

Fill in this information to identify your case:

United States Bankruptcy Court for the:

NORTHERN DISTRICT OF ILLINOIS

Case number (if known) Chapter 11

Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, Instructions for Bankruptcy Forms for Non-Individuals, is available.

1. Debtor's name McMahan-Clemis Institute of Otolaryngology, S.C.

2. All other names debtor used in the last 8 years DBA Physician's Hearing Aid Services, Inc. Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 47-1650619

4. Debtor's address Principal place of business Mailing address, if different from principal place of business 151 North Michigan Avenue Suite 913 Chicago, IL 60601 Number, Street, City, State & ZIP Code P.O. Box, Number, Street, City, State & ZIP Code Cook County Location of principal assets, if different from principal place of business Number, Street, City, State & ZIP Code

5. Debtor's website (URL)

6. Type of debtor Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP)) Partnership (excluding LLP) Other. Specify:

Debtor McMahan-Clemis Institute of Otolaryngology, S.C. Case number (if known) _____
 Name

7. Describe debtor's business A. *Check one:*

- Health Care Business (as defined in 11 U.S.C. § 101(27A))
- Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- Railroad (as defined in 11 U.S.C. § 101(44))
- Stockbroker (as defined in 11 U.S.C. § 101(53A))
- Commodity Broker (as defined in 11 U.S.C. § 101(6))
- Clearing Bank (as defined in 11 U.S.C. § 781(3))
- None of the above

B. *Check all that apply*

- Tax-exempt entity (as described in 26 U.S.C. §501)
- Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.
 See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

8. Under which chapter of the Bankruptcy Code is the debtor filing? *Check one:*

- Chapter 7
- Chapter 9
- Chapter 11. *Check all that apply:*
 - Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
 - The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
 - A plan is being filed with this petition.
 - Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
 - The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
 - The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.
- Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years? No. Yes.

If more than 2 cases, attach a separate list.

District _____	When _____	Case number _____
District _____	When _____	Case number _____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? No. Yes.

List all cases. If more than 1, attach a separate list

Debtor	<u>John T. McMahan</u>	Relationship	<u>Shareholder</u>
District	<u>Northern District of Illinois</u>	When	<u>5/14/18</u>
		Case number, if known	<u>18-14064</u>

Debtor McMahan-Clemis Institute of Otolaryngology, S.C. Case number (if known) _____
 Name

11. **Why is the case filed in this district?** *Check all that apply:*
- Debtor has had its domicile, 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.
 - A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. **Does the debtor own or have possession of any real property or personal property that needs immediate attention?**
- No
 - Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention?** *(Check all that apply.)*
- It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
 What is the hazard? _____
 - It needs to be physically secured or protected from the weather.
 - It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
 - Other _____
- Where is the property?** _____
 Number, Street, City, State & ZIP Code
- Is the property insured?**
- No
 - Yes. Insurance agency _____
 Contact name _____
 Phone _____

Statistical and administrative information

13. **Debtor's estimation of available funds** *Check one:*
- Funds will be available for distribution to unsecured creditors.
 - After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. **Estimated number of creditors**
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

15. **Estimated Assets**
- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

16. **Estimated liabilities**
- | | | |
|---|--|--|
| <input type="checkbox"/> \$0 - \$50,000 | <input type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion |
| <input type="checkbox"/> \$50,001 - \$100,000 | <input type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion |
| <input type="checkbox"/> \$100,001 - \$500,000 | <input type="checkbox"/> \$50,000,001 - \$100 million | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input checked="" type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million | <input type="checkbox"/> More than \$50 billion |

Debtor McMahan-Clemis Institute of Otolaryngology, S.C.
Name

Case number (if known) _____

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

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

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

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

Executed on June 19, 2018
MM / DD / YYYY

/s/ John T. McMahan
Signature of authorized representative of debtor

Title President

John T. McMahan
Printed name

18. Signature of attorney

/s/ Gregory K. Stern
Signature of attorney for debtor

Date June 19, 2018
MM / DD / YYYY

Gregory K. Stern 6183380
Printed name

Gregory K. Stern, P.C.
Firm name

53 West Jackson Boulevard
Suite 1442
Chicago, IL 60604
Number, Street, City, State & ZIP Code

Contact phone (312) 427-1558 Email address greg@gregstern.com

6183380 IL
Bar number and State

Fill in this information to identify the case:

Debtor name McMahan-Clemis Institute of Otolaryngology, S.C.
 United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS
 Case number (if known): _____

Check if this is an amended filing

Official Form 204

Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders 12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
ALK - Abello, Inc. 7806 Solution Center Chicago, IL 60677-7806		Trade Debt	Disputed			\$9,097.74
Allergan USA, Inc. 12975 Collections Center Drive Chicago, IL 60693-0129		Trade Debt	Disputed			\$5,982.64
Allergy Laboratories PO Box 348 Oklahoma City, OK 73101		Trade Debt	Disputed			\$11,766.40
Kenneth Andrews 1050 State Street #359 New Haven, CT 06511		Services	Contingent Unliquidated Disputed			\$55,209.74
Bedford Med, LLC 1300 East Woodfield Road Suite 150 Schaumburg, IL 60173		Rent Default	Unliquidated Disputed			\$3,191.60
Jack Clemis 734 Lavergne Avenue Wilmette, IL 60091		Purchase of Shareholder Interests	Contingent Unliquidated Disputed			\$100,000.00
Darwin Heard 1111 North Dearborn Street Apt. 3106 Chicago, IL 60610		Wages				\$3,360.00
Illinois Department of Revenue Bankruptcy Section P.O. Box 64338 Chicago, IL 60664-0338		Taxes	Disputed			\$13,880.38

Debtor McMahan-Clemis Institute of Otolaryngology, S.C.
Name

Case number (if known) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Integro Healthcare LLC 721 Emerson Road Saint Louis, MO 63141		Services	Disputed			\$20,272.77
ISMIE Mutual Insurance Company 20 North Michigan Avenue Suite 700 Chicago, IL 60602		Insurance Premiums	Disputed			\$18,771.00
Merz North America 6501 Six Forks Road Raleigh, NC 27615		Trade Debt				\$3,072.15
Millennium Park Living, Inc. c/o PR Accounting LLC 324 West Touhy Avenue Park Ridge, IL 60068		Rent				\$6,599.00
Phonak 35555 Eagle Way Chicago, IL 60678-1355		Trade Debt				\$5,978.84
Pitney Bowes Global Financial Services 2225 American Drive Neenah, WI 54956		Periodic Purchases	Disputed			\$3,226.08
PSS McKesson Primary Care One Post Street San Francisco, CA 94104		Trade Debt	Contingent Unliquidated Disputed			\$19,305.71
Starkey PO Box 856915 Minneapolis, MN 55485		Trade Debt				\$6,419.04
Stericycle, Inc. PO Box 3666 Camarillo, CA 93011-3666		Trade Debt				\$3,480.68
Transwestern 3300 South Oak Park Avenue Berwyn, IL 60402		Lease Default	Disputed			\$8,503.53
United Mercantile Agencies, Inc. 600 South 7th Street PO Box 1672 Louisville, KY 40201-1672		Insurance Overpayment	Disputed			\$6,507.51

Debtor McMahan-Clemis Institute of Otolaryngology, S.C.
Name

Case number (if known) _____

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services,	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
Widex USA 185 Commerce Drive Hauppauge, NY 11788		Trade Debt				\$7,502.78

United States Bankruptcy Court Northern District of Illinois

In re McMahan-Clemis Institute of Otolaryngology, S.C. Debtor(s)

Case No. Chapter 11

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and 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:

Table with 2 columns: Description of compensation and Amount. Rows include: For legal services, I have agreed to accept (\$ 40,000.00), Prior to the filing of this statement I have received (\$ 15,000.00), Balance Due (\$ Unknown**).

** Compensation is calculated in accordance with Attorneys' hourly fee schedule, in effect from time to time

2. The source of the compensation paid to me was:

[X] Debtor [] Other (specify):

3. The source of compensation to be paid to me is:

[X] Debtor [] Other (specify):

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

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

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

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
d. [Other provisions as needed] None

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

CERTIFICATION

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

June 20, 2018 Date

/s/ Gregory K. Stern Gregory K. Stern 6183380 Signature of Attorney Gregory K. Stern, P.C. 53 West Jackson Boulevard Suite 1442 Chicago, IL 60604 (312) 427-1558 Fax: (312) 427-1289 greg@gregstern.com Name of law firm

ATTORNEY CLIENT AGREEMENT

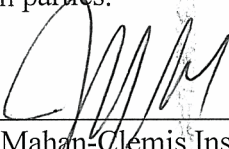
THIS AGREEMENT, made on June 5, 2018, is hereby entered into between McMahan-Clemis Institute of Otolaryngology, S.C., 151 North Michigan Avenue, Suite 913, Chicago, Illinois (the "Client"), and Gregory K. Stern, P.C., 53 West Jackson Boulevard, Suite 1442, Chicago, Illinois, 60604 (the "Attorneys").

1. The Client has agreed to pay the Attorneys a fee for professional services rendered pursuant to paragraph 2 hereof. The fee shall be based and calculated on the Attorneys' standard hourly rates as in effect from time to time. At present the hourly rates are as follows: \$500.00 for Gregory K. Stern and Dennis E. Quaid, \$475.00 for Monica C. O'Brien and \$365.00 for Rachel S. Sandler. The Client has agreed to pay the Attorneys a non-refundable minimum fee of \$15,000.00 which will be tendered prior to filing and which the Attorneys accept on the conditions herein enumerated and for deposit into the Attorneys' general operating account. Further the Client has agreed to pay a post-petition retainer of \$25,000.00 which is to be paid subject to bankruptcy court approval after notice to all creditors and parties in interest. In addition, the Client shall pay the fee when billed, except that, during the pendency of the Chapter 11, the Client will pay for services pursuant to court orders entered on applications for interim or final compensation, or per a separate written agreement with the Attorneys.

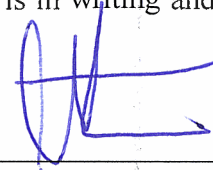
2. The fee consists of compensation for professional services including, but not limited to: analyzing case for filing Chapter 11; reviewing assets, liabilities, loan documentation, executory contracts and other relevant documentation; preparation of Chapter 11 petition, list of creditors, relevant documents for filing, Chapter 11 schedules and statement of financial affairs; representation at the first meeting of creditors; defending creditors' motions to convert, dismiss or modify the automatic stay, if any; preparation and presentation of motions to employ attorneys, accountants or other professional persons, motions for use, sale or lease of property, motions to assume or reject executory contracts; preparation and presentation of disclosure statement, plan and other necessary pleadings in furtherance of reorganizational goals; solicitation of creditor's acceptance; review of proofs of claims and objections regarding same; and, any other act or service in furtherance of reorganizational goals.

3. The Fee does not include (a) court costs and filing fees, (b) Westlaw or related computer expenses (c) copying and postage, or (d) any other out of pocket costs or expenses. All costs and expenses advanced by Attorneys shall be paid when Client is billed for same, with the exception that, during the Chapter 11, the Client will pay costs and expenses pursuant to court orders entered on applications for compensation, or per a separate written agreement with the Attorneys.

4. Any modification of this Agreement is void unless it is in writing and is signed by both parties.



McMahan-Clemis Institute of Otolaryngology, S.C.
By: John T. McMahan
Its: President



Gregory K. Stern
Gregory K. Stern, P.C.

**United States Bankruptcy Court
Northern District of Illinois**

In re McMahan-Clemis Institute of Otolaryngology, S.C. Debtor(s) Case No. _____
Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
John T. McMahan 151 North Michigan Avenue Suite 913 Chicago, IL 60601	Common	100%	Shareholder

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

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

Date June 19, 2018 Signature /s/ John T. McMahan
John T. McMahan

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

ALK - Abello, Inc.
7806 Solution Center
Chicago, IL 60677-7806

Allergan USA, Inc.
12975 Collections Center Drive
Chicago, IL 60693-0129

Allergy Laboratories
PO Box 348
Oklahoma City, OK 73101

Anderson Movers
2701 South Western Avenue
Chicago, IL 60608

Kenneth Andrews
1050 State Street
#359
New Haven, CT 06511

AT&T
PO Box 5080
Carol Stream, IL 60197-5080

Audiology Systems, Inc.
Dept Ch 16948
Palatine, IL 60055-6948

Bank of the West - Trinity Division
475 Sansome Street
19th Floor
San Francisco, CA 94111-3112

Barry A. Springer
4709 West Golf Road
Suite 475
Skokie, IL 60076

Bedford Med, LLC
1300 East Woodfield Road
Suite 150
Schaumburg, IL 60173

Carlson Dash, LLC
216 South Jefferson Street
Suite 504
Chicago, IL 60661

Cigna Healthcare
c/o Accent Cost Containment Solutions
11808 Miracle Hills Drive
PO Box 542007
Omaha, NE 68154-8007

Jack Clemis
734 Lavergne Avenue
Wilmette, IL 60091

e3 Gordon Stowe
3333 Kennicott Avenue
Arlington Heights, IL 60004-1429

eClinical Works, LLC
Two Technology Drive
Westborough, MA 01581

GRM Information Management
88044 Expedite Way
Chicago, IL 60695

Darwin Heard
1111 North Dearborn Street
Apt. 3106
Chicago, IL 60610

Illinois Department of Employment
Security
33 South State Street
10th Floor
Chicago, IL 60603

Illinois Department of Labor
160 North LaSalle Street
Suite C-1300
Chicago, IL 60601-3150

Illinois Department of Revenue
Bankruptcy Section
P.O. Box 64338
Chicago, IL 60664-0338

Integro Healthcare LLC
721 Emerson Road
Saint Louis, MO 63141

Internal Revenue Service
Centralized Insolvency Operation
PO Box 7346
Philadelphia, PA 19101-7346

ISMIE Mutual Insurance Company
20 North Michigan Avenue
Suite 700
Chicago, IL 60602

Jubilant Hooiser Stier LLC
PO Box 3145
Spokane, WA 99220-3145

Kwik Kop Business Solution
120 West Madison Street
Suite 510
Chicago, IL 60602

Lake Forest Bank & Trust Company
727 North Bank Lane
Lake Forest, IL 60045

Linebarger Goggan Blair & Sampson LLP
233 South Wacker Drive
Suite 4030
Chicago, IL 60606

Medline Industries, Inc.
Dept CH 14400
Chicago, IL 60677-4007

MedPro Waste Disposal, LLC
PO Box 5683
Carol Stream, IL 60197

Merz North America
6501 Six Forks Road
Raleigh, NC 27615

Millennium Park Living, Inc.
c/o PR Accounting LLC
324 West Touhy Avenue
Park Ridge, IL 60068

MIS Computer Corporation
2222 North Elson Avenue
Chicago, IL 60614

Noveselsky Law, LLC
25 North County
2d Floor
Waukegan, IL 60085

Oaktree Products Inc.
610 Spirit Valley East
Chesterfield, MO 63005

Oticon
PO Box 347996
Pittsburgh, PA 15251-4996

Phonak
35555 Eagle Way
Chicago, IL 60678-1355

Pitney Bowes Global Financial Services
2225 American Drive
Neenah, WI 54956

PSS McKesson Primary Care
One Post Street
San Francisco, CA 94104

Rauch-Milliken International, Inc.
PO Box 8390
Metairie, LA 70011-8390

Receivables Performance Management LLC
PO Box 1548
Lynnwood, WA 98046

Richmond North Associates, Inc.
4955 North Bailey Avenue
#109
Buffalo, NY 14226

Starkey
PO Box 856915
Minneapolis, MN 55485

Stericycle, Inc.
PO Box 3666
Camarillo, CA 93011-3666

Transwestern
3300 South Oak Park Avenue
Berwyn, IL 60402

Trinity Lease Worldwide LLC
151 North Michigan Avenue
Suite 913
San Francisco, CA 94111-3112

United Mercantile Agencies, Inc.
600 South 7th Street
PO Box 1672
Louisville, KY 40201-1672

Westone
PO Box 15100
Colorado Springs, CO 80935-5100

Widex USA
185 Commerce Drive
Hauppauge, NY 11788

Windy City Colocation
151 North Michigan Avenue
Suite 765
Chicago, IL 60601

**United States Bankruptcy Court
Northern District of Illinois**

In re McMahan-Clemis Institute of Otolaryngology, S.C.

Debtor(s)

Case No.

Chapter 11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

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

John T. McMahan
151 North Michigan Avenue
Suite 913
Chicago, IL 60601

None [*Check if applicable*]

June 19, 2018

Date

/s/ Gregory K. Stern

Gregory K. Stern 6183380

Signature of Attorney or Litigant

Counsel for McMahan-Clemis Institute of Otolaryngology, S.C.

Gregory K. Stern, P.C.

53 West Jackson Boulevard

Suite 1442

Chicago, IL 60604

(312) 427-1558 Fax:(312) 427-1289

greg@gregstern.com