

UNITED STATES BANKRUPTCY COURT  
 EASTERN DISTRICT OF NEW YORK


In re Caritas Health Care, Inc. Case No. 09-40901  
 Debtor Reporting Period: 1/01-1/31/2012  
 Federal Tax I.D. # 84-1710364

**CORPORATE MONTHLY OPERATING REPORT**

File with the Court and submit a copy to the United States Trustee within 20 days after the end of the month and submit a copy of the report to any official committee appointed in the case.  
 (Reports for Rochester and Buffalo Divisions of Western District of New York are due 15 days after the end of the month, as are the reports for Southern District of New York.)

REQUIRED DOCUMENTS	Form No.	Document Attached	Explanation Attached
Schedule of Cash Receipts and Disbursements	MOR-1	YES	
Bank Reconciliation (or copies of debtor's bank reconciliations)	MOR-1 (CON'T)	YES	
Copies of bank statements		YES	
Cash disbursements journals			
Statement of Operations	MOR-2	YES	
Balance Sheet	MOR-3	YES	
Status of Post-petition Taxes	MOR-4	YES	
Copies of IRS Form 6123 or payment receipt			
Copies of tax returns filed during reporting period			
Summary of Unpaid Post-petition Debts	MOR-4	YES	
Listing of Aged Accounts Payable		YES	
Accounts Receivable Reconciliation and Aging	MOR-5	YES	
Taxes Reconciliation and Aging	MOR-5	YES	
Payments to Insiders and Professional	MOR-6	YES	
Post Petition Status of Secured Notes, Leases Payable	MOR-6	YES	
Debtor Questionnaire	MOR-7	YES	

I declare under penalty of perjury (28 U.S.C. Section 1746) that this report and the attached documents are true and correct to the best of my knowledge and belief.

Signature of Debtor \_\_\_\_\_  
 Signature of Authorized Individual\*  \_\_\_\_\_  
 Printed Name of Authorized Individual \_\_\_\_\_

Date \_\_\_\_\_  
 Date 2/13/12  
 Date \_\_\_\_\_

\*Authorized individual must be an officer, director or shareholder if debtor is a corporation; a partner if debtor is a partnership; a manager or member if debtor is a limited liability company.

In re Caritas Health Care, Inc.  
Debtor

Case No. 09-40901  
Reporting Period: 1/01-1/31/2012

**SCHEDULE OF CASH RECEIPTS AND DISBURSEMENTS**

Amounts reported should be from the debtor's books and not the bank statement. The beginning cash should be the ending cash from the prior month or, if this is the first report, the amount should be the balance on the date the petition was filed. The amounts reported in the "CURRENT MONTH - ACTUAL" column must equal the sum of the four bank account columns. Attach copies of the bank statements and the cash disbursements journal. The total disbursements listed in the disbursements journal must equal the total disbursements reported on this page. A bank reconciliation must be attached for each account. [See MOR-1 (CON'T)]

		BANK ACCOUNTS				
ACCOUNT NUMBER (LAST 4)	OPER	PAYROLL	TAX	OTHER	CURRENT MONTH ACTUAL (TOTAL OF ALL ACCOUNTS)	
<b>CASH BEGINNING OF MONTH</b>	18,842,024					
<b>RECEIPTS</b>						
CASH SALES	50,558					
ACCOUNTS RECEIVABLE - PREPETITION						
ACCOUNTS RECEIVABLE - POSTPETITION						
LOANS AND ADVANCES						
SALE OF ASSETS						
OTHER (ATTACH LIST)						
TRANSFERS (FROM DIP ACCTS)						
<b>TOTAL RECEIPTS</b>	50,558					
<b>DISBURSEMENTS</b>						
PAYROLL & TAXES						
BENEFITS						
INVENTORY PURCHASES						
SECURED/ RENTAL/ LEASES						
INSURANCE						
ADMINISTRATIVE SERVICES						
OTHER - INTEREST & PENALTIES	0					
CONTRACT LABOR	11,166					
UTILITIES	0					
MISCELLANEOUS	20,384					
DASNY DIP REPAYMENT						
DASNY LOAN REPAYMENT						
PROFESSIONAL FEES	0					
U.S. TRUSTEE QUARTERLY FEES						
COURT COSTS						
<b>TOTAL DISBURSEMENTS</b>	31,550					
<b>NET CASH FLOW (RECEIPTS LESS DISBURSEMENTS)</b>	19,008					
<b>CASH - END OF MONTH</b>	18,861,032					

\* COMPENSATION TO SOLE PROPRIETORS FOR SERVICES RENDERED TO BANKRUPTCY ESTATE

**THE FOLLOWING SECTION MUST BE COMPLETED**

DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES: (FROM CURRENT MONTH ACTUAL COLUMN)

<b>TOTAL DISBURSEMENTS</b>	
LESS: TRANSFERS TO OTHER DEBTOR IN POSSESSION ACCOUNTS	
PLUS: ESTATE DISBURSEMENTS MADE BY OUTSIDE SOURCES (i.e. from escrow accounts)	
<b>TOTAL DISBURSEMENTS FOR CALCULATING U.S. TRUSTEE QUARTERLY FEES</b>	

In re Caritas Health Care, Inc.  
Debtor

Case No. 09-40901  
Reporting Period: 1/01-1/31/2012

**BANK RECONCILIATIONS (Attached)**

**Continuation Sheet for MOR-1**

A bank reconciliation must be included for each bank account. The debtor's bank reconciliation may be substituted for this page.  
(Bank account numbers may be redacted to last four numbers.)

	Operating	Payroll	Tax	Other
	#	#	#	#
<b>BALANCE PER BOOKS</b>				
<b>BANK BALANCE</b>				
(+) DEPOSITS IN TRANSIT (ATTACH LIST)				
(-) OUTSTANDING CHECKS (ATTACH LIST):				
OTHER (ATTACH EXPLANATION)				
<b>ADJUSTED BANK BALANCE *</b>				
*"Adjusted Bank Balance" must equal "Balance per Books"				
<b>DEPOSITS IN TRANSIT</b>	Date	Amount	Date	Amount
<b>CHECKS OUTSTANDING</b>	Ck. #	Amount	Ck. #	Amount
<b>OTHER</b>				

**CARITAS HEALTHCARE, INC.**  
**CASH BALANCES - January 31, 2011**

A/C	DESCRIPTION	TOTAL			
		January 31, 2011	SJH	MIH	MSF
1000.0001	OPERATING	21,523.60	66,877,525.36	(63,977,123.05)	(2,878,878.71)
1000.0003	GOLF	15,402,359.92	22,199,066.81	(6,726,281.62)	(70,425.27)
1000.0004	ACCOUNTS PAYABLE	167,174.87	77,019,154.41	(76,851,979.54)	0.00
1000.0005	PAYROLL	733,025.11	113,154,661.80	(104,713,268.49)	(7,708,368.20)
1000.0015	COMMERCIAL LOCKBOX	2,358,270.64	148,994.80	2,209,275.84	0.00
1000.0016	GOVERNMENT LOCKBOX	35,598.72	(65,037,280.24)	55,140,179.22	9,932,699.74
1000.0017	UTILITY	138,331.24	138,331.24	0.00	0.00
1005-0060	PETTY CASH GENERAL	3,504.59	3,504.59	0.00	0.00
1005.0063	PETTY CASH MISC.	1,243.37	1,243.37	0.00	0.00
		<b>\$18,861,032.06</b>	<b>\$214,505,202.14</b>	<b>(\$194,919,197.64)</b>	<b>(\$724,972.44)</b>

**CARITAS HEALTHCARE, INC.**  
**Cash and Cash Equivalents**  
**January 31, 2011**

	Chase Bank Adjusted Total	o/s checks	Chase Bank Total	CARITAS G/L Balance	SJH	MIH	MSF
Operating account	21,523.60		21,523.60	21,523.60	66,877,525.36	(63,977,123.05)	(2,878,878.71)
Golf account	15,402,359.92		15,402,359.92	15,402,359.92	22,199,066.81	(6,726,281.62)	(70,425.27)
Accounts Payable account	167,174.87	(7,488.63)	174,663.50	167,174.87	77,019,154.41	(76,851,979.54)	0.00
Payroll account	733,025.11	(1,758.26)	734,783.37	733,025.11	113,154,661.80	(104,713,268.49)	(7,708,368.20)
Commercial Lockbox account	2,358,270.64		2,358,270.64	2,358,270.64	148,994.80	2,209,275.84	0.00
Government Lockbox account	35,598.72		35,598.72	35,598.72	(65,037,280.24)	55,140,179.22	9,932,699.74
Utility account	138,331.24		138,331.24	138,331.24		0.00	0.00
<b>Cash - Bank Deposits</b>	<b>18,856,284.10</b>	<b>(9,246.89)</b>	<b>18,865,530.99</b>	<b>18,856,284.10</b>	<b>214,500,454.18</b>	<b>(194,919,197.64)</b>	<b>(724,972.44)</b>
Petty Cash General				3,504.59		0.00	0.00
Petty Cash Miscellaneous				1,243.37	1,243.37	0.00	0.00
<b>Cash and Cash Equivalents</b>		<b>0.00</b>		<b>18,861,032.06</b>	<b>214,505,202.14</b>	<b>(194,919,197.64)</b>	<b>(724,972.44)</b>

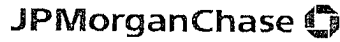
Caritas Health Care Inc.  
JPMorganChase  
Operating Account  
Acct # 8426  
JANUARY 2012

Balance Per General Ledger at 1/31/12

21,523.60

Bank Balance at 1/31/12

21,523.60



JPMORGAN CHASE BANK, N.A.  
NORTHEAST MARKET  
P O BOX 659754  
SAN ANTONIO TX 78265-9754

December 31, 2011 -  
January 31, 2012

**Account Number**  
3426

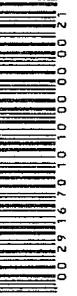
**Customer Service**

If you have any questions  
about your statement, please  
contact your Customer Service  
Professional.



00029167 CEN 802 X 03212 - NNN 1 000000000 C2 0000

CARITAS HEALTH CARE INC  
OPERATING ACCT DIP  
374 STOCKHOLM ST  
BROOKLYN NY 11237-4006



**Commercial Checking**

**Summary**

	<i>Number</i>	<i>Amount</i>
Opening Ledger Balance		\$21,523.60
Deposits and Credits	0	\$.00
Withdrawals and Debits	0	\$.00
Checks Paid	0	\$.00
<b>Ending Ledger Balance</b>		<b>\$21,523.60</b>

Your service charges, fees and earnings credit have been calculated through account analysis.

Please examine this statement of account at once. By continuing to use the account, you agree that: (1) the account is subject to the Bank's deposit account agreement, and (2) the Bank has no responsibility for any error in or improper charge to the account (including any unauthorized or altered check) unless you notify us in writing of this error or charge within sixty days of the mailing or availability of the first statement on which the error or charge appears.

**CARITAS HEALTH CARE INC.  
Golf Account  
A/C #6636  
JANUARY 2012**

**Balance Per General Ledger at 1-31-2012** **15,402,359.92**

**Outstanding Deposits**

Outstanding Disbursements

**Bank Balance at 1-31-2012** **15,402,359.92**





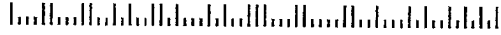
JPMORGAN CHASE BANK, N.A.  
 NORTHEAST MARKET  
 P O BOX 659754  
 SAN ANTONIO TX 78265-9754

December 31, 2011 -  
 January 31, 2012

**Account Number**  
 .....,6636

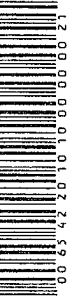
**Customer Service**

If you have any questions about your statement, please contact your Customer Service Professional.



00065422 CEN 802 X 03212 - NNN 1 000000000 £2 0000

CARITAS HEALTH CARE INC  
 GOLF ACCT DIP  
 374 STOCKHOLM ST  
 BROOKLYN NY 11237-4006



**Liquid MMDA**

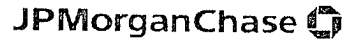
**Summary**

	<i>Number</i>	<i>Amount</i>
Opening Ledger Balance		\$12,553,967.67
Deposits and Credits	4	\$2,849,038.66
Withdrawals and Debits	1	\$646.41
Checks Paid	0	\$.00
<b>Ending Ledger Balance</b>		<b>\$15,402,359.92</b>
<hr/>		
Average Ledger Balance	\$15,128,171.00	
Interest Credited this period	\$401.69	Interest Credited Year to Date
		\$401.69
Interest Rate(s):	12/31 to 01/31 at 0.03%	

**Deposits and Credits**

<i>Ledger Date</i>	<i>Description</i>	<i>Amount</i>
01/03	BOOK TRANSFER CREDIT B/O: CARITAS HEALTH CARE INC BROOKLYN NY 11237-4006 TRN: 3062600003JO YOUR REF: CAP OF 12/01/03	\$2,800,000.00
01/06	DEPOSIT 319943335	\$43,886.97
01/23	DEPOSIT 319943344	\$4,750.00
01/31	INTEREST PAYMENT	\$401.69
<b>Total</b>		<b>\$2,849,038.66</b>

Please examine this statement of account at once. By continuing to use the account, you agree that: (1) the account is subject to the Bank's deposit account agreement, and (2) the Bank has no responsibility for any error in or improper charge to the account (including any unauthorized or altered check) unless you notify us in writing of this error or charge within sixty days of the mailing or availability of the first statement on which the error or charge appears.



December 31, 2011 -  
January 31, 2012

Account Number  
3636

CARITAS HEALTH CARE INC  
GOLF ACCT DIP

**Liquid MMDA**  
(continued)

**Withdrawals and Debits**

<i>Ledger Date</i>	<i>Description</i>	<i>Amount</i>
01/17	ACCOUNT ANALYSIS SETTLEMENT CHARGE	\$646.41
<b>Total</b>		<b>\$646.41</b>

**Daily Balance**

<i>Date</i>	<i>Ledger Balance</i>	<i>Date</i>	<i>Ledger Balance</i>
01/03	\$15,353,967.67	01/23	\$15,401,958.23
01/06	\$15,397,854.64	01/31	\$15,402,359.92
01/17	\$15,397,208.23		

**CARITAS HEALTH CARE INC.**  
**Accounts Payable Account**  
**Acct # 3993**  
**JANUARY 2012**

**Balance Per General Ledger at 1-31-2012** **167,174.87**

**Balance Per Bank Stmt @ 1-31-2012** **174,663.50**

**Outstanding Checks Per Bank** **7,488.63**

**Bank Balance at 1-31-2012** **167,174.87**

DUPLICATE



JPMORGAN CHASE BANK, N.A.  
 NORTHEAST MARKET  
 P O BOX 659754  
 SAN ANTONIO TX 78265-9754

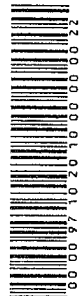
641  
 December 31, 2011 -  
 January 31, 2012

00000971 CEN 802 R 03212 - NNN 1 000000000 R0  
 CARITAS HEALTH CARE INC  
 DIP  
 WYCKOFF HEIGHTS MEDICAL CENTER  
 374 STOCKHOLM ST  
 BROOKLYN NY 11237

**Account Number**  
 2022 3993

**Customer Service**

If you have any questions about your statement, please contact your Customer Service Professional.



**Commercial Checking**

**Summary**

	<i>Number</i>	<i>Amount</i>
Opening Ledger Balance		\$206,400.83
Deposits and Credits	0	\$.00
Withdrawals and Debits	0	\$.00
List Posted Items	3	\$8,652.27
Checks Paid	2	\$23,085.06
<b>Ending Ledger Balance</b>		<b>\$174,663.50</b>

**Withdrawals and Debits**

<i>Ledger Date</i>	<i>Description</i>		<i>Amount</i>
01/05	LIST POSTED ITEMS QUANTITY	3	\$8,652.27
<b>Total*</b>			<b>\$.00</b>

\*This total excludes the List Posted Items amount set forth in the summary above.

**Checks Paid**

<i>Check</i>	<i>Date Paid</i>	<i>Amount</i>	<i>Check</i>	<i>Date Paid</i>	<i>Amount</i>	<i>Check</i>	<i>Date Paid</i>	<i>Amount</i>
20424	01/31	\$19,379.00	20425	01/23	\$3,706.06			
<b>Total</b>						<b>2 check(s)</b>		<b>\$23,085.06</b>

Please examine this statement of account at once. By continuing to use the account, you agree that: (1) the account is subject to the Bank's deposit account agreement, and (2) the Bank has no responsibility for any error in or improper charge to the account (including any unauthorized or altered check) unless you notify us in writing of this error or charge within sixty days of the mailing or availability of the first statement on which the error or charge appears.



641  
December 31, 2011 -  
January 31, 2012

Account Number  
123456789012345678993

CARITAS HEALTH CARE INC  
DIP

**Commercial Checking**  
(continued)

**Daily Balance**

<i>Date</i>	<i>Ledger Balance</i>	<i>Date</i>	<i>Ledger Balance</i>
01/05	\$197,748.56	01/31	\$174,663.50
01/23	\$194,042.50		

Your service charges, fees and earnings credit have been calculated through account analysis.



JPMORGAN CHASE  
 ACCOUNT RECONCILEMENT  
 BALANCE SHEET  
 AS OF 01/31/12

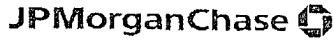
TEAM.....	641	
ACCOUNT.....	3993	
ACCOUNT NAME...	CARITAS HEALTH CARE INC	
BALANCE FORWARD FROM PREVIOUS STATEMENT DATED 12/31/11		206,400.83
ADD TOTAL OF:		
DEPOSITS ON RECONCILIATION... +	.00	
MISCELLANEOUS CREDITS POSTED. +	.00	
ADD TOTAL CREDITS DURING THIS PERIOD..... +		.00
DEDUCT THE TOTAL OF:		
CHECKS PAID ON RECONCILEMENT. +	31,737.33	
MISCELLANEOUS DEBITS POSTED.. +	.00	
TOTAL DEBITS THIS STATEMENT PERIOD..... -		31,737.33
DEBIT ADJUSTMENTS TO RECONCILE..... -		.00
CREDIT ADJUSTMENT TO RECONCILE..... +		.00
MISCELLANEOUS ADJUSTMENTS TO RECONCILE..... +		.00
ENDING BALANCE..... =		174,663.50
BANK STATEMENT ENDING BALANCE.....		174,663.50
*****		
OUTSTANDING BALANCE		
PREVIOUS OUTSTANDING BALANCE.....		8,681.27
ADJUSTMENT TO PRIOR OUTSTANDING..... +		.00
NEW ISSUES (NET ADDED)..... +	30,544.69	
CANCELED ISSUES..... -	.00	
STOPPED ISSUES..... -	.00	
PAID CHECKS MATCHED TO ISSUES..... -	31,737.33	
CURRENT OUTSTANDING BALANCE..... =		7,488.63
TOTAL OUTSTANDING FROM RECON REPORTS..... =		7,488.63

IF YOU HAVE ANY QUESTIONS REGARDING THIS RECONCILEMENT, PLEASE CONTACT  
 YOUR CUSTOMER SERVICE REPRESENTATIVE.

**CARITAS HEALTH CARE INC.**  
**Chase Payroll Account**  
**Acct # 4009**  
**JANUARY 2012**

<b>Balance per GL @ 1-31-2012</b>	<u>733,025.11</u>
<b>Balance Per Bank Stmt @ 1-31-2012</b>	734,783.37
Outstanding Checks Per Bank	1,758.26
<b>Adjusted Bank Balance @ 1-31-2012</b>	<u><u>733,025.11</u></u>

DUPLICATE



JPMORGAN CHASE BANK, N.A.  
 NORTHEAST MARKET  
 P O BOX 659754  
 SAN ANTONIO TX 78265-9754

641  
 December 31, 2011 -  
 January 31, 2012

**Account Number**  
 4009

00000972 CEN 802 R 03212 - NNN 1 000000000 R0  
 CARITAS HEALTH CARE INC  
 DIP  
 WYCKOFF HEIGHTS MEDICAL CENTER  
 374 STOCKHOLM ST  
 BROOKLYN NY 11237

**Customer Service**

If you have any questions about your statement, please contact your Customer Service Professional.



**Commercial Checking**

**Summary**

	<i>Number</i>	<i>Amount</i>
Opening Ledger Balance		\$734,783.37
Deposits and Credits	0	\$ .00
Withdrawals and Debits	0	\$ .00
Checks Paid	0	\$ .00
<b>Ending Ledger Balance</b>		<b>\$734,783.37</b>

Your service charges, fees and earnings credit have been calculated through account analysis.

Please examine this statement of account at once. By continuing to use the account, you agree that: (1) the account is subject to the Bank's deposit account agreement, and (2) the Bank has no responsibility for any error in or improper charge to the account (including any unauthorized or altered check) unless you notify us in writing of this error or charge within sixty days of the mailing or availability of the first statement on which the error or charge appears.





JPMORGAN CHASE  
 ACCOUNT RECONCILEMENT  
 BALANCE SHEET  
 AS OF 01/31/12

TEAM.....	641	
ACCOUNT.....	1009	
ACCOUNT NAME...	CARITAS HEALTH CARE INC	
BALANCE FORWARD FROM PREVIOUS STATEMENT DATED 12/31/11		734,783.37
ADD TOTAL OF:		
DEPOSITS ON RECONCILIATION... +	.00	
MISCELLANEOUS CREDITS POSTED. +	.00	
ADD TOTAL CREDITS DURING THIS PERIOD..... +		.00
DEDUCT THE TOTAL OF:		
CHECKS PAID ON RECONCILEMENT. +	.00	
MISCELLANEOUS DEBITS POSTED.. +	.00	
TOTAL DEBITS THIS STATEMENT PERIOD..... -		.00
DEBIT ADJUSTMENTS TO RECONCILE..... -		.00
CREDIT ADJUSTMENT TO RECONCILE..... +		.00
MISCELLANEOUS ADJUSTMENTS TO RECONCILE..... +		.00
ENDING BALANCE..... =		734,783.37
BANK STATEMENT ENDING BALANCE.....		734,783.37
*****		
OUTSTANDING BALANCE		
PREVIOUS OUTSTANDING BALANCE.....		1,758.26
ADJUSTMENT TO PRIOR OUTSTANDING..... +	.00	
NEW ISSUES (NET ADDED)..... +	.00	
CANCELED ISSUES..... -	.00	
STOPPED ISSUES..... -	.00	
PAID CHECKS MATCHED TO ISSUES..... -	.00	
CURRENT OUTSTANDING BALANCE..... =		1,758.26
TOTAL OUTSTANDING FROM RECON REPORTS..... =		1,758.26

IF YOU HAVE ANY QUESTIONS REGARDING THIS RECONCILEMENT, PLEASE CONTACT YOUR CUSTOMER SERVICE REPRESENTATIVE.

**CARITAS HEALTH CARE INC.**  
**Commercial Lockbox Account**  
**A/C #9473**  
**JANUARY 2012**

**Balance Per General Ledger at 1-31-2012** **2,358,270.64**

**Bank Balance at 1-31-2012** **2,358,270.64**



JPMORGAN CHASE BANK, N.A.  
 NORTHEAST MARKET  
 P O BOX 659754  
 SAN ANTONIO TX 78265-9754

December 31, 2011 -  
 January 31, 2012

**Account Number**  
 9473

**Customer Service**

If you have any questions  
 about your statement, please  
 contact your Customer Service  
 Professional.

00002588 CEN 802 X 03212 - NNN 1 000000000 C1 0000  
 CARITAS HEALTHCARE INC COMMERCIAL  
 DIP  
 374 STOCKHOLM ST  
 BROOKLYN NY 11237-4006



**Commercial Checking**

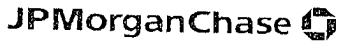
**Summary**

	<i>Number</i>	<i>Amount</i>
Opening Ledger Balance		\$2,357,089.36
Deposits and Credits	5	\$1,519.53
Withdrawals and Debits	4	\$338.25
Checks Paid	0	\$.00
<b>Ending Ledger Balance</b>		<b>\$2,358,270.64</b>

**Deposits and Credits**

<i>Ledger Date</i>	<i>Description</i>	<i>Amount</i>
01/18	DEPOSIT 319943341	\$860.09
01/18	DEPOSIT 319943343	\$309.37
01/18	DEPOSIT 319943340	\$238.20
01/18	DEPOSIT 319943342	\$61.87
01/26	ORIG CO NAME:AMERICAN EXPRESS ORIG ID:1134992250 DESC DATE:120126 CO ENTRY DESCR:SETTLEMENTSEC:CCD TRACE#:021000020966312 EED:120126 IND ID:6317818847 IND NAME:CARITAS HEAL6317818847 PAYMENT DATE 12026 TRN: 0250966312TC	\$50.00
<b>Total</b>		<b>\$1,519.53</b>

Please examine this statement of account at once. By continuing to use the account, you agree that: (1) the account is subject to the Bank's deposit account agreement, and (2) the Bank has no responsibility for any error in or improper charge to the account (including any unauthorized or altered check) unless you notify us in writing of this error or charge within sixty days of the mailing or availability of the first statement on which the error or charge appears.



December 31, 2011 -  
January 31, 2012

Account Number  
.3473

CARITAS HEALTHCARE INC COMMERCIAL  
DIP

**Commercial Checking**  
(continued)

**Withdrawals and Debits**

<i>Ledger Date</i>	<i>Description</i>	<i>Amount</i>
01/03	ORIG CO NAME:BANKCARD ORIG ID:SM077S4866 DESC DATE:111231 CO ENTRY DESCR:MTOT DISC SEC:CCD TRACE#:021000025178523 EED:120103 IND ID:422369650014861 IND NAME:MARY	\$140.40
01/03	IMMACULATE HOSPIT TRN: 0035178523TC ORIG CO NAME:BANKCARD ORIG ID:SM077S4866 DESC DATE:111231 CO ENTRY DESCR:MTOT DISC SEC:CCD TRACE#:021000025178524 EED:120103 IND ID:422369650014862 IND NAME:ST JOHNS	\$139.90
01/03	QUEENS HOSPIT TRN: 0035178524TC ORIG CO NAME:AMERICAN EXPRESS ORIG ID:1134992250 DESC DATE:120103 CO ENTRY DESCR:COLLECTIONSEC:CCD TRACE#:021000025178526 EED:120103 IND ID:6317818847 IND NAME:CARITAS HEAL6317818847 PAYMENT DATE 12003 TRN: 0035178526TC	\$7.95
01/30	ORIG CO NAME:AMERICAN EXPRESS ORIG ID:1134992250 DESC DATE:120128 CO ENTRY DESCR:COLLECTIONSEC:CCD TRACE#:021000021969121 EED:120130 IND ID:6317818847 IND NAME:CARITAS HEAL6317818847 PAYMENT DATE 12028 TRN: 0271969121TC	\$50.00
<b>Total</b>		<b>\$338.25</b>

**Daily Balance**

<i>Date</i>	<i>Ledger Balance</i>	<i>Date</i>	<i>Ledger Balance</i>
01/03	\$2,356,801.11	01/26	\$2,358,320.64
01/18	\$2,358,270.64	01/30	\$2,358,270.64

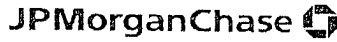
Your service charges, fees and earnings credit have been calculated through account analysis.

CARITAS HEALTH CARE INC.  
Government Lockbox Account  
A/C # 8434  
JANUARY 2012

Balance Per General Ledger at 1-31-2012 35,598.72

Outstanding Deposits

Bank Balance at 1-31-2012 35,598.72



JPMORGAN CHASE BANK, N.A.  
 NORTHEAST MARKET  
 P O BOX 659754  
 SAN ANTONIO TX 78265-9754

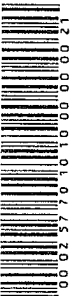
December 31, 2011 -  
 January 31, 2012

**Account Number**  
 3434

**Customer Service**

If you have any questions about your statement, please contact your Customer Service Professional.

00002577 CEN 802 X 03212 - NNN 1 000000000 C1 0000  
 CARITAS HEALTH CARE INC  
 LOCKBOX DEPOSIT ACCT DIP  
 374 STOCKHOLM ST  
 BROOKLYN NY 11237-4006



**Commercial Checking**

**Summary**

	<i>Number</i>	<i>Amount</i>
Opening Ledger Balance		\$2,835,598.72
Deposits and Credits	0	\$.00
Withdrawals and Debits	1	\$2,800,000.00
Checks Paid	0	\$.00
<b>Ending Ledger Balance</b>		<b>\$35,598.72</b>

**Withdrawals and Debits**

<i>Ledger Date</i>	<i>Description</i>	<i>Amount</i>
01/03	BOOK TRANSFER DEBIT A/C: CARITAS HEALTH CARE INC BROOKLYN NY 11237-4006 TRN: 3062600003JO YOUR REF: NONREF	\$2,800,000.00
<b>Total</b>		<b>\$2,800,000.00</b>

**Daily Balance**

<i>Date</i>	<i>Ledger Balance</i>	<i>Date</i>	<i>Ledger Balance</i>
01/03	\$35,598.72		

Your service charges, fees and earnings credit have been calculated through account analysis.

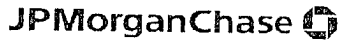
Please examine this statement of account at once. By continuing to use the account, you agree that: (1) the account is subject to the Bank's deposit account agreement, and (2) the Bank has no responsibility for any error in or improper charge to the account (including any unauthorized or altered check) unless you notify us in writing of this error or charge within sixty days of the mailing or availability of the first statement on which the error or charge appears.

CARITAS HEALTH CARE INC.  
Utility Account  
A/C #6689  
JANUARY 2012

Balance Per Bank Statement at 1-31-2012 138,331.24

Outstanding Deposits

Bank Balance at 1-31-2012 138,331.24



JPMORGAN CHASE BANK, N.A.  
 NORTHEAST MARKET  
 P O BOX 659754  
 SAN ANTONIO TX 78265-9754

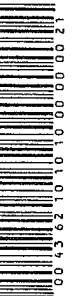
December 31, 2011 -  
 January 31, 2012

**Account Number**  
 3689

**Customer Service**

If you have any questions about your statement, please contact your Customer Service Professional.

00043621 CEN 802 X 03212 - NNN 1 000000000 C2 0000  
 CARITAS HEALTH CARE INC  
 UTILITY ACCOUNT DIP  
 374 STOCKHOLM STREET  
 BROOKLYN NY 11237



**Commercial Checking**

**Summary**

	<i>Number</i>	<i>Amount</i>
Opening Ledger Balance		\$138,351.01
Deposits and Credits	0	\$.00
Withdrawals and Debits	1	\$19.77
Checks Paid	0	\$.00
<b>Ending Ledger Balance</b>		<b>\$138,331.24</b>

**Withdrawals and Debits**

<i>Ledger Date</i>	<i>Description</i>	<i>Amount</i>
01/17	ACCOUNT ANALYSIS SETTLEMENT CHARGE	\$19.77
<b>Total</b>		<b>\$19.77</b>

**Daily Balance**

<i>Date</i>	<i>Ledger Balance</i>	<i>Date</i>	<i>Ledger Balance</i>
01/17	\$138,331.24		

Your service charges, fees and earnings credit have been calculated through account analysis.

Please examine this statement of account at once. By continuing to use the account, you agree that: (1) the account is subject to the Bank's deposit account agreement, and (2) the Bank has no responsibility for any error in or improper charge to the account (including any unauthorized or altered check) unless you notify us in writing of this error or charge within sixty days of the mailing or availability of the first statement on which the error or charge appears.



In re Caritas Health Care, Inc.

Case No. 09-40901

Debtor

Reporting Period: 1/01-1/31/2012

**STATEMENT OF OPERATIONS (Income Statement)**

The Statement of Operations is to be prepared on an accrual basis. The accrual basis of accounting recognizes revenue when it is realized and expenses when they are incurred, regardless of when cash is actually received or paid.

REVENUES	MONTH	CUMULATIVE - FILING TO DATE
Gross Revenues	1,520	29,723,329
Less: Returns and Allowances		
Net Revenue	1,520	29,723,329
<b>COST OF GOODS SOLD</b>		
Beginning Inventory		
Add: Purchases		
Add: Cost of Labor		
Add: Other Costs ( <i>attach schedule</i> )		
Less: Ending Inventory		
Cost of Goods Sold		
Gross Profit	1,520	29,723,329
<b>OPERATING EXPENSES</b>		
Advertising		
Auto and Truck Expense		
Bad Debts		
Contributions		
Employee Benefits Programs	360	8,530,258
Officer/Insider Compensation*	0	574,626
Insurance	17,836	1,978,331
Management Fees/Bonuses		
Office Expense		
Pension & Profit-Sharing Plans		
Repairs and Maintenance		
Rent and Lease Expense		
Salaries/Commissions/Fees/contract labor	12,850	21,145,161
Supplies		2,345,445
Taxes - Payroll		
Taxes - Real Estate		
Taxes - Other		
Travel and Entertainment		
Bankruptcy Preference Recovery	(31,614)	(825,677)
Other	1,004	5,929,722
Total Operating Expenses Before Depreciation	436	39,677,866
Depreciation/Depletion/Amortization		1,837,997
Net Profit (Loss) Before Other Income & Expenses	1,084	(11,792,534)
<b>OTHER INCOME AND EXPENSES</b>		
Other Income	402	3,607,375
Interest Expense		1,644,882
Other Expense ( <i>attach schedule</i> )		
Net Profit (Loss) Before Reorganization Items	1,486	(9,830,041)



In re Caritas Health Care, Inc.  
DebtorCase No. 09-40901  
Reporting Period: 1/01-1/31/2012

## BALANCE SHEET

The Balance Sheet is to be completed on an accrual basis only. Pre-petition liabilities must be classified separately from post-petition obligations.

ASSETS	BOOK VALUE AT END OF CURRENT REPORTING MONTH	BOOK VALUE AT END OF PRIOR REPORTING MONTH	BOOK VALUE ON PETITION DATE OR SCHEDULED
<b>CURRENT ASSETS</b>			
Unrestricted Cash and Equivalents	18,861,032	18,842,024	
Restricted Cash and Cash Equivalents (see continuation sheet)			
Accounts Receivable/due from third parties	13,548,895	13,548,895	
Notes Receivable			
Inventories			
Prepaid Expenses	379,825	397,661	
Professional Retainers			
Other Current Assets (Grants) (Escrow)			
<b>TOTAL CURRENT ASSETS</b>	<b>32,789,752</b>	<b>32,788,580</b>	
<b>PROPERTY &amp; EQUIPMENT</b>			
Real Property and Improvements			
Machinery and Equipment			
Furniture, Fixtures and Office Equipment			
Leasehold Improvements			
Vehicles			
Less: Accumulated Depreciation			
<b>TOTAL PROPERTY &amp; EQUIPMENT</b>	<b>0</b>	<b>0</b>	
<b>OTHER ASSETS</b>			
Amounts due from Insiders*			
Other Assets (attach schedule)			
<b>TOTAL OTHER ASSETS</b>			
<b>TOTAL ASSETS</b>	<b>32,789,752</b>	<b>32,788,580</b>	
<b>LIABILITIES AND OWNER EQUITY</b>			
	BOOK VALUE AT END OF CURRENT REPORTING MONTH	BOOK VALUE AT END OF CURRENT REPORTING MONTH	BOOK VALUE ON PETITION DATE
<b>LIABILITIES NOT SUBJECT TO COMPROMISE (Post-petition)</b>			
Accounts Payable			
Taxes Payable (refer to FORM MOR-4)			
Wages Payable			
Notes Payable			
Rent / Leases - Building/Equipment			
Secured Debt / Adequate Protection Payments			
Professional Fees			
Amounts Due to Insiders*			
Other Post-petition Liabilities (attach schedule)			
<b>TOTAL POST-PETITION LIABILITIES</b>	<b>0</b>	<b>0</b>	
<b>LIABILITIES SUBJECT TO COMPROMISE (Pre-Petition)</b>			
Secured Debt (DASNY)	0	0	
Priority & Administrative Claims	18,239,036	18,222,013	
Unsecured Debt	143,051,036	143,064,917	
<b>TOTAL PRE-PETITION LIABILITIES</b>	<b>161,290,072</b>	<b>161,286,930</b>	
<b>TOTAL LIABILITIES</b>	<b>161,290,072</b>	<b>161,286,930</b>	
<b>OWNER'S EQUITY</b>			
Capital Stock			
Additional Paid-In Capital			
Partners' Capital Account			
Owner's Equity Account			
Retained Earnings - Pre-Petition			
Retained Earnings - Post-petition			
Adjustments to Owner Equity (attach schedule)			
Post-petition Contributions (attach schedule)			
<b>TOTAL NET ASSETS</b>	<b>128,500,320</b>	<b>128,498,350</b>	
<b>TOTAL LIABILITIES AND NET ASSETS</b>	<b>32,789,752</b>	<b>32,788,580</b>	

\*\*"Insider" is defined in 11 U.S.C. Section 101(31).

In re Caritas Health Care, Inc.  
 Debtor

Case No. 09-40901  
 Reporting Period: 1/01-1/31/2012

**BALANCE SHEET - continuation section**

ASSETS	BOOK VALUE AT END OF CURRENT REPORTING MONTH	BOOK VALUE ON PETITION DATE
<b>Other Current Assets</b>		
<b>Other Assets</b>		
<b>LIABILITIES AND OWNER EQUITY</b>		
LIABILITIES AND OWNER EQUITY	BOOK VALUE AT END OF CURRENT REPORTING MONTH	BOOK VALUE ON PETITION DATE
<b>Other Post-petition Liabilities</b>		
<b>Adjustments to Owner's Equity</b>		
<b>Post-Petition Contributions</b>		

Restricted Cash: Cash that is restricted for a specific use and not available to fund operations. Typically, restricted cash is segregated into a separate account, such as an escrow account.

In re Caritas Health Care, Inc.  
**Debtor**

Case No. 09-40901  
 Reporting Period: 1/01-1/31/2012

**STATUS OF POST-PETITION TAXES**

The beginning tax liability should be the ending liability from the prior month or, if this is the first report, the amount should be zero.

Attach photocopies of IRS Form 6123 or payment receipt to verify payment or deposit of federal payroll taxes.

Attach photocopies of any tax returns filed during the reporting period.

Federal	Beginning Tax	Amount Withheld and/or Accrued	Amount Paid	Date Paid	Check # or EFT	Ending Tax
Withholding						
FICA-Employee						
FICA-Employer						
Unemployment						
Income						
Other:						
<b>Total Federal Taxes</b>						
State and Local						
Withholding						
Sales						
Excise						
Unemployment						
Real Property						
Personal Property						
Other:						
<b>Total State and Local</b>						
<b>Total Taxes</b>						

**SUMMARY OF UNPAID POST-PETITION DEBTS**

Attach aged listing of accounts payable.

	Number of Days Past Due					Total
	Current	0-30	31-60	61-90	Over 91	
Accounts Payable						
Wages Payable						
Taxes Payable						
Rent/Leases-Building						
Rent/Leases-Equipment						
Secured Debt/Adequate Protection Payments						
Professional Fees						
Amounts Due to Insiders						
Other:						
Other:						
<b>Total Post-petition Debts</b>						

**Explain how and when the Debtor intends to pay any past due post-petition debts.**

---



---



---

In re Caritas Health Care, Inc. Case No. 09-40901  
 Debtor Reporting Period: 1/01-1/31/2012

**ACCOUNTS RECEIVABLE RECONCILIATION AND AGING**

Accounts Receivable Reconciliation	0-30 Days	31-60 Days	61-90 Days	91+ Days	Total
Total Accounts Receivable at the beginning of the reporting period					
Plus: Amounts billed/adjusted during period					
Less: Amounts collected during the period					
Total Accounts Receivable at the end of the reporting period					
<b>Accounts Receivable Aging</b>					
0 - 30 days old					
31 - 60 days old					
61 - 90 days old					
91+ days old					
Total Accounts Receivable					
Less: Bad Debts (Amount considered uncollectible)					
Net Accounts Receivable					

**TAXES RECONCILIATION AND AGING**

Taxes Payable	0-30 Days	31-60 Days	61-90 Days	91+ Days	Total
0 - 30 days old					
31 - 60 days old					
61 - 90 days old					
91+ days old					
Total Taxes Payable					
Total Accounts Payable					

In re Caritas Health Care, Inc.  
Debtor

Case No. 09-40901  
Reporting Period: 1/01-1/31/2012

**PAYMENTS TO INSIDERS AND PROFESSIONALS**

Of the total disbursements shown on the Cash Receipts and Disbursements Report (MOR-1) list the amount paid to insiders (as defined in Section 101(31) (A)-(F) of the U.S. Bankruptcy Code) and to professionals. For payments to insiders, identify the type of compensation paid (e.g. Salary, Bonus, Commissions, Insurance, Housing Allowance, Travel, Car Allowance, Etc.). Attach additional sheets if necessary.

<b>INSIDERS</b>			
NAME	TYPE OF PAYMENT	AMOUNT PAID	TOTAL PAID TO DATE
John Kastanis	salary		154,621
Jerry Castoria	fees (CFO)		420,005
<b>TOTAL PAYMENTS TO INSIDERS</b>		0	574,626

<b>PROFESSIONALS</b>					
NAME	DATE OF COURT ORDER AUTHORIZING PAYMENT	AMOUNT APPROVED	AMOUNT PAID	TOTAL PAID TO DATE	TOTAL INCURRED & UNPAID*
Proskauer Rose				2,714,336	676,630
CBIZ				398,883	99,675
JL Consulting				354,454	0
Montclair Partners				77,872	19,475
Alston Bird				446,553	108,667
BDO				263,556	61,862
Neubert Pepe				36,416	0
Kelley Drye				431,192	103,038
Focus				32,548	0
Littler Mendelson				366,880	88,624
Garbarini & Scher				48,170	11,661
Silverman Acampora				13,295	3,296
EPIQ				699,481	0
<b>TOTAL PAYMENTS TO PROFESSIONALS</b>			0	5,883,636	1,172,928
* INCLUDE ALL FEES INCURRED, BOTH APPROVED AND UNAPPROVED					

**POST-PETITION STATUS OF SECURED NOTES, LEASES PAYABLE AND ADEQUATE PROTECTION PAYMENTS**

NAME OF CREDITOR	SCHEDULED MONTHLY PAYMENT DUE	AMOUNT PAID DURING MONTH	TOTAL UNPAID POST-PETITION
<b>TOTAL PAYMENTS</b>			

In re Caritas Health Care, Inc.

Case No. 09-40901

Debtor

Reporting Period: 1/01-1/31/2012

### DEBTOR QUESTIONNAIRE

<b>Must be completed each month. If the answer to any of the questions is "Yes", provide a detailed explanation of each item. Attach additional sheets if necessary.</b>		Yes	No
1	Have any assets been sold or transferred outside the normal course of business this reporting period?		X
2	Have any funds been disbursed from any account other than a debtor in possession account this reporting period?		X
3	Is the Debtor delinquent in the timely filing of any post-petition tax returns?		X
4	Are workers compensation, general liability or other necessary insurance coverages expired or cancelled, or has the debtor received notice of expiration or cancellation of such policies?		X
5	Is the Debtor delinquent in paying any insurance premium payment?		X
6	Have any payments been made on pre-petition liabilities this reporting period?		X
7	Are any post petition receivables (accounts, notes or loans) due from related parties?		X
8	Are any post petition payroll taxes past due?		X
9	Are any post petition State or Federal income taxes past due?		X
10	Are any post petition real estate taxes past due?		X
11	Are any other post petition taxes past due?		X
12	Have any pre-petition taxes been paid during this reporting period?		X
13	Are any amounts owed to post petition creditors delinquent?		X
14	Are any wage payments past due?		X
15	Have any post petition loans been received by the Debtor from any party?		X
16	Is the Debtor delinquent in paying any U.S. Trustee fees?		X
17	Is the Debtor delinquent with any court ordered payments to attorneys or other professionals?		X
18	Have the owners or shareholders received any compensation outside of the normal course of business?		X