

**United States Bankruptcy Court
Southern District of Ohio**

Voluntary Petition

Name of Debtor (if individual, enter Last, First, Middle): Southern Ohio Oral & Facial Surgeons, 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): DBA Chillicothe Family Dental	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./Complete EIN or other Tax ID No. (if more than one, state all): 31-1795806	Last four digits of Soc. Sec./Complete EIN or other Tax ID No. (if more than one, state all):
Street Address of Debtor (No. and Street, City, and State): 36 N. Walnut Street Chillicothe, OH	Street Address of Joint Debtor (No. and Street, City, and State):
ZIP Code 45601	ZIP Code
County of Residence or of the Principal Place of Business: Ross	County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):
ZIP Code	ZIP Code
Location of Principal Assets of Business Debtor (if different from street address above):	

Type of Debtor (Form of Organization) (Check one box) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input checked="" type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other <hr/> 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).	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 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.
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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 checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
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Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.																					
Estimated Number of Creditors	<table style="width:100%; text-align: center;"> <tr> <td>1-49</td> <td>50-99</td> <td>100-199</td> <td>200-999</td> <td>1000-5,000</td> <td>5001-10,000</td> <td>10,001-25,000</td> <td>25,001-50,000</td> <td>100,001-100,000</td> <td>OVER 100,000</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	1-49	50-99	100-199	200-999	1000-5,000	5001-10,000	10,001-25,000	25,001-50,000	100,001-100,000	OVER 100,000	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1-49	50-99	100-199	200-999	1000-5,000	5001-10,000	10,001-25,000	25,001-50,000	100,001-100,000	OVER 100,000												
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Estimated Assets	<table style="width:100%; text-align: center;"> <tr> <td><input type="checkbox"/> \$0 to \$10,000</td> <td><input type="checkbox"/> \$10,001 to \$100,000</td> <td><input checked="" type="checkbox"/> \$100,001 to \$1 million</td> <td><input type="checkbox"/> \$1,000,001 to \$100 million</td> <td><input type="checkbox"/> More than \$100 million</td> </tr> </table>	<input type="checkbox"/> \$0 to \$10,000	<input type="checkbox"/> \$10,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$100 million	<input type="checkbox"/> More than \$100 million															
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Estimated Liabilities	<table style="width:100%; text-align: center;"> <tr> <td><input type="checkbox"/> \$0 to \$50,000</td> <td><input type="checkbox"/> \$50,001 to \$100,000</td> <td><input checked="" type="checkbox"/> \$100,001 to \$1 million</td> <td><input type="checkbox"/> \$1,000,001 to \$100 million</td> <td><input type="checkbox"/> More than \$100 million</td> </tr> </table>	<input type="checkbox"/> \$0 to \$50,000	<input type="checkbox"/> \$50,001 to \$100,000	<input checked="" type="checkbox"/> \$100,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$100 million	<input type="checkbox"/> More than \$100 million															
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THIS SPACE IS FOR COURT USE ONLY

<p>Voluntary Petition</p> <p><i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): Southern Ohio Oral & Facial Surgeons, Inc.</p>
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All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)

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

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

Name of Debtor: Richard J. Schoonmaker	Case Number: 07-54429	Date Filed: 6/08/07
District: Southern District of Ohio Eastern Division	Relationship: Shareholder/Officer/Director	Judge: C. Kathryn Preston

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

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

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

No.

Exhibit D

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

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

If this is a joint petition:

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

Information Regarding the Debtor - Venue

(Check any applicable box)

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

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

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

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

(Check all applicable boxes)

Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

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

Debtor has included in 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.

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

Name of Debtor(s):
Southern Ohio Oral & Facial Surgeons, Inc.

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).
I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
Signature of Debtor

X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X _____
Date

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Signature of Attorney

X /s/ David M. Whittaker Esq.
Signature of Attorney for Debtor(s)

David M. Whittaker Esq. 0019307
Printed Name of Attorney for Debtor(s)

Bricker & Eckler LLP
Firm Name

100 South Third Street
Columbus, OH 43215

Address

Email: dwhittaker@bricker.com

614-227-2355 Fax: 614-227-2390
Telephone Number

September 17, 2007
Date

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.
The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Richard J. Schoonmaker DMD
Signature of Authorized Individual

Richard J. Schoonmaker DMD
Printed Name of Authorized Individual

President
Title of Authorized Individual

September 17, 2007
Date

**United States Bankruptcy Court
Southern District of Ohio**

In re Southern Ohio Oral & Facial Surgeons, Inc.

Debtor(s)

Case No. _____

Chapter 11

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Fischer Dental Laboratory 256 Main Street Florence, KY 41042-7855	Fischer Dental Laboratory 256 Main Street Florence, KY 41042-7855 888-587-5822	Dental laboratory services		9,235.03
HPSC Inc. One Beacon Street 2nd Floor Boston, MA 02109-1803	HPSC Inc. One Beacon Street 2nd Floor Boston, MA 02109-1803	Commercial loans partially secured by equipment, inventory and receivables		608,400.00 (208,100.00 secured)
Ohio Department of Job and Family Serv. Attn Collection Department PO Box 923 Columbus, OH 43216	Hasina Rasul Analyst Ohio Department of Job and Family Serv. Attn Collection Department PO Box 923 Columbus, OH 43216 614-466-7009	claim for asserted over payment by Medicaid	Disputed	26,683.71
Ohio Department of Job and Family Svcs. 30 East Broad Street Columbus, OH 43215-3414	Hasina Rasul Analyst Ohio Department of Job and Family Svcs. 30 East Broad Street Columbus, OH 43215-3414 614-466-7009	Any liability for claim for Medicaid overpayment to Minesh A. Patel DDS; liability disputed	Disputed	5,102.17
Patterson Dental 1031 Mendota Heights Road Saint Paul, MN 55120	Patterson Dental 1031 Mendota Heights Road Saint Paul, MN 55120 800-328-5536	Credit purchases		11,961.02
Pitney Bowes Purchase Power PO Box 856042 Louisville, KY 40285-6042	Pitney Bowes Purchase Power PO Box 856042 Louisville, KY 40285-6042	Credit purchases		929.73
Pitney Bowes Purchase Power PO Box 856042 Louisville, KY 40285-6042	Pitney Bowes Purchase Power PO Box 856042 Louisville, KY 40285-6042	Credit purchases		408.66
Stericycle Inc. PO Box 9001588 Louisville, KY 40290-1588	Stericycle Inc. PO Box 9001588 Louisville, KY 40290-1588	Account for purchase of supplies		1,861.44

United States Bankruptcy Court
Southern District of Ohio

In re Southern Ohio Oral & Facial Surgeons, 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 must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	3	208,100.00		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	1		608,400.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		31,785.88	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	3		34,892.22	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	No	0			N/A
J - Current Expenditures of Individual Debtor(s)	No	0			N/A
Total Number of Sheets of ALL Schedules		12			
Total Assets			208,100.00		
Total Liabilities				675,078.10	

**United States Bankruptcy Court
Southern District of Ohio**

In re Southern Ohio Oral & Facial Surgeons, 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) (whether disputed or undisputed)	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
TOTAL	

State the following:

Average Income (from Schedule I, Line 16)	
Average Expenses (from Schedule J, Line 18)	
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	

State the following:

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

In re Southern Ohio Oral & Facial Surgeons, Inc.
Debtor

Case No. _____

SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
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None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

In re Southern Ohio Oral & Facial Surgeons, Inc.

Case No. _____

Debtor

SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

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		Cash on Hand	-	100.00
		Reserve for payment of post petition adequate protection payments, professional fees and other operating expenses (approximately)	-	73,000.00
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.		Checking Account Deposits	-	5,000.00
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			
			Sub-Total >	78,100.00
			(Total of this page)	

2 continuation sheets attached to the Schedule of Personal Property

In re Southern Ohio Oral & Facial Surgeons, Inc.

Case No. _____

Debtor

SCHEDULE B. PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	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.		Accounts Receivable (approximately)	-	80,000.00
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			

Sub-Total > **80,000.00**
(Total of this page)

Sheet 1 of 2 continuation sheets attached to the Schedule of Personal Property

In re Southern Ohio Oral & Facial Surgeons, Inc.

Case No. _____

Debtor

SCHEDULE B. PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		Office Equipment Furnishings and Supplies (The depreciated value based upon Statement of Assets dated December 31, 2006 is \$108026.42. The liquidation value is approximately \$50,000)	-	50,000.00
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total >	50,000.00
(Total of this page)	
Total >	208,100.00

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

(Report also on Summary of Schedules)

In re Southern Ohio Oral & Facial Surgeons, Inc.,
Debtor

Case No. _____

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community			C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN							
Account No.	X -	Several accounts							
HPSC Inc. One Beacon Street 2nd Floor Boston, MA 02109-1803		Blanket Lien on Company Assets							
		Cash on hand, bank deposits, accounts receivable, equipment and inventory							
		Value \$	208,100.00				608,400.00	400,300.00	
Account No.		William R. Baldiga Esq. Brown Rudnick One Financial Center Boston, MA 02111							
Representing: HPSC Inc.		Value \$							
Account No.									
		Value \$							
Account No.									
		Value \$							
Subtotal (Total of this page)								608,400.00	400,300.00
Total (Report on Summary of Schedules)								608,400.00	400,300.00

0 continuation sheets attached

In re Southern Ohio Oral & Facial Surgeons, Inc. Case No. _____
 Debtor

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trust 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 \$10,950* 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 \$5,400* 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 \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered 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 April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Southern Ohio Oral & Facial Surgeons, Inc.
Debtor

Case No. _____

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

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

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. Ohio Department of Job and Family Serv. Attn Collection Department PO Box 923 Columbus, OH 43216	-		claim for asserted over payment by Medicaid			X	26,683.71	Unknown
Account No. Representing: Ohio Department of Job and Family Serv.			Ohio Department of Job and Family Svcs. Fiscal Services Accounts Receivable Unit Attn SUR Program PO Box 182367					
Account No. Representing: Ohio Department of Job and Family Serv.			Ohio Department of Jobs and Family Svcs. PO Box 1618 Columbus, OH 43216-1618					
Account No. Representing: Ohio Department of Job and Family Serv.			Ohio Department of Jobs and Family Svcs. 4020 East Fifth Ave. Columbus, OH 43216					
Account No. Ohio Department of Job and Family Svcs. 30 East Broad Street Columbus, OH 43215-3414	X	-	2006 Any liability for claim for Medicaid overpayment to Minesh A. Patel DDS; liability disputed			X	5,102.17	Unknown

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

Subtotal		0.00
(Total of this page)	31,785.88	0.00

Total		0.00
(Report on Summary of Schedules)	31,785.88	0.00

In re Southern Ohio Oral & Facial Surgeons, Inc.,
Debtor

Case No. _____

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. 1248 Fischer Dental Laboratory 256 Main Street Florence, KY 41042-7855		-				9,235.03
Account No. Representing: Fischer Dental Laboratory		Christopher J. Arlinghaus, Esq. PO Box 17411 Ft Mitchell, KY 41017-0411				
Account No. 52867 Patterson Dental 1031 Mendota Heights Road Saint Paul, MN 55120		X -				11,961.02
Account No. Representing: Patterson Dental		Patterson Dental 25031 Network Place Chicago, IL 60673-1250				
Subtotal (Total of this page)						21,196.05

2 continuation sheets attached

In re Southern Ohio Oral & Facial Surgeons, Inc. Case No. _____
 Debtor

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

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. Representing: Patterson Dental						
		Patterson Dental 4140 Tuller Rd. Suite 122 Dublin, OH 43017				
Account No. 00577831001						
Pitney Bowes Purchase Power PO Box 856042 Louisville, KY 40285-6042	-	2007 Credit purchases				408.66
Account No. 20003452667						
Pitney Bowes Purchase Power PO Box 856042 Louisville, KY 40285-6042	-	2007 Credit purchases				929.73
Account No.						
Stericycle Inc. PO Box 9001588 Louisville, KY 40290-1588	-	Account for purchase of supplies				1,861.44
Account No.						
Time Warner Cable 1266 Dublin Rd. Columbus, OH 43215	-	2007 Advertising				4,000.00
Sheet no. <u>1</u> of <u>2</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)	7,199.83

In re Southern Ohio Oral & Facial Surgeons, Inc. Case No. _____
 Debtor

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

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 100633 Whited Seigneur Sams & Rahe CPAs LLP 213 South Paint Street Chillicothe, OH 45601-3828			2006-2007 Accounting and tax services			6,496.34
Account No.						
Account No.						
Account No.						
Account No.						
					Subtotal (Total of this page)	6,496.34
					Total (Report on Summary of Schedules)	34,892.22

Sheet no. 2 of 2 sheets attached to Schedule of
 Creditors Holding Unsecured Nonpriority Claims

In re Southern Ohio Oral & Facial Surgeons, Inc.

Case No. _____

Debtor

SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Haines Publishing Inc. PO Box 2117 8050 Freedom Ave. NW Canton, OH 44720	Telephone directory advertising agreement
Idearc Media PO Box 619810 Dallas, TX 75261-9810	Telephone directory advertising agreement
Patterson Dental 1031 Mendota Heights Road Saint Paul, MN 55120	Software license agreement
PBCC 27 Waterview Dr. Shelton, CT 06484	Rental Agreement for postage meter
Richard J. Schoonmaker DMD 211 Sunrush Blvd. Chillicothe, OH 45601	Lease of commercial real property at 30 N. Walnut St. Chillicothe OH and 36 N. Walnut St. Chillicothe OH. and the right to use parking spaces. The debtor pays Dr. Schoonmaker a total of \$4019.44 for the monthly rent for these properties. This is the amount of Dr. Schoonmaker's monthly mortgage payment on these properties.
The Local Pages of Ohio LLC 4910 W. Amelia Earhart Dr. Suite 1 Salt Lake City, UT 84116	Telephone directory advertising agreement

In re Southern Ohio Oral & Facial Surgeons, Inc.

Case No. _____

Debtor

SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Minesh A. Patel DDS 30 North Walnut St. Chillicothe, OH 45601	Ohio Department of Job and Family Svcs. 30 East Broad Street Columbus, OH 43215-3414
Richard J. Schoonmaker DMD 211 Sunrush Blvd. Chillicothe, OH 45601	HPSC Inc. One Beacon Street 2nd Floor Boston, MA 02109-1803
Richard J. Schoonmaker DMD 211 Sunrush Blvd. Chillicothe, OH 45601 This creditor may claim that Dr. Schoonmaker is personally liable for this obligation	Patterson Dental 1031 Mendota Heights Road Saint Paul, MN 55120

0 continuation sheets attached to Schedule of Codebtors

**United States Bankruptcy Court
Southern District of Ohio**

In re **Southern Ohio Oral & Facial Surgeons, Inc.**
Debtor(s)

Case No. _____
Chapter **11**

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the President of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of **14** sheets [*total shown on summary page plus 1*], and that they are true and correct to the best of my knowledge, information, and belief.

Date **September 17, 2007**

Signature **/s/ Richard J. Schoonmaker DMD**
Richard J. Schoonmaker DMD
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
Southern District of Ohio**

In re **Southern Ohio Oral & Facial Surgeons, Inc.**
Debtor(s)

Case No. _____
Chapter **11**

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

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

DEFINITIONS

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

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

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

AMOUNT	SOURCE
\$14,590.29	Estimated operating income for January 1-June 11, 2007 on gross sales of \$685,859.52
\$53,393.35	2006 income on gross sales of \$1,455,332.22
\$191,742.13	2005 income on gross sales of \$1,697,271.48

2. Income other than from employment or operation of business

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

AMOUNT SOURCE

3. Payments to creditors

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

a. *Individual or joint debtor(s) with primarily consumer debts.* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,475. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
See attached sheets	See attached sheets for payment details	\$0.00	\$0.00

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
--	-----------------	-------------	--------------------

4. Suits and administrative proceedings, executions, garnishments and attachments

None a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
HPSC Inc. v. Southern Ohio Oral and facial Surgeons Inc. et al Case No. 07-2000	Complaint for money judgment on commercial loans	Superior Court Suffolk County Massachusetts	The case was filed in May 2007 and is pending
Fischer Dental Laboratory Inc. v. Southern Ohio Oral and Facial Surgeons, Inc. d/b Chillothe Family Dental Case No. 07-CI-1829	Complaint on Account	Boone Circuit Court Commonwealth of Kentucky	The case was filed on August 22, 2007 and is pending

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
---	-----------------	--------------------------------------

5. Repossessions, foreclosures and returns

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

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

6. Assignments and receiverships

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

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

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

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

7. Gifts

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

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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8. Losses

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

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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9. Payments related to debt counseling or bankruptcy

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

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Bricker & Eckler LLP 100 South Third Street Columbus, OH 43215	May 9, 2007	\$7500.00 retainer for payment of filing fee and for attorney fees in the Chapter 11 case
Bricker & Eckler LLP 100 South Third Street Columbus, OH 43215	March 6, 2007	\$550.00 for initial consultation regarding the corporation's financial circumstances

10. Other transfers

- None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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- None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

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

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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12. Safe deposit boxes

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

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

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

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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18 . Nature, location and name of business

- None a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER I.D. NO.	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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- None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

*(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)*

19. Books, records and financial statements

- None a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

<p>NAME AND ADDRESS Whited Seigneur Sams & Rahe CPAS LLC 213 South Paint Street Chillicothe, OH 45601</p> <p>Alexis Gilbert C/O Southern Ohio Oral and Facial Surgeons Inc. 36 N. Walnut St. Chillicothe, OH 45601</p> <p>Mark Frazier CPA High St. Chillicothe, OH 45601</p>	<p>DATES SERVICES RENDERED This accounting firm has prepared financial statements and tax returns for the corporation for 2001-2006</p> <p>This employee of the corporation has performed the internal financial work since 2003</p> <p>Has provided accounting and tax services since early 2007</p>
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- None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

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

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

NAME AND ADDRESS	DATE ISSUED
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20. Inventories

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

DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
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- None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

DATE OF INVENTORY	NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
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21 . Current Partners, Officers, Directors and Shareholders

- None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
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- None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
Richard J. Schoonmaker DMD 211 Sunrush Blvd. Chillicothe, OH 45601	President	Dr. Schoonmaker is the sole officer, director and shareholder of the corporation

22 . Former partners, officers, directors and shareholders

- None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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- None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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23 . Withdrawals from a partnership or distributions by a corporation

- None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Richard J. Schoonmaker DMD 211 Sunrush Blvd. Chillicothe, OH 45601 Dr. Schoonmaker is the sole shareholder, officer and director. He also provides services to the Debtor as an oral surgeon.	On various dates during the last 12 months	\$7870.00 in draws.

24. Tax Consolidation Group.

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

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER (EIN)
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25. Pension Funds.

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

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER (EIN)
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DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

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

Date September 17, 2007

Signature /s/ Richard J. Schoonmaker DMD
Richard J. Schoonmaker DMD
President

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

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

Southern Ohio Oral & Facial Surgeons

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Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
06/01/2007			Professional Fees	Deposit		X	22.00	-7,232.78
06/01/2007			Professional Fees	Deposit		X	328.40	-6,904.38
06/01/2007			Professional Fees	Deposit			59.40	-6,844.98
06/01/2007	11725	Lowe,s	Repair and Maintenance		320.18	X		-7,165.16
06/01/2007	11726	Kingston National B...	Miscellaneous	Replenish petty...	80.00	X		-7,245.16
06/01/2007	11727	Sam McGraw	Contract		312.00	X		-7,557.16
06/04/2007			-split-	Deposit		X	7,347.52	-209.64
06/04/2007			-split-	Deposit		X	11,103.13	10,893.49
06/04/2007	11728	Printex	Office Supplies		31.56	X		10,861.93
06/05/2007			-split-	Deposit		X	477.80	11,339.73
06/05/2007			-split-	Deposit		X	866.18	12,205.91
06/05/2007	debit	Kingston National B...	Bank Charge	April Courier F...	10.00	X		12,195.91
06/05/2007	debit	Kingston National B...	Bank Charge	April Courier F...	54.50	X		12,141.41
06/05/2007	debit	Ohio Department of ...	Taxes:CAT	VOID: Comme...		X		12,141.41
06/05/2007	11729	Alexis Gilbert	-split-		1,399.79	X		10,741.62
06/05/2007	11730	Amanda Haines	-split-		720.25	X		10,021.37
06/05/2007	11731	Amy E Cottrill	-split-		654.38	X		9,366.99
06/05/2007	11732	Amy J. Kirkbride	-split-		687.39	X		8,679.60
06/05/2007	11733	Carla Bumgardner	-split-		386.84	X		8,292.76
06/05/2007	11734	Heather J Evans	-split-		567.27	X		7,725.49
06/05/2007	11735	Kathryn A Hoyt	-split-		153.35	X		7,572.14
06/05/2007	11736	Kristina M. Kingery	-split-		477.98	X		7,094.16
06/05/2007	11737	Margaret T Ford	-split-		861.87	X		6,232.29
06/05/2007	11738	Mirna G Lee	-split-		585.63	X		5,646.66
06/05/2007	11739	Peggy A Misita	-split-		288.52	X		5,358.14
06/05/2007	11740	Samantha K Strausba...	-split-		630.70	X		4,727.44
06/05/2007	11741	Sheryl Roseberry	-split-		788.92	X		3,938.52
06/05/2007	11742	Stephanie A. Tesi	-split-		1,347.67	X		2,590.85
06/05/2007	11743	Stephanie G. Dresbach	-split-		989.01	X		1,601.84
06/05/2007	11744	Tiya R Lewis	-split-		570.18	X		1,031.66
06/05/2007	11745	Trina L Rinehart	-split-		600.50	X		431.16
06/05/2007	11746	Kingston National B...	-split-	31-1795806	3,606.08	X		-3,174.92
06/05/2007	11747	Sullivan-Schein Dental	Supplies:Lab		816.83	X		-3,991.75
06/06/2007			Professional Fees	Deposit		X	440.00	-3,551.75
06/06/2007			Professional Fees	Deposit		X	493.70	-3,058.05
06/06/2007	11748	Sullivan-Schein Dental	Supplies:Lab		1,321.47	X		-4,379.52
06/07/2007			-split-	Deposit		X	6,102.09	1,722.57
06/07/2007			-split-	Deposit		X	5,153.75	6,876.32
06/08/2007			Professional Fees	Deposit		X	5.00	6,881.32
06/08/2007			-split-	Deposit		X	9,915.70	16,797.02

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Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
06/08/2007	11749	Sam McGraw	Contract		288.00	X		16,509.02
06/08/2007	11750	Office City	Office Supplies		24.10	X		16,484.92
06/11/2007			Professional Fees	Deposit		X	8,159.64	24,644.56
06/11/2007			Professional Fees	Deposit		X	219.12	24,863.68
06/11/2007	11751	Evelyn Simmons	Refunds		150.00	X		24,713.68
06/12/2007			Professional Fees	Deposit		X	239.30	24,952.98
06/12/2007			Professional Fees	Deposit		X	534.00	25,486.98
06/13/2007			Professional Fees	Deposit		X	78.00	25,564.98
06/14/2007			-split-	Deposit		X	2,160.04	27,725.02
06/14/2007			-split-	Deposit		X	3,887.92	31,612.94
06/15/2007			-split-	Deposit		X	2,299.74	33,912.68
06/15/2007			-split-	Deposit		X	905.00	34,817.68
06/18/2007			Professional Fees	Deposit		X	4,666.67	39,484.35
06/18/2007	11752	Ollie's	Office Supplies		64.19	X		39,420.16
06/18/2007	11753	Chillicothe Post Office	-split-		118.25	X		39,301.91
06/18/2007	11754	Wal Mart	Office Supplies		133.45	X		39,168.46
06/18/2007	11755	Lowe,s	Repair and Maintenance		47.14	X		39,121.32
06/18/2007	11756	Sam McGraw	Contract		240.00	X		38,881.32
06/18/2007	11757	Wal Mart	Office Supplies		54.05	X		38,827.27
06/18/2007	11758	Chillicothe Post Office	-split-		46.95	X		38,780.32
06/19/2007			Other Income	Deposit		X	123.09	38,903.41
06/19/2007			Professional Fees	Deposit		X	7,944.29	46,847.70
06/19/2007			Professional Fees	Deposit		X	384.00	47,231.70
06/19/2007			Professional Fees	Deposit		X	4,560.07	51,791.77
06/19/2007	11759	Alexis Gilbert	-split-		1,399.79	X		50,391.98
06/19/2007	11760	Amanda Haines	-split-		605.05	X		49,786.93
06/19/2007	11761	Amy E Cottrill	-split-		690.18	X		49,096.75
06/19/2007	11762	Amy J. Kirkbride	-split-		591.38	X		48,505.37
06/19/2007	11763	Carla Bumgardner	-split-		224.28	X		48,281.09
06/19/2007	11764	Heather J Evans	-split-		591.74	X		47,689.35
06/19/2007	11765	Kathryn A Hoyt	-split-		210.40	X		47,478.95
06/19/2007	11766	Kristina M. Kingery	-split-		722.11	X		46,756.84
06/19/2007	11767	Margaret T Ford	-split-		851.50	X		45,905.34
06/19/2007	11768	Mirna G Lee	-split-		577.52	X		45,327.82
06/19/2007	11769	Samantha K Strausba...	-split-		726.47	X		44,601.35
06/19/2007	11770	Sheryl Roseberry	-split-		634.43	X		43,966.92
06/19/2007	11771	Stephanie A. Tesi	-split-		1,060.75	X		42,906.17
06/19/2007	11772	Stephanie G. Dresbach	-split-		922.34	X		41,983.83
06/19/2007	11773	Tiya R Lewis	-split-		554.14	X		41,429.69
06/19/2007	11774	Trina L Rinchart	-split-		310.45	X		41,119.24

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06/19/2007	11775	Kelly M Himelrick	-split-		278.93	X		40,840.31
06/19/2007	11776	Kingston National B...	-split-	31-1795806	3,268.00	X		37,572.31
06/19/2007	11777	Minesh Patel	Contract		7,878.88	X		29,693.43
06/19/2007	11778	Dr. John B. Davis	Contract		2,009.71	X		27,683.72
06/19/2007	11779	Ronald Thompson	-split-	Invoice	650.00	X		27,033.72
06/19/2007	11780	Ohio Physicians Heal...	Draw		240.00	X		26,793.72
06/19/2007	11781	Patterson Dental Sup...	Supplies	636753586	86.43	X		26,707.29
06/19/2007	11782	Chillicothe Fire & Se...	-split-		64.04	X		26,643.25
06/19/2007	11783	Ivoclar Vivadent	Office Supplies		113.33	X		26,529.92
06/19/2007	11784	Culligan	-split-	#8454 #8456	87.86	X		26,442.06
06/19/2007	11785	State Life Insurance	Insurance:Life		234.86	X		26,207.20
06/19/2007	11786	Franklin Computer S...	New Building:Constru...		545.00	X		25,662.20
06/19/2007	11787	Southern Ohio Com...	Telephone		16.07	X		25,646.13
06/19/2007	11788	Rumpke	-split-		81.79	X		25,564.34
06/19/2007	11789	Chillicothe Florel	-split-		134.77	X		25,429.57
06/19/2007	11790	American Electric Po...	-split-		928.96	X		24,500.61
06/19/2007	11791	Horizon Chillicothe ...	-split-	0028210	1,641.78	X		22,858.83
06/19/2007	11792	Simon DeChatlet	Lab Services		2,000.00	X		20,858.83
06/19/2007	11793	Sullivan-Schein Dental	Supplies:Lab		255.41	X		20,603.42
06/19/2007	11794	Sullivan-Schein Dental	Supplies:Lab		647.56	X		19,955.86
06/20/2007			Professional Fees	Deposit		X	3,263.97	23,219.83
06/20/2007			Professional Fees	Deposit		X	384.06	23,603.89
06/21/2007			Professional Fees	Deposit		X	502.77	24,106.66
06/21/2007			-split-	Deposit		X	4,152.44	28,259.10
06/22/2007			-split-	Deposit		X	529.00	28,788.10
06/22/2007			-split-	Deposit		X	9,410.56	38,198.66
06/25/2007			-split-	Deposit		X	29,038.60	67,237.26
06/25/2007			-split-	Deposit		X	5,998.14	73,235.40
06/25/2007	11795	Sam McGraw	Contract		168.00	X		73,067.40
06/25/2007	11796	Sam McGraw	-split-		250.00	X		72,817.40
06/26/2007			Professional Fees	Deposit		X	277.91	73,095.31
06/26/2007	11797	Simon DeChatlet	Lab Services		3,000.00	X		70,095.31
06/26/2007	11798	Thomas Gas Service	Supplies		414.52	X		69,680.79
06/26/2007	11799	Capitol One	-split-		250.00	X		69,430.79
06/26/2007	11800	Medical Mutual of ...	-split-	#863318-100	3,832.53	X		65,598.26
06/26/2007	11801	Ace Surgical Supplies	Supplies:Lab	customer #007...	412.97	X		65,185.29
06/26/2007	11802	Verizon	-split-		1,003.10	X		64,182.19
06/26/2007	11803	Sprint PCS	Telephone		156.67	X		64,025.52
06/26/2007	11804	Sullivan-Schein Dental	Supplies:Lab		138.02	X		63,887.50
06/26/2007	11805	Patterson Dental Sup...	Supplies	636215379	2,000.00	X		61,887.50

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06/26/2007	11806	Patterson Dental Sup...	-split-		1,122.29	X		60,765.21
06/26/2007	11807	Horizon Chillicothe ...	-split-	0158224 and 0...	2,436.17	X		58,329.04
06/26/2007	11808	Means, Bichimer, Bu...	-split-	client #S0146	898.00	X		57,431.04
06/26/2007	11809	Greenwalt Lawncare	-split-		165.00	X		57,266.04
06/26/2007	11810	VSP	-split-	vision insurance	94.44	X		57,171.60
06/26/2007	11811	Sparkle Supply Com...	-split-		504.74	X		56,666.86
06/26/2007	11812	Office City	Office Supplies		72.04	X		56,594.82
06/26/2007	11813	Jerald A. Byers, Trea...	Taxes:Property		1,111.17	X		55,483.65
06/26/2007	11814	Wayne E. Fry	Loan payment lots west...		580.92	X		54,902.73
06/26/2007	11815	James Easton	Loan payment lots west...		580.93	X		54,321.80
06/26/2007	11816	Wayne E. Fry	Loan payment lots west...		1,848.03	X		52,473.77
06/26/2007	11817	James Easton	Loan payment lots west...		1,848.03	X		50,625.74
06/26/2007	11818	Wayne E. Fry	-split-		100.00	X		50,525.74
06/26/2007	11819	Ohio Department of J...	-split-	31-1795806 / e...	18.49	X		50,507.25
06/26/2007	11820	Haines Publishing, Inc.	-split-	customer#8492...	3,000.00	X		47,507.25
06/26/2007	11821	AAA	-split-		2,400.00	X		45,107.25
06/26/2007	11822	Chillicothe Post Office	-split-		185.80	X		44,921.45
06/26/2007	11823	Max Bostwick	Refunds		88.30	X		44,833.15
06/26/2007	11824	Naomi Wilcoxon	Refunds		139.00	X		44,694.15
06/26/2007	11825	Sullivan-Schein Dental	Supplies:Lab		912.21	X		43,781.94
06/26/2007	11826	Norma Hertenstein	Refunds		47.40	X		43,734.54
06/26/2007	11827	Charles Holloway	Refunds		435.60	X		43,298.94
06/26/2007	11828	Kathy Huffman	Refunds		144.00	X		43,154.94
06/26/2007	11829	Donald Robertson	Refunds		113.85	X		43,041.09
06/26/2007	11830	Christina Helton	Refunds		10.00	X		43,031.09
06/26/2007	11831	Larry Caplinger	Refunds		25.40			43,005.69
06/26/2007	11832	Chillicothe Post Office	Postage and Delivery		26.00	X		42,979.69
06/26/2007	11833	Aaron Cooper	Refunds		32.50			42,947.19
06/26/2007	11834	Eric Crump	Refunds		106.64	X		42,840.55
06/26/2007	11835	Tina Dearth	Refunds		30.00	X		42,810.55
06/26/2007	11836	Donald Daniels	Refunds		53.00	X		42,757.55
06/26/2007	11837	Heather Harless	Refunds		105.60	X		42,651.95
06/26/2007	11838	Thomas Darst	Refunds		36.00	X		42,615.95
06/26/2007	11839	Patty Draise	Refunds		117.00	X		42,498.95
06/26/2007	11840	Othella Hughes	Refunds		5.00	X		42,493.95
06/26/2007	11841	Bradley Jadwin	Refunds		88.00	X		42,405.95
06/26/2007	11842	Peggy Dunn	Refunds		10.20	X		42,395.75
06/26/2007	11843	Mayela Espinoza	Refunds		37.20	X		42,358.55
06/26/2007	11844	Lora Francis	Refunds		6.40			42,352.15
06/26/2007	11845	Jessica Fremder	Refunds		13.20	X		42,338.95

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06/26/2007	11846	Carol Fulton	Refunds		15.00	X		42,323.95
06/26/2007	11847	David Goode	Refunds		42.00	X		42,281.95
06/26/2007	11848	David Hannah	Refunds		15.00	X		42,266.95
06/26/2007	11849	Tina Forshey	Refunds		24.60	X		42,242.35
06/26/2007	11850	Franklin Haynes	Refunds		36.00	X		42,206.35
06/26/2007	11851	Helmut Heisig	Refunds		62.00	X		42,144.35
06/26/2007	11852	Paul Hobbs	Refunds		37.00	X		42,107.35
06/26/2007	11853	Marsha Hutchison	Refunds		37.00			42,070.35
06/26/2007	11854	Miranda Johnson	Refunds		80.00	X		41,990.35
06/26/2007	11855	James Jenkins	Refunds		34.00	X		41,956.35
06/26/2007	11856	Shannon Jenkins	Refunds		54.20	X		41,902.15
06/26/2007	11857	Charles Jones	Refunds		22.00			41,880.15
06/26/2007	11858	Craig Thornton	Refunds		20.00	X		41,860.15
06/26/2007	11859	Dwight Kent	Refunds		209.40	X		41,650.75
06/26/2007	11860	Allen Seymour	Refunds	Refund	23.35	X		41,627.40
06/26/2007	11861	Ami Shaffer	Refunds		127.00	X		41,500.40
06/26/2007	11862	Brenda Jordan	Refunds		5.40			41,495.00
06/26/2007	11863	Brad Lykins	Refunds		15.00	X		41,480.00
06/26/2007	11864	Chad Knight	Refunds		5.40			41,474.60
06/26/2007	11865	Ronald Lawson	Refunds		10.00	X		41,464.60
06/26/2007	11866	Benjamin Rhoads	Refunds		5.00			41,459.60
06/26/2007	11867	Stacey Pennington	Refunds		15.00	X		41,444.60
06/26/2007	11868	Dwayne Newman	Refunds		5.00	X		41,439.60
06/26/2007	11869	Christina Hines	Refunds		18.75	X		41,420.85
06/26/2007	11870	Alan Mead	Refunds		15.33			41,405.52
06/26/2007	11871	Michael Moore	Refunds		9.20	X		41,396.32
06/26/2007	11872	Mark Shumaker	Refunds		10.00	X		41,386.32
06/26/2007	11873	Kari Skaggs	Refunds		5.00	X		41,381.32
06/27/2007			-split-	Deposit		X	809.00	42,190.32
06/27/2007	11874	Office Max	Office Supplies		84.81	X		42,105.51
06/27/2007	11875	Dentsply	Office Supplies		2,480.28	X		39,625.23
06/28/2007			-split-	Deposit		X	560.00	40,185.23
06/29/2007			Professional Fees	Deposit		X	827.00	41,012.23
06/29/2007			Professional Fees	Deposit		X	3,737.27	44,749.50
06/30/2007	debit	Kingston National B...	-split-		244.00	X		44,505.50
06/30/2007	debit	Kingston National B...	Professional Fees		141.26	X		44,364.24
06/30/2007	11876	Alexis Gilbert	-split-		1,399.78	X		42,964.46
06/30/2007	11877	Amanda Haines	-split-		507.52	X		42,456.94
06/30/2007	11878	Amy J. Kirkbride	-split-		644.44	X		41,812.50
06/30/2007	11879	Heather J Evans	-split-		350.25	X		41,462.25

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06/30/2007	11880	Kathryn A Hoyt	-split-		346.16	X		41,116.09
06/30/2007	11881	Kelly M Himelrick	-split-		562.16	X		40,553.93
06/30/2007	11882	Kristina M. Kingery	-split-		770.02	X		39,783.91
06/30/2007	11883	Margaret T Ford	-split-		827.70	X		38,956.21
06/30/2007	11884	Mirna G Lee	-split-		571.42	X		38,384.79
06/30/2007	11885	Samantha K Strausba...	-split-		601.94	X		37,782.85
06/30/2007	11886	Sheryl Roseberry	-split-		637.80	X		37,145.05
06/30/2007	11887	Stephanie A. Tesi	-split-		877.79	X		36,267.26
06/30/2007	11888	Stephanie G. Dresbach	-split-		424.15	X		35,843.11
06/30/2007	11889	Tiya R Lewis	-split-		507.11	X		35,336.00
06/30/2007	11890	Kingston National B...	-split-	31-1795806	2,667.42	X		32,668.58
06/30/2007	11891	Steven W. Huber D....	-split-		1,286.29	X		31,382.29
06/30/2007	11892	Dr. John B. Davis	Contract		5,049.08	X		26,333.21
06/30/2007	11893	Ronald Thompson	-split-	Invoice	650.00	X		25,683.21
06/30/2007	11894	Aramark	-split-		151.95	X		25,531.26
06/30/2007	11895	Weedoowindoze	Repair and Maintenance		48.15	X		25,483.11
06/30/2007	11896	Gordon Flesch Comp...	-split-	Model L1641 ...	137.76	X		25,345.35
06/30/2007	11897	Kingston National B...	-split-	July	4,019.44	X		21,325.91
06/30/2007	11898	HPSC	Loan Payment Patterso...		10,000.00			11,325.91
06/30/2007	11899	HPSC	Loan Payment Patterso...		10,000.00			1,325.91
06/30/2007	11900	HPSC	Loan Payment Patterso...		4,000.00			-2,674.09
07/02/2007			-split-	Deposit		X	8,746.59	6,072.50
07/02/2007			Professional Fees	Deposit		X	67.20	6,139.70
07/03/2007			Professional Fees	Deposit		X	534.80	6,674.50
07/05/2007			-split-	Deposit		X	265.88	6,940.38
07/05/2007			Professional Fees	Deposit		X	4,084.52	11,024.90
07/06/2007			-split-	Deposit		X	1,241.86	12,266.76
07/06/2007	11901	Wal Mart	Office Supplies		42.03	X		12,224.73
07/06/2007	11902	Sullivan-Schein Dental	Supplies:Lab		1,309.66	X		10,915.07
07/09/2007			Professional Fees	Deposit		X	1,432.23	12,347.30
07/09/2007			Professional Fees	Deposit		X	2,298.05	14,645.35
07/09/2007			Professional Fees	Deposit		X	4,825.34	19,470.69
07/09/2007	11903	Chillicothe Post Office	-split-		161.87	X		19,308.82
07/10/2007			Professional Fees	Deposit		X	171.00	19,479.82
07/10/2007			-split-	Deposit		X	1,101.52	20,581.34
07/10/2007	11904	Sullivan-Schein Dental	Supplies:Lab		611.51	X		19,969.83
07/11/2007			-split-	Deposit		X	946.40	20,916.23
07/11/2007			Professional Fees	Deposit		X	932.00	21,848.23
07/11/2007	11905	Donatos	Education and Meetings		60.00	X		21,788.23
07/11/2007	11906	Sullivan-Schein Dental	Supplies:Lab		80.88	X		21,707.35

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07/12/2007			-split-	Deposit		X	71.00	21,778.35
07/12/2007			-split-	Deposit		X	2,155.93	23,934.28
07/13/2007			-split-	Deposit		X	818.80	24,753.08
07/13/2007			Professional Fees	Deposit		X	129.20	24,882.28
07/13/2007	11907	Sam McGraw	Repair and Maintenance		180.00	X		24,702.28
07/16/2007			Professional Fees	Deposit		X	6,245.04	30,947.32
07/16/2007			Professional Fees	Deposit		X	7,154.06	38,101.38
07/16/2007	11908	Alexis Gilbert	-split-		1,399.79	X		36,701.59
07/16/2007	11909	Amanda Haines	-split-		715.60	X		35,985.99
07/16/2007	11910	Amy J. Kirkbride	-split-		683.34	X		35,302.65
07/16/2007	11911	Brandy Igou	-split-		570.93	X		34,731.72
07/16/2007	11912	Brooke Sowers	-split-		187.69	X		34,544.03
07/16/2007	11913	Heather J Evans	-split-		685.26	X		33,858.77
07/16/2007	11914	Kathryn A Hoyt	-split-		149.75	X		33,709.02
07/16/2007	11915	Kelly M Himelrick	-split-		584.85	X		33,124.17
07/16/2007	11916	Kristina M. Kingery	-split-		694.69	X		32,429.48
07/16/2007	11917	Margaret T Ford	-split-		838.43	X		31,591.05
07/16/2007	11918	Mirna G Lee	-split-		561.77	X		31,029.28
07/16/2007	11919	Peggy A Misita	-split-		360.64	X		30,668.64
07/16/2007	11920	Samantha K Strausba...	-split-		725.92	X		29,942.72
07/16/2007	11921	Sheryl Roseberry	-split-		482.69	X		29,460.03
07/16/2007	11922	Stephanie A. Tesi	-split-		953.45	X		28,506.58
07/16/2007	11923	Stephanie G. Dresbach	-split-		1,179.79	X		27,326.79
07/16/2007	11924	Tiya R Lewis	-split-		551.67	X		26,775.12
07/16/2007	11925	Kingston National B...	-split-	31-1795806	3,496.42	X		23,278.70
07/16/2007	11926	Ohio Urgent Dental ...	-split-		6,988.64	X		16,290.06
07/17/2007			Professional Fees	Deposit		X	189.00	16,479.06
07/17/2007			-split-	Deposit		X	540.00	17,019.06
07/17/2007	11927	Stephanie A. Tesi	-split-		882.06	X		16,137.00
07/17/2007	11928	Sullivan-Schein Dental	Supplies:Lab		107.33	X		16,029.67
07/17/2007	11929	Ohio Department of ...	Payroll Liabilities:State...	52 572500	2,585.31	X		13,444.36
07/17/2007	11930	Ohio School District ...	Payroll Liabilities	52 572500	174.02	X		13,270.34
07/17/2007	11931	Chillicothe Income T...	Payroll Liabilities:City ...		1,631.49	X		11,638.85
07/17/2007	11932	Ohio Department of J...	Payroll Liabilities:State...	1205916-00-2	1,696.17	X		9,942.68
07/17/2007	11933	Simon DeChatlet	Lab Services		4,000.00	X		5,942.68
07/17/2007	11934	Sullivan-Schein Dental	Supplies:Lab		889.93	X		5,052.75
07/18/2007			-split-	Deposit		X	2,348.56	7,401.31
07/18/2007			Professional Fees	Deposit		X	3,280.04	10,681.35
07/18/2007	11935	Sullivan-Schein Dental	Supplies:Lab		73.30	X		10,608.05
07/18/2007	11936	Chillicothe Post Office	Postage and Delivery		78.00	X		10,530.05

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07/18/2007	11937	Chillicothe Post Office	Postage and Delivery		52.00	X		10,478.05
07/19/2007			-split-	Deposit		X	1,738.36	12,216.41
07/19/2007			Professional Fees	Deposit		X	486.60	12,703.01
07/19/2007	11938	Sullivan-Schein Dental	Supplies:Lab		206.94	X		12,496.07
07/19/2007	11939	Patterson Dental Sup...	Computer support		902.54	X		11,593.53
07/20/2007			-split-	Deposit		X	1,277.73	12,871.26
07/20/2007			Professional Fees	Deposit		X	475.00	13,346.26
07/20/2007	11940	Ronald Thompson	-split-	Invoice	872.50	X		12,473.76
07/20/2007	11941	Wal Mart	Office Supplies		64.00	X		12,409.76
07/20/2007	11942	Chillicothe Fire & Se...	-split-		64.04	X		12,345.72
07/20/2007	11943	American Electric Po...	-split-		854.61	X		11,491.11
07/20/2007	11944	Capitol One	-split-		250.00	X		11,241.11
07/20/2007	11945	Sprint PCS	Telephone		141.57	X		11,099.54
07/20/2007	11946	Verizon	-split-		794.60	X		10,304.94
07/20/2007	11947	Patterson Dental Sup...	Computer support	636753586	202.22	X		10,102.72
07/20/2007	11948	Ohio Physicians Heal...	Draw		90.00	X		10,012.72
07/20/2007	11949	Chillicothe Utilities	-split-		590.17	X		9,422.55
07/20/2007	11950	Culligan	Office Supplies	#8454 #8456	17.00	X		9,405.55
07/20/2007	11951	Patterson Dental Sup...	-split-	73504 and 52...	780.54	X		8,625.01
07/20/2007	11952	Richard Lockwood DO	Draw		106.00	X		8,519.01
07/20/2007	11953	Southern Ohio Com...	Telephone		16.07	X		8,502.94
07/20/2007	11954	State Life Insurance	Insurance:Life		234.86	X		8,268.08
07/20/2007	11955	Rumpke	-split-		81.79	X		8,186.29
07/20/2007	11956	Thomas Gas Service	Supplies		77.90	X		8,108.39
07/20/2007	11957	Mark Frazier	-split-		780.00	X		7,328.39
07/20/2007	11958	Aramark	-split-		50.65	X		7,277.74
07/20/2007	11959	Dr. John B. Davis	Contract		3,063.73	X		4,214.01
07/20/2007	11960	Columbia Gas	Utilities		112.41	X		4,101.60
07/20/2007	11961	Xemax	Lab Services		142.60	X		3,959.00
07/20/2007	11962	ETS Dental	Contract		3,200.00	X		759.00
07/20/2007	11963	Dentsply	Office Supplies		458.64	X		300.36
07/20/2007	11964	Office Max	Office Supplies	VOID:	427.99	X		-127.63
07/23/2007			-split-	Deposit		X	7,293.82	7,166.19
07/23/2007			-split-	Deposit		X	3,382.37	10,548.56
07/24/2007			Professional Fees	Deposit		X	453.60	11,002.16
07/24/2007			Professional Fees	Deposit		X	376.46	11,378.62
07/24/2007	11965	Stephanie Dresbach	Office Supplies		22.81	X		11,355.81
07/24/2007	11966	Wal Mart	Office Supplies		34.09	X		11,321.72
07/25/2007			-split-	Deposit		X	425.20	11,746.92
07/25/2007	11967	Jerry's Computer Ser...	Computer support		190.00	X		11,556.92

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07/26/2007			-split-	Deposit		X	4,401.26	15,958.18
07/26/2007			-split-	Deposit		X	514.90	16,473.08
07/27/2007			-split-	Deposit		X	6,597.19	23,070.27
07/27/2007			-split-	Deposit		X	2,278.68	25,348.95
07/27/2007	11968	Chillicothe Post Office	Postage and Delivery		49.54	X		25,299.41
07/27/2007	11969	Chillicothe Post Office	Postage and Delivery		137.76	X		25,161.65
07/30/2007			Professional Fees	Deposit		X	9,396.06	34,557.71
07/30/2007			Professional Fees	Deposit		X	8,972.31	43,530.02
07/30/2007	11970	Alexis Gilbert	-split-		1,399.79	X		42,130.23
07/30/2007	11971	Amanda Haines	-split-		952.04	X		41,178.19
07/30/2007	11972	Amy J. Kirkbride	-split-		684.81	X		40,493.38
07/30/2007	11973	Brandy Igou	-split-		186.35	X		40,307.03
07/30/2007	11974	Brooke Sowers	-split-		446.81	X		39,860.22
07/30/2007	11975	Heather J Evans	-split-		687.10	X		39,173.12
07/30/2007	11976	Kathryn A Hoyt	-split-		238.37	X		38,934.75
07/30/2007	11977	Kelly M Himelrick	-split-		665.85	X		38,268.90
07/30/2007	11978	Kristina M. Kingery	-split-		718.84	X		37,550.06
07/30/2007	11979	Margaret T Ford	-split-		809.21	X		36,740.85
07/30/2007	11980	Mirna G Lee	-split-		562.50	X		36,178.35
07/30/2007	11981	Peggy A Misita	-split-		361.88	X		35,816.47
07/30/2007	11982	Samantha K Strausba...	-split-		730.95	X		35,085.52
07/30/2007	11983	Sheryl Roseberry	-split-		415.82	X		34,669.70
07/30/2007	11984	Stephanie A. Tesi	-split-		1,115.33	X		33,554.37
07/30/2007	11985	Stephanie G. Dresbach	-split-		1,144.70	X		32,409.67
07/30/2007	11986	Tiya R Lewis	-split-		599.88	X		31,809.79
07/30/2007	11987	Julie Wetzal	-split-		399.29	X		31,410.50
07/30/2007	11988	Kingston National B...	-split-	31-1795806	3,979.92	X		27,430.58
07/30/2007	11989	Dr. Christine Marquard	Contract		551.00	X		26,879.58
07/30/2007	11991	Chris Sautter	Contract		176.00	X		26,703.58
07/31/2007			-split-	Deposit		X	1,137.67	27,841.25
07/31/2007			Professional Fees	Deposit		X	204.80	28,046.05
07/31/2007			Professional Fees	Deposit		X	9.00	28,055.05
07/31/2007			Professional Fees	Deposit		X	335.05	28,390.10
07/31/2007	11990	Chillicothe Post Office	Postage and Delivery		80.00	X		28,310.10
07/31/2007	11992	Wal Mart	Office Supplies		24.90	X		28,285.20
07/31/2007	11993	Sullivan-Schein Dental	Supplies:Lab		648.29	X		27,636.91
07/31/2007	11994	Medical Mutual of ...	-split-	#863318-100	2,958.14	X		24,678.77
07/31/2007	11995	VSP	-split-	vision insurance	94.44	X		24,584.33
07/31/2007	11996	The Hartford	-split-		4,324.00	X		20,260.33
07/31/2007	11997	Ohio Urgent Dental ...	-split-		11,286.49	X		8,973.84

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Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
07/31/2007	11998	Dr. John B. Davis	Contract		2,733.22	X		6,240.62
07/31/2007	11999	Simon DeChatlet	Lab Services		2,000.00	X		4,240.62
07/31/2007	12000	Horizon Chillicothe ...	-split-	0158224	2,333.57	X		1,907.05
07/31/2007	12001	Ohio Physicians Heal...	Draw		450.00	X		1,457.05
07/31/2007	12002	Medical Protective Fi...	-split-		1,171.00	X		286.05
07/31/2007	12003	Chillicothe Florel	Meals and Entertainment		31.46	X		254.59
07/31/2007	12004	Kingston National B...	-split-	102442	4,019.44	X		-3,764.85
07/31/2007	12005	HPSC	Loan Payment Patterso...		4,000.00			-7,764.85
07/31/2007	12006	Kingston National B...	-split-		118.99	X		-7,883.84
08/01/2007			Professional Fees	Deposit		X	3,382.59	-4,501.25
08/01/2007			Professional Fees	Deposit		X	6,651.86	2,150.61
08/01/2007			Professional Fees	Deposit			115.60	2,266.21
08/01/2007			Professional Fees	Deposit		X	3.00	2,269.21
08/01/2007	debit	Kingston National B...	Bank Charge		10.00	X		2,259.21
08/01/2007	12007	Sullivan-Schein Dental	Supplies:Lab		1,543.03	X		716.18
08/01/2007	12008	Dr. Alison Siegel	Contract		551.00	X		165.18
08/01/2007	12009	Chillicothe Post Office	Postage and Delivery		32.50	X		132.68
08/01/2007	12010	Office City	Office Supplies		34.23	X		98.45
08/01/2007	12012	Chillicothe Post Office	Postage and Delivery		16.25	X		82.20
08/01/2007	12013	Kingston National B...	-split-		150.00	X		-67.80
08/02/2007			-split-	Deposit		X	2,444.81	2,377.01
08/02/2007			-split-	Deposit		X	4,043.31	6,420.32
08/02/2007	12014	Office City	Office Supplies		400.67	X		6,019.65
08/02/2007	12015	Sullivan-Schein Dental	Supplies:Lab		131.55	X		5,888.10
08/02/2007	12016	Sullivan-Schein Dental	Supplies:Lab		14.21	X		5,873.89
08/02/2007	12017	Patterson Dental Sup...	Office Supplies		40.07	X		5,833.82
08/02/2007	12018	AAA	-split-		400.00	X		5,433.82
08/03/2007			-split-	Deposit		X	11,110.44	16,544.26
08/03/2007			-split-	Deposit		X	198.90	16,743.16
08/03/2007	debit	Kingston National B...	Bank Charge		83.11	X		16,660.05
08/03/2007	12019	Sullivan-Schein Dental	Supplies:Lab		452.87	X		16,207.18
08/03/2007	12020	Office City	Office Supplies		57.80	X		16,149.38
08/06/2007			-split-	Deposit		X	369.00	16,518.38
08/06/2007			-split-	Deposit		X	4,176.94	20,695.32
08/07/2007			-split-	Deposit		X	719.63	21,414.95
08/07/2007			-split-	Deposit		X	1,496.10	22,911.05
08/08/2007			-split-	Deposit		X	1,168.40	24,079.45
08/09/2007			-split-	Deposit		X	6,912.74	30,992.19
08/09/2007			-split-	Deposit		X	2,459.80	33,451.99
08/10/2007			-split-	Deposit		X	5,732.36	39,184.35

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08/10/2007			-split-	Deposit		X	10,980.30	50,164.65
08/13/2007			Other Income	Deposit		X	427.99	50,592.64
08/13/2007			-split-	Deposit		X	9,274.83	59,867.47
08/13/2007			-split-	Deposit		X	5,608.62	65,476.09
08/13/2007		Alison Siegel	-split-	VOID:		X		65,476.09
08/13/2007	12021	Dentsply	Office Supplies		575.78	X		64,900.31
08/13/2007	12022	Alexis Gilbert	-split-		1,399.79	X		63,500.52
08/13/2007	12023	Amanda Haines	-split-		847.25	X		62,653.27
08/13/2007	12024	Amy J. Kirkbride	-split-		674.63	X		61,978.64
08/13/2007	12025	Brandy Igou	-split-		666.15	X		61,312.49
08/13/2007	12026	Brooke Sowers	-split-		553.69	X		60,758.80
08/13/2007	12027	Heather J Evans	-split-		722.36	X		60,036.44
08/13/2007	12028	Julie Wetzel	-split-		788.81	X		59,247.63
08/13/2007	12029	Kathryn A Hoyt	-split-		414.09	X		58,833.54
08/13/2007	12030	Kelly M Himelrick	-split-		755.04	X		58,078.50
08/13/2007	12031	Kristina M. Kingery	-split-		742.73	X		57,335.77
08/13/2007	12032	Margaret T Ford	-split-		839.55	X		56,496.22
08/13/2007	12033	Mirna G Lee	-split-		428.72	X		56,067.50
08/13/2007	12034	Peggy A Misita	-split-		91.28	X		55,976.22
08/13/2007	12035	Samantha K Strausba...	-split-		699.84	X		55,276.38
08/13/2007	12036	Stacie Traylor	-split-		721.28	X		54,555.10
08/13/2007	12037	Stephanie A. Tesi	-split-		986.44	X		53,568.66
08/13/2007	12038	Stephanie G. Dresbach	-split-		1,246.22	X		52,322.44
08/13/2007	12039	Tiya R Lewis	-split-		614.22	X		51,708.22
08/13/2007	12040	Alison Siegel	-split-		1,622.44	X		50,085.78
08/13/2007	12041	Christine Marquard	-split-		1,715.66	X		48,370.12
08/13/2007	12042	Kingston National B...	-split-	31-1795806	5,686.22	X		42,683.90
08/13/2007	12043	Aramark	-split-		101.30	X		42,582.60
08/13/2007	12044	Ronald Thompson	-split-	Invoice	975.00	X		41,607.60
08/13/2007	12045	Horizon Chillicothe ...	-split-	0028210	806.67	X		40,800.93
08/13/2007	12046	Southern Ohio Com...	Telephone		16.07	X		40,784.86
08/13/2007	12047	Rumpke	-split-		81.79	X		40,703.07
08/13/2007	12048	Greenwalt Lawncare	-split-		760.00	X		39,943.07
08/13/2007	12049	Thomas Gas Service	Supplies		196.67	X		39,746.40
08/13/2007	12050	Culligan	-split-	#8454 #8456	46.68	X		39,699.72
08/13/2007	12051	State Life Insurance	Insurance:Life		234.86	X		39,464.86
08/13/2007	12052	Darby Dental Supply...	Supplies:Lab	390024088	142.77	X		39,322.09
08/13/2007	12053	Columbia Gas	-split-		57.62	X		39,264.47
08/13/2007	12054	American Electric Po...	-split-		970.06	X		38,294.41
08/13/2007	12055	Simon DeChatlet	Lab Services		3,000.00	X		35,294.41

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08/13/2007	12056	Patterson Dental Sup...	Office Supplies	636753586	213.67	X		35,080.74
08/13/2007	12057	Medical Protective Fi...	Insurance		1,425.00	X		33,655.74
08/13/2007	12058	Verizon	-split-		208.50	X		33,447.24
08/14/2007			-split-	Deposit		X	1,910.89	35,358.13
08/14/2007			Professional Fees	Deposit		X	263.80	35,621.93
08/15/2007			Professional Fees	Deposit		X	652.60	36,274.53
08/15/2007			Professional Fees	Deposit		X	26.00	36,300.53
08/15/2007	12059	Ross Co. Jr. Fair Liv...	-split-		1,951.08	X		34,349.45
08/15/2007	12060	Darla Woods	Refunds		20.00	X		34,329.45
08/15/2007	12061	Lisa R. Brown	Refunds		91.99	X		34,237.46
08/15/2007	12062	Lisa Bray	Refunds		3.00			34,234.46
08/15/2007	12063	Amanda Black	Refunds		46.00	X		34,188.46
08/15/2007	12064	John Barker	Refunds		5.00			34,183.46
08/15/2007	12065	Rita Baker	Refunds		3.00			34,180.46
08/15/2007	12066	Karen Baker	Refunds		3.00			34,177.46
08/15/2007	12067	Nicholas Bader	Refunds		23.00	X		34,154.46
08/15/2007	12068	Randy Ayers	Refunds		242.20	X		33,912.26
08/15/2007	12069	Cosidenia Anderson	Refunds		3.00	X		33,909.26
08/15/2007	12070	Sullivan-Schein Dental	Supplies:Lab		587.94	X		33,321.32
08/16/2007			-split-	Deposit		X	934.35	34,255.67
08/16/2007			Professional Fees	Deposit		X	334.00	34,589.67
08/16/2007	12071	Dr. John B. Davis	Contract		699.34	X		33,890.33
08/16/2007	12072	Ohio Urgent Dental ...	-split-		4,029.50	X		29,860.83
08/16/2007	12073	People Weekly	-split-	#s 219517905...	102.96	X		29,757.87
08/16/2007	12074	Sprint PCS	Telephone		148.65	X		29,609.22
08/16/2007	12075	Ace Surgical Supplies	Supplies:Lab	customer #007...	86.87	X		29,522.35
08/16/2007	12076	Verizon	-split-		794.60	X		28,727.75
08/16/2007	12077	Patterson Dental Sup...	Computer support	52867 and 735...	428.30	X		28,299.45
08/16/2007	12078	Office City	Office Supplies		163.71	X		28,135.74
08/16/2007	12079	Haines Publishing, Inc.	-split-	customer#8492...	2,000.00	X		26,135.74
08/16/2007	12080	Gordon Flesch Comp...	-split-	Model L1641 ...	68.79	X		26,066.95
08/16/2007	12081	Simon DeChatlet	Lab Services		2,000.00	X		24,066.95
08/16/2007	12082	Firestone Dental Lab...	Lab Services		42.26	X		24,024.69
08/16/2007	12083	ETS Dental	Contract	September 1 pa...	3,200.00	X		20,824.69
08/16/2007	12084	Ohio Department of J...	-split-	31-1795806 / e...	678.44	X		20,146.25
08/16/2007	12085	Chillicothe Post Office	Postage and Delivery		82.00	X		20,064.25
08/16/2007	12086	Donatos	Education and Meetings		56.00	X		20,008.25
08/16/2007	12087	Sullivan-Schein Dental	Supplies:Lab		504.97	X		19,503.28
08/16/2007	12088	Wal Mart	Office Supplies		27.24	X		19,476.04
08/17/2007			Professional Fees	Deposit		X	618.41	20,094.45

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08/17/2007			Professional Fees	Deposit		X	528.70	20,623.15
08/17/2007	12089	DANB	Education and Meetings		55.00	X		20,568.15
08/17/2007	12090	Sullivan-Schein Dental	Supplies:Lab		886.47	X		19,681.68
08/17/2007	12091	Sullivan-Schein Dental	Supplies:Lab		330.10	X		19,351.58
08/20/2007			-split-	Deposit		X	9,478.07	28,829.65
08/20/2007			Professional Fees	Deposit		X	10,407.93	39,237.58
08/20/2007	12092	DANB	Education and Meetings		55.00			39,182.58
08/20/2007	12093	Richard Schoonmaker	Draw		2,500.00	X		36,682.58
08/21/2007			Professional Fees	Deposit		X	43.00	36,725.58
08/21/2007			Professional Fees	Deposit		X	6.00	36,731.58
08/22/2007			Professional Fees	Deposit		X	2,825.36	39,556.94
08/22/2007			Professional Fees	Deposit		X	4,681.71	44,238.65
08/23/2007			Professional Fees	Deposit		X	474.00	44,712.65
08/23/2007			-split-	Deposit		X	572.20	45,284.85
08/23/2007	12098	Chillicothe Post Office	Postage and Delivery		86.61	X		45,198.24
08/24/2007			-split-	Deposit		X	1,781.25	46,979.49
08/24/2007			Professional Fees	Deposit		X	7,120.76	54,100.25
08/27/2007			-split-	Deposit		X	3,426.95	57,527.20
08/27/2007			-split-	Deposit		X	8,937.77	66,464.97
08/27/2007	12094	Sullivan-Schein Dental	Supplies:Lab		32.99	X		66,431.98
08/27/2007	12095	Wal Mart	Office Supplies		65.88	X		66,366.10
08/27/2007	12096	Chillicothe Post Office	Postage and Delivery		62.40	X		66,303.70
08/27/2007	12097	Sam McGraw	Repair and Maintenance		375.00	X		65,928.70
08/27/2007	12099	Alexis Gilbert	-split-		2,007.87	X		63,920.83
08/27/2007	12100	Alison Siegel	-split-		3,183.06			60,737.77
08/27/2007	12101	Amanda Haines	-split-		1,305.15	X		59,432.62
08/27/2007	12102	Amy J. Kirkbride	-split-		670.54	X		58,762.08
08/27/2007	12103	Brooke Sowers	-split-		615.84	X		58,146.24
08/27/2007	12104	Christine Marquard	-split-		2,810.67	X		55,335.57
08/27/2007	12105	Heather J Evans	-split-		783.73	X		54,551.84
08/27/2007	12106	Julie Wetzel	-split-		587.90	X		53,963.94
08/27/2007	12107	Kathryn A Hoyt	-split-		249.53	X		53,714.41
08/27/2007	12108	Kelly M Himelrick	-split-		690.13	X		53,024.28
08/27/2007	12109	Kristina M. Kingery	-split-		735.85	X		52,288.43
08/27/2007	12110	Margaret T Ford	-split-		920.72	X		51,367.71
08/27/2007	12111	Mirna G Lee	-split-		442.61	X		50,925.10
08/27/2007	12112	Peggy A Misita	-split-		612.59	X		50,312.51
08/27/2007	12113	Samantha K Strausba...	-split-		730.62	X		49,581.89
08/27/2007	12114	Stacie Traylor	-split-		704.59	X		48,877.30
08/27/2007	12115	Stephanie A. Tesi	-split-		1,008.97	X		47,868.33

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08/27/2007	12116	Stephanie G. Dresbach	-split-		1,160.43	X		46,707.90
08/27/2007	12117	Tiya R Lewis	-split-		511.65			46,196.25
08/27/2007	12118	Kingston National B...	-split-	31-1795806	8,144.10	X		38,052.15
08/28/2007			-split-	Deposit		X	316.00	38,368.15
08/28/2007			-split-	Deposit		X	807.00	39,175.15
08/28/2007	12119	Simon DeChatlet	Lab Services		2,000.00	X		37,175.15
08/28/2007	12120	HPSC	-split-	VOID:		X		37,175.15
08/28/2007	12120	HPSC	-split-		7,000.00			30,175.15
08/28/2007	12121	Ronald Thompson	-split-	Invoice	650.00	X		29,525.15
08/29/2007			-split-	Deposit		X	4,601.53	34,126.68
08/29/2007			-split-	Deposit		X	2,182.62	36,309.30
08/29/2007	12122	Medical Protective Fi...	Insurance		164.00			36,145.30
08/29/2007	12123	Aramark	-split-		50.65			36,094.65
08/29/2007	12124	Personal Concepts	-split-		176.75			35,917.90
08/29/2007	12125	Sullivan-Schein Dental	Supplies:Lab		874.94			35,042.96
08/29/2007	12126	Horizon Chillicothe ...	-split-	0158224	2,374.65			32,668.31
08/29/2007	12127	VSP	-split-	vision insurance	15.21			32,653.10
08/29/2007	12128	Verizon	-split-		417.00			32,236.10
08/29/2007	12129	Jerald A. Byers, Trea...	Taxes:Property		818.82			31,417.28
08/29/2007	12130	Capitol One	-split-		50.00			31,367.28
08/29/2007	12131	Haines Publishing, Inc.	-split-	customer#8492...	2,000.00			29,367.28
08/29/2007	12132	Patterson Dental Sup...	Office Supplies	636215379	246.04			29,121.24
08/29/2007	12133	Bureau of Workers C...	-split-		309.07			28,812.17
08/29/2007	12135	Sullivan-Schein Dental	Supplies:Lab		1,553.80			27,258.37
08/29/2007	12136	Los Mariachi's	Education and Meetings		110.00			27,148.37
08/29/2007	12137	Wal Mart	Office Supplies		87.04			27,061.33
08/30/2007			Professional Fees	Deposit		X	321.60	27,382.93
08/30/2007			Professional Fees	Deposit		X	131.00	27,513.93
08/30/2007			Professional Fees	Deposit			1,555.00	29,068.93
08/30/2007	12138	Sullivan-Schein Dental	Supplies:Lab		1,326.71			27,742.22
08/31/2007			-split-	Deposit			2,065.81	29,808.03
08/31/2007			-split-	Deposit			1,341.65	31,149.68
08/31/2007	12139	Medical Mutual of ...	-split-	#863318-100	4,336.93			26,812.75
08/31/2007	12140	Ohio State Dental Bo...	Licenses		20.00			26,792.75
08/31/2007	12142	Dr. John B. Davis	Contract		2,875.24			23,917.51
08/31/2007	12144	Kingston National B...	-split-		4,019.44			19,898.07
08/31/2007	12145	Gordon Fleisch Comp...	-split-	Model L1641 ...	80.87			19,817.20
08/31/2007	12146	Ohio Physicians Heal...	Draw		225.00			19,592.20
08/31/2007	12147	Ronald Thompson	-split-	Invoice	325.00			19,267.20
08/31/2007	12148	Horizon Chillicothe ...	-split-	0028210	836.60			18,430.60

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08/31/2007	12149	Simon DeChatlet	Lab Services		2,000.00			16,430.60
08/31/2007	12150	Sullivan-Schein Dental	Supplies:Lab		570.25			15,860.35
08/31/2007	12151	HPSC	-split-	VOID:		X		15,860.35
08/31/2007	12152	HPSC	-split-		10,000.00			5,860.35
08/31/2007	13		Reconciliation Discrep...	Balance Adjust...		X	0.20	5,860.55
09/04/2007			-split-	Deposit			1,469.26	7,329.81
09/04/2007			-split-	Deposit			4,710.16	12,039.97
09/04/2007	12143	Wal Mart	Office Supplies		49.20			11,990.77
09/05/2007			Professional Fees	Deposit			65.50	12,056.27
09/05/2007			Professional Fees	Deposit			68.80	12,125.07
09/06/2007			-split-	Deposit			605.80	12,730.87
09/06/2007			Professional Fees	Deposit			719.30	13,450.17
09/06/2007	12153	Siebert-Keck Ins. Ag...	Insurance		7,856.36			5,593.81
09/06/2007	12154	Chillicothe Post Office	Postage and Delivery		57.77			5,536.04
09/07/2007			-split-	Deposit			2,714.26	8,250.30
09/07/2007			-split-	Deposit			4,200.74	12,451.04
09/07/2007	12155	Donatos	-split-		100.00			12,351.04
09/07/2007	12156	Chris Sautter	Contract		150.00			12,201.04
09/07/2007	12157	Rita Gearhart	Contract		192.00			12,009.04
09/10/2007			-split-	Deposit			15,178.46	27,187.50
09/10/2007			Professional Fees	Deposit			6,188.65	33,376.15
09/10/2007	12158	Karen Daw	-split-		800.00			32,576.15
09/10/2007	12159	Alexis Gilbert	-split-		1,459.56			31,116.59
09/10/2007	12160	Alison Siegel	-split-		3,850.21			27,266.38
09/10/2007	12161	Amanda Haines	-split-		862.17			26,404.21
09/10/2007	12162	Amy J. Kirkbride	-split-		691.58			25,712.63
09/10/2007	12163	Brooke Sowers	-split-		645.14			25,067.49
09/10/2007	12164	Christine Marquard	-split-		3,803.50			21,263.99
09/10/2007	12165	Heather J Evans	-split-		538.44			20,725.55
09/10/2007	12166	Julie Wetzel	-split-		804.15			19,921.40
09/10/2007	12167	Kathryn A Hoyt	-split-		66.81			19,854.59
09/10/2007	12168	Kelly M Himelrick	-split-		778.78			19,075.81
09/10/2007	12169	Kristina M. Kingery	-split-		779.38			18,296.43
09/10/2007	12170	Margaret T Ford	-split-		898.63			17,397.80
09/10/2007	12171	Mirna G Lee	-split-		452.77			16,945.03
09/10/2007	12172	Peggy A Misita	-split-		625.82			16,319.21
09/10/2007	12173	Samantha K Strausba...	-split-		782.19			15,537.02
09/10/2007	12174	Stacie Traylor	-split-		671.57			14,865.45
09/10/2007	12175	Stephanie A. Tesi	-split-		1,326.72			13,538.73
09/10/2007	12176	Stephanie G. Dresbach	-split-		1,285.34			12,253.39

Southern Ohio Oral & Facial Surgeons

09/17/2007 4:11 PM

Register: Office Account

From 06/01/2007 through 09/17/2007

Sorted by: Date, Type, Number/Ref

<u>Date</u>	<u>Number</u>	<u>Payee</u>	<u>Account</u>	<u>Memo</u>	<u>Payment</u>	<u>C</u>	<u>Deposit</u>	<u>Balance</u>
09/10/2007	12177	Tiya R Lewis	-split-		692.94			11,560.45
09/10/2007	12178	Kingston National B...	-split-	31-1795806	9,111.12			2,449.33
09/10/2007	12179	Sullivan-Schein Dental	Supplies:Lab		655.05			1,794.28
09/11/2007			Professional Fees	Deposit			82.00	1,876.28
09/11/2007			-split-	Deposit			2,589.00	4,465.28
09/11/2007	12180	Shannon Bond	Contract		224.00			4,241.28
09/12/2007			-split-	Deposit			215.40	4,456.68
09/12/2007	12181	Yvonne McQueary	Refunds		310.00			4,146.68
09/12/2007	12182	Wal Mart	Office Supplies		45.24			4,101.44
09/12/2007	12183	Ross County Conser...	Donations		500.00			3,601.44
09/12/2007	12184	Sullivan-Schein Dental	Supplies:Lab		886.00			2,715.44
09/13/2007			-split-	Deposit			1,716.54	4,431.98
09/13/2007			Professional Fees	Deposit			1,379.00	5,810.98
09/14/2007			-split-	Deposit			6,605.11	12,416.09
09/14/2007			-split-	Deposit			2,442.80	14,858.89
09/17/2007	12185	Sullivan-Schein Dental	Supplies:Lab		2,880.22			11,978.67
09/17/2007	12186	Wal Mart	Office Supplies		90.14			11,888.53
09/17/2007	12187	Richard Schoonmaker	Draw		2,000.00			9,888.53
09/17/2007	12188	Chris Sautter	Contract		150.00			9,738.53

United States Bankruptcy Court
Southern District of Ohio

In re Southern Ohio Oral & Facial Surgeons, Inc.
Debtor

Case No. _____

Chapter 11

LIST OF EQUITY SECURITY HOLDERS

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

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Richard J. Schoonmaker DMD 211 Sunrush Blvd. Chillicothe, OH 45601	Common Stock	100%	Owner

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 September 17, 2007

Signature /s/ Richard J. Schoonmaker DMD
Richard J. Schoonmaker DMD
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.

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2nd Floor
Boston, MA 02109-1803

Idearc Media
PO Box 619810
Dallas, TX 75261-9810

Minesh A. Patel DDS
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Chillicothe, OH 45601

Ohio Department of Job and Family Serv.
Attn Collection Department
PO Box 923
Columbus, OH 43216

Ohio Department of Job and Family Svcs.
30 East Broad Street
Columbus, OH 43215-3414

Ohio Department of Job and Family Svcs.
Fiscal Services Accounts Receivable Unit
Attn SUR Program
PO Box 182367
Columbus, OH 43218-2367

Ohio Department of Jobs and Family Svcs.
PO Box 1618
Columbus, OH 43216-1618

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Patterson Dental
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Chicago, IL 60673-1250

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**United States Bankruptcy Court
Southern District of Ohio**

In re Southern Ohio Oral & Facial Surgeons, Inc.
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 Southern Ohio Oral & Facial Surgeons, Inc. 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:

Richard J. Schoonmaker DMD
211 Sunrush Blvd.
Chillicothe, OH 45601

None [*Check if applicable*]

September 17, 2007
Date

/s/ David M. Whittaker Esq.
David M. Whittaker Esq. 0019307
Signature of Attorney or Litigant
Counsel for Southern Ohio Oral & Facial Surgeons, Inc.
Bricker & Eckler LLP
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Columbus, OH 43215
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