven Arespachoga 415 W. Glenoaks Blvd. Glendale, CA 91202			Wages, Salaries, Commissions				\$360.81	\$360.81	\$0.00	
Sheet no. <u>13</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 3,560.81	\$ 3,560.81	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No. Hector Mendoza 6715 Laurel Canyon Blvd. #6 N. Hollywood, CA 91606			Wages, Salaries, Commissions				\$787.56	\$787.56	\$0.00
Account No. Helen J. Jackson 2463 Canyada Ave. Altadena, CA 91001			Wages, Salaries, Commissions				\$2,100.88	\$2,100.88	\$0.00
Account No. Hienhoa (Helen) Nguyen 1640 N. Fair Oaks Ave Pasadena, CA 91103			Wages, Salaries, Commissions				\$2,933.20	\$2,933.20	\$0.00
Subtotals▶ (Totals of this page)							\$ 5,821.64	\$ 5,821.64	\$0.00
Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							\$.	
Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Hue T. Tran 355 Sierra Madre Villa Ave. Pasadena, CA 91107			Wages, Salaries, Commissions				\$1,008.77	\$1,008.77	\$0.00	
Account No.										
Ireno Almoquirá 1583 N. Fair Oaks Ave. #203 Pasadena, CA 91103			Wages, Salaries, Commissions				\$808.79	\$808.79	\$0.00	
Account No.										
Jacob Caldera 1440 Nieton Ln. #439 Los Angeles, CA 90033			Wages, Salaries, Commissions				\$671.93	\$671.93	\$0.00	
Sheet no. <u>15</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 2,489.49	\$ 2,489.49	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Jake Payne 610 S. Main St. Apt. D Burbank, CA 91506			Wages, Salaries, Commissions				\$1,485.60	\$1,485.60	\$0.00
Jamie D. Chu 1640 N. Fair Oaks Ave Pasadena, CA 91103			Wages, Salaries, Commissions				\$2,979.21	\$2,979.21	\$0.00
Jason Blow 448 W. Altadena Dr. Altadena, CA 91101			Wages, Salaries, Commissions				\$503.01	\$503.01	\$0.00
Subtotals▶ (Totals of this page)							\$ 4,967.82	\$ 4,967.82	\$0.00
Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							\$		
Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Jennifer Arceo 3347 Glenrose Ave Altadena, CA 91001			Wages, Salaries, Commissions				\$805.86	\$805.86	\$0.00
Account No.									
Jesica Bijlmakers 5510 Beck Ave. North Hollywood, CA 91601			Wages, Salaries, Commissions				\$1,659.32	\$1,659.32	\$0.00
Account No.									
Jessica Kriske 24149 Mentry Dr. Newhall, CA 91321			Wages, Salaries, Commissions				\$490.85	\$490.85	\$0.00

Sheet no. 17 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims

Subtotals▶ (Totals of this page)	\$ 2,956.03	\$ 2,956.03	\$0.00
Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)		\$	\$

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Joanna Rivera 1431 Nieto Ln. #35 Los Angeles, CA 90033			Wages, Salaries, Commissions				\$873.84	\$873.84	\$0.00	
Account No.										
Joenard Catotocan 826 S. Mariposa St. Glendale, CA 91205			Wages, Salaries, Commissions				\$1,855.70	\$1,855.70	\$0.00	
Account No.										
Jordan Dizon 11049 Magnolia Blvd. #241 North Hollywood, CA 91601			Wages, Salaries, Commissions				\$1,409.52	\$1,409.52	\$0.00	
Sheet no. 18 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 4,139.06	\$ 4,139.06	\$0.00
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							Total▶	\$		
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							Totals▶	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Jose C. Chavez 11363 Medina Ct. El Monte, CA 91731			Wages, Salaries, Commissions				\$654.88	\$654.88	\$0.00	
Account No.										
Jose Garcia 1640 Navarro Ave. Pasadena, CA 91103			Wages, Salaries, Commissions				\$542.62	\$542.62	\$0.00	
Account No.										
Josephine Dionisio 1220 S. 2nd St. Alhambra, CA 91801			Wages, Salaries, Commissions				\$1,727.75	\$1,727.75	\$0.00	
Sheet no. 19 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 2,925.25	\$ 2,925.25	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Joshua Osorio 665 W. Altadena Dr. #52 Altadena, CA 91001			Wages, Salaries, Commissions				\$561.27	\$561.27	\$0.00
Account No.									
Jules Massa Makanata 1583 N. Fair Oaks Ave. #201 Pasadena, CA 91103			Wages, Salaries, Commissions				\$787.22	\$787.22	\$0.00
Account No.									
Julieta Enero 2242 Broderick Ave. Duarte, CA 91010			Wages, Salaries, Commissions				\$1,103.83	\$1,103.83	\$0.00
Subtotals▶ (Totals of this page)							\$ 2,452.32	\$ 2,452.32	\$0.00
Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							\$		
Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Katrina Rivera 460 W. Doran St. #14 Glendale, CA 91203			Wages, Salaries, Commissions				\$400.86	\$400.86	\$0.00	
Account No.										
Kelly Malvaez 885 Chapman Ave. Pasadena, CA 91103			Wages, Salaries, Commissions				\$684.10	\$684.10	\$0.00	
Account No.										
Kristine Rubis 1850 Morton Ave. #303 Los Angeles, CA 90026			Wages, Salaries, Commissions				\$441.79	\$441.79	\$0.00	
Sheet no. 21 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 1,526.75	\$ 1,526.75	\$0.00
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							Total▶	\$		
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							Totals▶		\$	\$

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Lorraine Sanchez 1333 N. Garvey Ave #238 West Covina, CA 91733			Wages, Salaries, Commissions				\$1,320.12	\$1,320.12	\$0.00	
Account No.										
Lucia Saavedra 121 Marquereta Ave. Apt. E Alhambra, CA 91801			Wages, Salaries, Commissions				\$414.77	\$414.77	\$0.00	
Account No.										
Margarita Melchor 16004 Bassett St. Van Nuys, CA 91406			Wages, Salaries, Commissions				\$701.43	\$701.43	\$0.00	
Sheet no. <u>22</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 2,436.32	\$ 2,436.32	\$0.00
(Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							Total▶	\$		
(Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)							Totals▶	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Margarita Munoz De Torres 580 N. Los Robles Ave. #8 Pasadena, CA 91101			Wages, Salaries, Commissions				\$921.64	\$921.64	\$0.00	
Account No.										
Maria C. Duran 1260 N. Raymond Ave. Pasadena, CA 91103			Wages, Salaries, Commissions				\$530.93	\$530.93	\$0.00	
Account No.										
Maria Corazon Rubi 10962 Orion Ave. Mission Hills, CA 91345			Wages, Salaries, Commissions				\$1,671.79	\$1,671.79	\$0.00	
Sheet no. 23 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 3,124.36	\$ 3,124.36	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Maria Isabel Boch 39 N. Sierra Bonita` #2 Pasadena, CA 91106			Wages, Salaries, Commissions				\$889.66	\$889.66	\$0.00	
Account No.										
Maria Orduna 2887 Wagner Ct. Altadena, CA 91001			Wages, Salaries, Commissions				\$256.01	\$256.01	\$0.00	
Account No.										
Mario Alvarez 1914 Lucas #02 San Fernando, CA 91340			Wages, Salaries, Commissions				\$1,152.16	\$1,152.16	\$0.00	
Sheet no. <u>24</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 2,297.83	\$ 2,297.83	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Marjorie Cabral 677 E. Ruddock St. #10 Covina, CA 91713			Wages, Salaries, Commissions				\$1,494.71	\$1,494.71	\$0.00	
Account No.										
Mark Dy 305 1/2 San Parcual Ave. Los Angeles, CA 90042			Wages, Salaries, Commissions				\$615.00	\$615.00	\$0.00	
Account No.										
Mark Mondia 1840 Buena Vista #C Duarte, CA 91010			Wages, Salaries, Commissions				\$429.51	\$429.51	\$0.00	
Sheet no. 25 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 2,539.22	\$ 2,539.22	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Maslinati Mannawi 19600 Lencho Place Walnut, CA 91789			Wages, Salaries, Commissions				\$729.94	\$729.94	\$0.00	
Account No.										
Melissa Bagongahasa 3836 1/2 E. Avenue 43 Los Angeles, CA 90041			Wages, Salaries, Commissions				\$929.69	\$929.69	\$0.00	
Account No.										
Mery Rodriguez 3108 Hollydale Dr. Apt. 109 Los Angeles, CA 90039			Wages, Salaries, Commissions				\$833.65	\$833.65	\$0.00	
Sheet no. <u>26</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 2,493.28	\$ 2,493.28	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Mirna Viera 1737 Glen Ave. Pasadena, CA 91103			Wages, Salaries, Commissions				\$712.41	\$712.41	\$0.00	
Account No.										
Myrna Violin 2035 N. Madison Ave. Altadena, CA 91001			Wages, Salaries, Commissions				\$626.65	\$626.65	\$0.00	
Account No.										
Nelson Palabrica 10023 Lower Azusa Road Temple City, CA 91780			Wages, Salaries, Commissions				\$2,653.52	\$2,653.52	\$0.00	
Sheet no. <u>27</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 3,992.58	\$ 3,992.58	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Nicole Paula De Leon 410 Salem St. #11 Glendale, CA 91203			Wages, Salaries, Commissions				\$216.81	\$216.81	\$0.00	
Account No.										
Norma Avila 809 E. Sacramento St. Altadena, CA 91001			Wages, Salaries, Commissions				\$563.48	\$563.48	\$0.00	
Account No.										
Norma Manzo 850 N. Los Robles #10 Pasadena, CA 91101			Wages, Salaries, Commissions				\$900.04	\$900.04	\$0.00	
Sheet no. 28 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 1,680.33	\$ 1,680.33	\$0.00
							Total▶	\$		
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)			
							Total▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Pablito Almoquira 25005 Magic Mountain Parkway #429 Valencia, CA 91355			Wages, Salaries, Commissions				\$655.03	\$655.03	\$0.00	
Account No.										
Paola Mondragon 1437 N. Avenue 47 #10 Los Angeles, CA 90042			Wages, Salaries, Commissions				\$256.00	\$256.00	\$0.00	
Account No.										
Rachel Milling 4026 Griffin Ave. Los Angeles , CA 90031			Wages, Salaries, Commissions				\$526.25	\$526.25	\$0.00	
Sheet no. 29 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 1,437.28	\$ 1,437.28	\$ 0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Rafael Atilano 1089 N. Summit Pasadena, CA 91103			Wages, Salaries, Commissions				\$1,089.08	\$1,089.08	\$0.00	
Account No.										
Ralph Arellano 10962 Orion Ave. Mission Hills, CA 91345			Wages, Salaries, Commissions				\$1,416.48	\$1,416.48	\$0.00	
Account No.										
Rene Flores 136 W. Pine Altadena, CA 91001			Wages, Salaries, Commissions				\$946.36	\$946.36	\$0.00	
Sheet no. 30 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 3,451.92	\$ 3,451.92	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Rhina Guevara 403 Figuerora Dr. #17 Altadena, CA 91001			Wages, Salaries, Commissions				\$692.09	\$692.09	\$0.00	
Account No.										
Richard T. Chu 1640 N. Fair Oaks Ave. Pasadena, CA 91103			Wages, Salaries, Commissions				\$3,925.76	\$3,925.76	\$0.00	
Account No.										
Rocio Rosas 14697 Nurmi St. Sylmar, CA 91342			Wages, Salaries, Commissions				\$957.50	\$957.50	\$0.00	
Sheet no. <u>31</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 5,575.35	\$ 5,575.35	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
Account No.									
Ronan Suarez 734 E. Mountain St. Apt. 2 Pasadena, CA 91104			Wages, Salaries, Commissions				\$480.58	\$480.58	\$0.00
Account No.									
Rosalva Rodriguez 721 N. Garfield Ave. #2 Pasadena, CA 91104			Wages, Salaries, Commissions				\$768.50	\$768.50	\$0.00
Account No.									
Sheena Rivera 460 W. Doran St. #114 Glendale, CA 91203			Wages, Salaries, Commissions				\$1,059.78	\$1,059.78	\$0.00
Subtotals▶ (Totals of this page)							\$ 2,308.86	\$ 2,308.86	\$0.00
Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)							\$		
Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)								\$	\$

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

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

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No.										
Sobeida Turcios 1502 N. Fair Oaks Ave. Pasadena, CA 91103			Wages, Salaries, Commissions				\$1,100.40	\$1,100.40	\$0.00	
Account No.										
Susana Pena 111 S. Rampart Blvd. #1 Los Angeles, CA 90057			Wages, Salaries, Commissions				\$861.50	\$861.50	\$0.00	
Account No.										
Sylvia Serrano 664 1/2 E. Sacramento St. Altadena, CA 91001			Wages, Salaries, Commissions				\$694.74	\$694.74	\$0.00	
Sheet no. 33 of 34 continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 2,656.64	\$ 2,656.64	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)	\$	\$	

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Wages, salaries, and commissions Type of Priority for Claims Listed on This Sheet

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY	
Account No. Tara Hupp 4469 Ventura Canyon Ave. E212 Sherman Oaks, CA 91423			Wages, Salaries, Commissions				\$3,222.76	\$3,222.76	\$0.00	
Account No. Vanessa Acevedo 721 N. Garfield #2 Pasadena, CA 91101			Wages, Salaries, Commissions				\$489.18	\$489.18	\$0.00	
Account No. Victor Genojev 835 Sunset Ave. Pasadena, CA 91103			Wages, Salaries, Commissions				\$1,630.34	\$1,630.34	\$0.00	
Sheet no. <u>34</u> of <u>34</u> continuation sheets attached to Schedule of Creditors Holding Priority Claims							Subtotals▶ (Totals of this page)	\$ 5,342.28	\$ 5,342.28	\$0.00
							Total▶ (Use only on last page of the completed Schedule E. Report also on the Summary of Schedules.)	\$ 101,634.32		
							Totals▶ (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.)		\$ 101,634.32	\$ 0.00

In re D&C Care Center, Inc., Case No. _____

Debtor

(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

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 <i>See instructions above.</i>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							
AT&T P.O. Box 5025 Carol Stream, IL 60197			Phone			X	\$457.37
ACCOUNT NO.							
AT&T All In One P.O. Box 105068 Atlanta, GA 30348			Phone			X	\$412.24
ACCOUNT NO.							
Bernard Calalang, Elise Barrientos, Rosario Madrid and Emilia Ramos c/o Brian D. Chase, Esq. 1301 Dove Street, Suite 120 Newport Beach, CA 92660			Lawsuit	X	X	X	Unknown
ACCOUNT NO.							
California Department of Health Care Services P.O. Box 997434 MS 3202 Sacramento, CA 95899			State Licensing				\$30,888.00
Subtotal▶							\$ 31,757.61
Total▶							\$

6 continuation sheets attached

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable, on the Statistical
Summary of Certain Liabilities and Related Data.)

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <small>(See instructions above.)</small>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO.								
California Department of Health Care Services P.O. Box 997415 Sacramento, CA 95899			Quality Assurance				\$1,000,000.00	
ACCOUNT NO.								
California Department of Motor Vehicles Registration Operations P.O. Box 942869 Sacramento, CA 94269-0001			Vehicle Registration Fee (Toyota Tacoma)				\$158.00	
ACCOUNT NO.								
Celexmark Corp. 8 Digital Dr. Suite 100 Novato, CA 94949			Printing				\$217.44	
ACCOUNT NO.								
Chem Mark P.O. Box 721 Garden Grove, CA 92842			Chemical Supplies				\$1,882.84	
Sheet no. <u>1</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶	\$ 1,002,258.28
							Total▶	\$
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)								

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <small>(See instructions above.)</small>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO.								
City of Pasadena 100 N. Garfield Ave., Room N106 P.O. Box 7120 Pasadena, CA 91109			Business License				\$1,795.74	
ACCOUNT NO.								
City of Pasadena 100 N. Garfield Ave., Room N106 P.O. Box 7120 Pasadena, CA 91109-7220			Utilities: Water				\$102.09	
ACCOUNT NO.								
Ecolab Pest 26252 Network Place Chicago, IL 60673			Pest Control				\$489.77	
ACCOUNT NO.								
Elissa Olson 20655 Walnut Valley Drive Walnut, CA 91789			Consulting Services				\$1,950.00	
Sheet no. <u>2</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶	\$ 4,337.60
							Total▶	\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <small>(See instructions above.)</small>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.			7/31/14				
F & W Foodservices P.O. Box 3140 7005 Tujunga Avenue North Hollywood, CA 92609-0140			Food				\$48,846.69
ACCOUNT NO.			Personal Loan				
Felipe L. Chu and Erlinda Chu 1640 North Fair Oaks Ave. Pasadena, CA 91103							\$93,674.59
ACCOUNT NO.			Elevator service				
Goodrich Service 10631 Bloomfield St. Suite 17 Los Alamitos, CA 90720							\$445.00
ACCOUNT NO.			Barber for residents				
Keo Custom Hair System 505 E. Colorado Street Glendale, CA 91205							\$280.00
Sheet no. <u>3</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ 143,246.28
							Total▶ \$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re D&C Care Center, Inc.
 Debtor

Case No. _____
 (if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <small>(See instructions above.)</small>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO.							
Maribel Ruiz c/o Geoffrey C. Lyon 400 Oceangate, Ste. 450 Long Beach, CA 90802			Lawsuit	X	X	X	Unknown
ACCOUNT NO.							
Pointclickcare P.O. Box 8500 Philadelphia, PA 19178			Software				\$1,368.19
ACCOUNT NO.							
Respiratory Medical Service 7410 Orangewood Dr. Riverside, CA 92504			Oxygen				\$202.00
ACCOUNT NO.							
S&W Enterprises P.O. Box 143 Azusa , CA 91702			Ink				\$75.21
Sheet no. <u>4</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ 1,645.40
							Total▶ \$
(Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <small>(See instructions above.)</small>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	
ACCOUNT NO.								
Sameena Israr 5118 Harland Ct. Dublin, CA 94568			Billing Services				\$2,500.00	
ACCOUNT NO.								
SML Corporation 5909 Little Oak Ct. Rancho Cucamonga, CA 91739			DME				\$5,668.55	
ACCOUNT NO.								
Southern California Gas P.O. Box C Monterey Park, CA 91756			Utilities: Gas				\$477.49	
ACCOUNT NO.								
Telepacific Communication 515 S. Flower Street 47th Floor Los Angeles, CA 90071			Phone			X	\$2,908.62	
Sheet no. <u>5</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶	\$ 11,554.66
							Total▶	\$

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules and, if applicable on the Statistical
Summary of Certain Liabilities and Related Data.)

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <small>(See instructions above.)</small>	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. Zurich American Insurance c/o Patriot Underwriters 1400 American Lane Schaumburg, IL 60196			Workers Comp Insurance				\$10,000.00
Sheet no. <u>6</u> of <u>6</u> continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal▶ \$ 10,000.00
Total▶ (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable on the Statistical Summary of Certain Liabilities and Related Data.)							\$ 1,204,799.83

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

2007 USBC, Central District of California

In re D&C Care Center, Inc.,

Debtor

Case No. _____

(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

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.
Felipe L. Chu and F & E Chu Family Trust 1640 N. Fair Oaks Ave. Pasadena, CA 91103	Description: Commercial lease agreement for the real property located at 1608 N. Fair Oaks Ave., Pasadena, CA Nature of Debtor's Interest: Lessee Lease is for nonresidential real property.
Great American Insurance Company of NY Shomer Insurance Agency, Inc. 4221 Wilshire Blvd. #222 Los Angeles, CA 90010	Description: Commercial Property Insurance Policy Number MAC 0664751 Nature of Debtor's Interest: Insured
QBE Specialty Insurance Co. Shomer Insurance Agency, Inc. 4221 Wilshire Blvd. #222 Los Angeles, CA 90010 Zurich	Description: Commercial General Liability Insurance Policy Number USP2503055-00 Nature of Debtor's Interest: Insured
California Choice 721 South Parker Suite 200 Orange, CA 92868	Description: Health Insurance Policy Nature of Debtor's Interest: Insured
Zurich 1400 American Ln Schaumburg, IL 60196 Shomer Insurance Agency, Inc. 4221 Wilshire Blvd. #222 Los Angeles, CA 90010	Description: Workers Compensation and Employers' Liability Insurance Policy Number WC 6560130-01 Nature of Debtor's Interest: Insured
Mediwaste Disposal P.O. Box 18059 Anaheim, CA 92817	Description: Service agreement for medical waste management Nature of Debtor's Interest: Purchaser

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

2007 USBC, Central District of California

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

SCHEDULE G - EXECUTORY CONTRACTS AND 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.
Wescom Solutions, Inc. 6975 Creditview Road Mississauga, Ontario, Canada Unit 4 L5N 8E9	Description: PointClickCare product subscription and service agreement Nature of Debtor's Interest: Purchaser
TelePacific Communications 515 S. Flower St. 47th Floor Los Angeles, CA 90071	Description: Telephone service agreement Nature of Debtor's Interest: Purchaser
AAA P.O. Box 25448 Santa Ana, CA 92799-5448	Description: Automobile Insurance Policy Number CAA 069424784 Nature of Debtor's Interest: Insured

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

2007 USBC, Central District of California

In re D&C Care Center, Inc.,
Debtor

Case No. _____
(if known)

SCHEDULE H - CODEBTORS

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR

B 6 Summary (Official Form 6 - Summary) (12/13)

UNITED STATES BANKRUPTCY COURT
Central District of California

In re D&C Care Center, Inc.,
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 also must 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	\$ 1,475,436.99		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	35		\$ 101,634.32	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	7		\$ 1,204,799.83	
G - Executory Contracts and Unexpired Leases	Yes	2			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	No				\$
J - Current Expenditures of Individual Debtors(s)	No				\$
TOTAL		52	\$ 1,475,436.99	\$ 1,306,434.15	

UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA

In re
D&C Care Center, Inc.
Debtor

Case No. _____
Chapter **11**

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

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

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

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

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

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$
Student Loan Obligations (from Schedule F)	\$
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$
TOTAL	\$

State the following:

Average Income (from Schedule I, Line 12)	\$
Average Expenses (from Schedule J, Line 22)	\$
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$
4. Total from Schedule F		\$
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$

B6 Declaration (Official Form 6 - Declaration) (12/07)

2007 USBC, Central District of California

In re D&C Care Center, Inc.
Debtor

Case No. _____
(if known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of _____ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date _____

Signature: _____
Debtor

Date _____

Signature: _____
(Joint Debtor, if any)

(If joint case, both spouses must sign.)

DECLARATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)

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 by that section.

Printed or Typed Name and Title, if any,
of Bankruptcy Petition Preparer

Social Security No.
(Required by 11 U.S.C. § 110.)

If the bankruptcy petition preparer is not an individual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner who signs this document.

Address _____

X _____
Signature of Bankruptcy Petition Preparer

Date

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 signed 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.

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

I, the Felipe T. Chu (the president or other officer or an authorized agent of the corporation or a member or an authorized agent of the partnership) of the D&C Care Center, Inc. (corporation or partnership) named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 84 sheets (Total shown on summary page plus I), and that they are true and correct to the best of my knowledge, information, and belief.

Date 9/21/14

Signature: Felipe Chu

Felipe T. Chu
[Print or type name of individual signing on behalf of debtor.]

President

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

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.

B 4 (Official Form 4) (12/07)

UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA

In re D&C Care Center, Inc. ,
Debtor

Case No. _____

Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(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>
California Department of Health Care Services P.O. Box 997415 Sacramento, CA 95899		Quality Assurance		\$1,000,000.00
Felipe L. Chu and Erlinda Chu 1640 North Fair Oaks Ave. Pasadena, CA 91103		Personal Loan		\$93,674.59
F & W Foodservices P.O. Box 3140 7005 Tujunga Avenue North Hollywood, CA 92609-0140		Trade Debt		\$48,846.69
California Department of Health Care Services P.O. Box 997434 MS 3202 Sacramento, CA 95899		State Licensing		\$30,888.00

B 4 (Official Form 4) (12/07)

Zurich American Insurance c/o Patriot Underwriters 1400 American Lane Schaumburg, IL 60196	Workers Comp Insurance		\$10,000.00
SML Corporation 5909 Little Oak Ct. Rancho Cucamonga, CA 91739			\$5,668.55
Richard T. Chu 1640 N. Fair Oaks Ave. Pasadena, CA 91103	wages, salaries, and commissions		\$3,925.76
Fei Kong 5949 N. Walnut Grove San Gabriel, CA 91775	wages, salaries, and commissions		\$3,637.12
Erlinda Hall 2010 W. Ash Ave. Fullerton, CA 92833	wages, salaries, and commissions		\$3,580.48
Tara Hupp 4469 Ventura Canyon Ave. E212 Sherman Oaks, CA 91423	wages, salaries, and commissions		\$3,222.76
Jamie D. Chu 1640 N. Fair Oaks Ave Pasadena, CA 91103	wages, salaries, and commissions		\$2,979.21
Hienhoa (Helen) Nguyen 1640 N. Fair Oaks Ave Pasadena, CA 91103	wages, salaries, and commissions		\$2,933.20
Telepacific Communication 515 S. Flower Street 47th Floor Los Angeles, CA 90071	Phone	This claim is disputed.	\$2,908.62

B 4 (Official Form 4) (12/07)


Nelson Palabrica 10023 Lower Azusa Road Temple City, CA 91780	wages, salaries, and commissions	\$2,653.52
Sameena Israr 5118 Harland Ct. Dublin, CA 94568	Billing Services	\$2,500.00
Helen J. Jackson 2463 Canyonada Ave. Altadena, CA 91001	wages, salaries, and commissions	\$2,100.88
Cleofer Tan 13929 S. Jersey Ave. Norwalk, CA 90650	wages, salaries, and commissions	\$1,956.78
Elissa Olson 20655 Walnut Valley Drive Walnut, CA 91789	Constulting Services	\$1,950.00
Gloria Peralta 10210 Mountain Ave. #103 Tujunga , CA 91042	wages, salaries, and commissions	\$1,923.49
Chem Mark P.O. Box 721 Garden Grove, CA 92842	Chemical Supplies	\$1,882.84

Date: _____

Debtor

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

I, Felipe T. Chu, the president of D&C Care Center, Inc. named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Creditors Holding 20 Largest Unsecured Claims and that it is true and correct to the best of my information and belief.

Date: 9/21/14 _____

 Felipe T. Chu, President

UNITED STATES BANKRUPTCY COURT
Central District of California

In re:

D&C Care Center, Inc. ,

Debtor(s)

Case No. BKY

Chapter 11 Case

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

I, Felipe T. Chu, declare under penalty of perjury that I am the President of D&C Care Center, Inc. , a California corporation and that on August 26, 2014 the following resolution was duly adopted by the Equity Holders of this corporation:

"Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that Felipe T. Chu, President of this corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that Felipe T. Chu, President of this corporation, is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case; and

Be It Further Resolved, that Felipe T. Chu, President of this corporation, is authorized and directed to employ J. Bennett Friedman, attorney and the law firm of Friedman Law Group, P.C. to represent the corporation in such bankruptcy case."

Executed on:	Signed: <i>Felipe Chu</i>
9/21/14	Felipe T. Chu (Name and Address of Subscriber)

<p><small>Attorney or Party Name, Address, Telephone & FAX Numbers, and California State Bar Number</small></p> <p>J. Bennett Friedman Friedman Law Group, P.C. 1900 Avenue of the Stars, 11th Floor Los Angeles, California 90067 Phone: (310) 552-8210 Fax: (310) 733-5442 Bar No.: 147056</p> <p><input checked="" type="checkbox"/> <small>Attorney for:</small> D&C Care Center, Inc.</p>	<p>FOR COURT USE ONLY</p>
<p align="center">UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA</p>	
<p>In re: D&C Care Center, Inc.</p> <p align="right"><small>Debtor.</small></p>	<p>CASE NO.: CHAPTER: 11 ADV. NO.:</p>

**ELECTRONIC FILING DECLARATION
(CORPORATION/PARTNERSHIP)**

- | | |
|---|-------------------|
| <input checked="" type="checkbox"/> Petition, statement of affairs, schedules or lists | Date Filed: _____ |
| <input type="checkbox"/> Amendments to petition, statement of affairs, schedules or lists | Date Filed: _____ |
| <input type="checkbox"/> Other: _____ | Date Filed: _____ |

PART I - DECLARATION OF AUTHORIZED SIGNATORY OF DEBTOR OR OTHER PARTY

I, the undersigned, hereby declare under penalty of perjury that: (1) I have been authorized by the Debtor or other party on whose behalf the above-referenced document is being filed (Filing Party) to sign and to file, on behalf of the Filing Party, the above-referenced document being filed electronically (Filed Document); (2) I have read and understand the Filed Document; (3) the information provided in the Filed Document is true, correct and complete; (4) the "/s/," followed by my name, on the signature lines for the Filing Party in the Filed Document serves as my signature on behalf of the Filing Party and denotes the making of such declarations, requests, statements, verifications and certifications by me and by the Filing Party to the same extent and effect as my actual signature on such signature lines; (5) I have actually signed a true and correct hard copy of the Filed Document in such places on behalf of the Filing Party and provided the executed hard copy of the Filed Document to the Filing Party's attorney; and (6) I, on behalf of the Filing Party, have authorized the Filing Party's attorney to file the electronic version of the Filed Document and this Declaration with the United States Bankruptcy Court for the Central District of California.

Felipe Chu
 Signature of Authorized Signatory of Filing Party

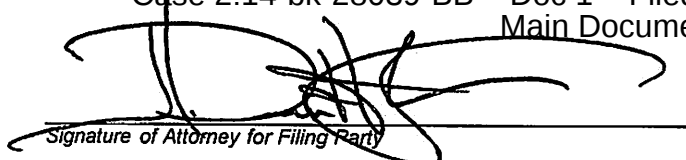
9/21/14
 Date

Felipe T. Chu
 Printed Name of Authorized Signatory of Filing Party

President
 Title of Authorized Signatory of Filing Party

PART II - DECLARATION OF ATTORNEY FOR FILING PARTY

I, the undersigned Attorney for the Filing Party, hereby declare under penalty of perjury that: (1) the "/s/," followed by my name, on the signature lines for the Attorney for the Filing Party in the Filed Document serves as my signature and denotes the making of such declarations, requests, statements, verifications and certifications to the same extent and effect as my actual signature on such signature lines; (2) an authorized signatory of the Filing Party signed the Declaration of Authorized Signatory of Debtor or Other Party before I electronically submitted the Filed Document for filing with the United States Bankruptcy Court for the Central District of California; (3) I have actually signed a true and correct hard copy of the Filed Document in the locations that are indicated by "/s/," followed by my name, and have obtained the signature of the authorized signatory of the Filing Party in the locations that are indicated by "/s/," followed by the name of the Filing Party's authorized signatory, on the true and correct hard copy of the Filed Document; (4) I shall maintain the executed originals of this Declaration, the Declaration of Authorized Signatory of Debtor or Other Party, and the Filed Document for a period of five years after the closing of the case in which they are filed; and (5) I shall make the executed originals of this Declaration, the Declaration of Authorized Signatory of Debtor or Other Party, and the Filed Document available for review upon request of the Court or other parties.



Signature of Attorney for Filing Party

9/22/14

Date

J. Bennett Friedman

Printed Name of Attorney for Filing Party

**UNITED STATES BANKRUPTCY COURT
CENTRAL DISTRICT OF CALIFORNIA**

In Re: **D&C Care Center, Inc. ,**
Debtor

Case No.

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with Rule 1007, Fed. R. Bank. P. for filing in this Chapter 11 case.

Security Holder's Registered Name and Last Known Address or Place of Business	Class of Security	Number of Securities or Percentage	Kind of Interest
Felipe T. Chu 1640 N. Fair Oaks Ave. Pasadena, CA 91103	Common	33.33%	Common
Alvin T. Chu 1640 N. Fair Oaks Ave. Pasadena, CA 91103	Common	33.33%	Common
Richard T. Chu 1640 N. Fair Oaks Ave. Pasadena, CA 91103	Common	33.33%	Common

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

I, Felipe T. Chu, President 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: 9/21/14

Signature: *Felipe Chu*
Printed Name: Felipe T. Chu
Title: President

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

United States Bankruptcy Court
Central District of California

In re **D&C Care Center, Inc.**

Case No.

Debtor.

Chapter **11**

STATEMENT OF CORPORATE OWNERSHIP

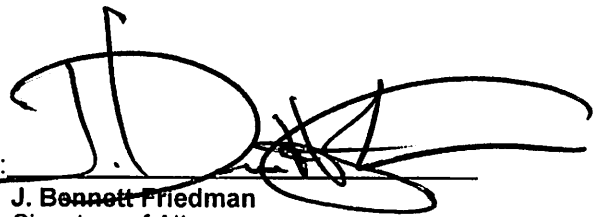
Comes now **D&C Care Center, Inc.** (the "Debtor") and pursuant to Fed. R. Bankr. P. 1007(a) and 7007.1 state as follows:

 All corporations that directly or indirectly own 10% or more of any class of the corporation's equity interests are listed below:

OR,

 X There are no entities to report.

By:



J. Bennett Friedman
Signature of Attorney

Counsel for **D&C Care Center, Inc.**
Bar no.: **147056**
Address.: **1900 Avenue of the Stars, 11th Floor**
Los Angeles, California 90067

Telephone No.: **(310) 552-8210**
Fax No.: **(310) 733-5442**
E-mail address: **jfriedman@flg-law.com**

B 203
(12/94)

United States Bankruptcy Court

CENTRAL DISTRICT OF CALIFORNIA

In re

D&C Care Center, Inc.

Case No. _____

Debtor

Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 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>75,000.00</u>
Prior to the filing of this statement I have received	\$ <u>75,000.00</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 other 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.

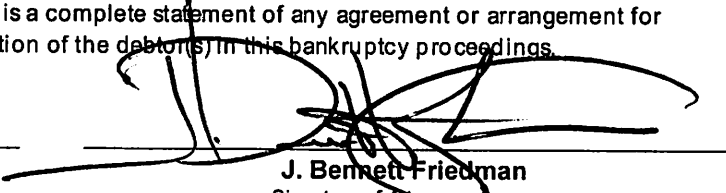
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- 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, statements 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;

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR (Continued)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [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 proceedings.	
<u>9/22/14</u> <i>Date</i>	 _____ J. Bennett Friedman <i>Signature of Attorney</i>
_____ Friedman Law Group, P.C. <i>Name of law firm</i>	

**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 Pasadena, California

Julius Chen
Signature of Debtor

Date: 9/21/14

Signature of Joint Debtor

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

Verification of Creditor Mailing List - (Rev. 10/05)

2003 USBC, Central District of California

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

Name J. Bennett Friedman; Bar Number: 147056

Address 1900 Avenue of the Stars, 11th Floor, Los Angeles, California 90067

Telephone (310) 552-8210

- 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: D&C Care Center, Inc.	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 16 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: 9/21/14

Felipe Chow
Debtor

Attorney (if applicable)

Joint Debtor

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