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UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF PENNSYLVANIA

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IN RE:	:
PATELKA DENTAL MANAGEMENT, LLC,	: CASE NO: 16-14743 (MDC) : SMALL BUSINESS CASE UNDER
	. SMALL BUSINESS CASE UNDER
DEBTOR.	: CHAPTER 11
	_
DISCLOSURE STATEMENT OF IGO DENTAL MANAGEMENT, LLC, D	

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I. INTRODUCTION

This is the disclosure statement (the "Disclosure Statement") presented by Igor Kutovoy (the "Plan Proponent"), a general unsecured creditor, in the small business chapter 11 case of Patelka Dental Management, LLC (the "Debtor"). This Disclosure Statement contains information about the Debtor and describes the Chapter 11 Plan of Reorganization, dated December 13, 2017 (the "Plan") filed by the Plan Proponent. A full copy of the Plan is attached to this Disclosure Statement as Exhibit A. Your rights may be affected. You should read the Plan and this Disclosure Statement carefully and discuss them with your attorney. If you do not have an attorney, you may wish to consult one.

The proposed distributions under the Plan are discussed at pages 10-16 of this Disclosure Statement. General unsecured creditors are classified in Class 7. It is anticipated that allowed claims in Class 7 will receive a distribution on account of their allowed claims, based on the Debtor's financial projections and anticipated future revenue stream, to be distributed as follows: for each of calendar years 2018 through 2022, to the extent that the Debtor's gross annual revenues exceed \$2,200,000, after payment of operating expenses and claims in Classes 1 through 6 and the unclassified claims, Class 7 creditors will receive a pro rata share of 50% of the net annual revenues.

A. Purpose of This Document

This Disclosure Statement describes:

- The Debtor and significant events during the bankruptcy case,
- How the Plan proposes to treat claims or equity interests of the type you hold (i.e., what you will receive on your claim or equity interest if the plan is confirmed),
- Who can vote on or object to the Plan,
- What factors the Bankruptcy Court (the "Court") will consider when deciding whether to confirm the Plan,
- Why The Plan Proponent believes the Plan is feasible, and how the treatment of your claim or equity interest under the Plan compares to what you would receive on your claim or equity interest in liquidation, and
- The effect of confirmation of the Plan.

Be sure to read the Plan as well as the Disclosure Statement. This Disclosure Statement describes the Plan, but it is the Plan itself that will, if confirmed, establish your rights.

B. <u>Deadlines for Voting and Objecting; Date of Plan Confirmation Hearing</u>

The Court has not yet confirmed the Plan described in this Disclosure Statement. This section describes the procedures pursuant to which the Plan will or will not be confirmed.

1. <u>Time and Place of the Hearing to Confirm The Plan</u>

The hearing at which the Court will determine whether to confirm the Plan will take place on **January 24, 2018**, at 11:00 a.m., in Courtroom #2, before the Honorable Magdeline D. Coleman, at the United States Bankruptcy Court, 900 Market St., Philadelphia, PA 19107.

2. Deadline For Voting to Accept or Reject the Plan

If you are entitled to vote to accept or reject the Plan, vote on the enclosed ballot and return the ballot in the enclosed envelope to Joseph Vaccaro, Esq., 5908 Torresdale Ave., Philadelphia, PA 19135. See section IV.A. below for a discussion of voting eligibility requirements.

Your ballot must be received by **January 12, 2018** or it will not be counted.

3. Deadline For Objecting to Confirmation of the Plan

Objections to confirmation of the Plan must be filed with the Court and served upon Joseph Vaccaro, Esq., 5908 Torresdale Ave., Philadelphia, PA 19135, Anne M. Aaronson, Esq., Dilworth Paxson LLP, 1500 Market St., Suite 3500E, Philadelphia, PA 19102 and the Office of the United States Trustee, 833 Chestnut St., Suite 500, Philadelphia, PA 19107 attn: Kevin Callahan by **January 16, 2018**.

4. <u>Identity of Person to Contact for More Information</u>

If you want additional information about the Plan, you should contact counsel to the Plan Proponent, Joseph Vaccaro at 215-533-5333.

C. Disclaimer

The Court has approved this Disclosure Statement as containing adequate information to enable parties affected by the Plan to make an informed judgment about its terms. The Court has not yet determined whether the Plan meets the legal requirements for confirmation, and the fact that the Court has approved this Disclosure Statement does not constitute an endorsement of the Plan by the Court, or a recommendation that it be accepted.

II. BACKGROUND

Description and History of the Debtor's Business

A. The Debtor is a limited liability company.

Since 2005, the Debtor has been in the business of managing and operating a facility through which dental services are provided to patients in Northeast Philadelphia and the surrounding Bucks County, Pennsylvania suburbs. The Debtor's practice employs and/or contracts with approximately twenty-seven (27) employees and health care professionals who provide numerous dental services, such as restoration, extractions, implants, cleanings, x-rays, braces, general endodontic surgery and prosthodontics.

The Debtor's facility services approximately 6,000 individuals and families through nearly 50,000 office visits and 15,600 dental procedures annually.

Due to a decline in revenues that resulted from significant changes to the health care laws in 2014, the Debtor's revenues were insufficient to meet its debt service obligations and on July 1, 2016, the Debtor initiated this Chapter 11 case.

B. <u>Insiders of the Debtor</u>

Svetlana Kutovoy is the current owner and operator of the Debtor. She is also employed full-time by the Debtor to manage the Debtor's operations. Ms. Kutovoy has been charged restoring the financial stability of the Debtor and effecting the Debtor's reorganization through Chapter 11. Through her efforts, the Debtor investigated various potential refinancing transactions, investments and other means by which the Debtor could resolve the financial issues that arose since the Affordable Care Act was enacted in 2014, including significant travel to various countries and meeting with various delegates to ensure the successful application to obtain investments from the United States Customs and Immigration EB-5 Investor Program (the "EB-5 Program"). Her employment and responsibilities with the Debtor following the effective date of the Plan will remain the same as existed prior to the Petition Date. It is anticipated that her ownership interests in the Debtor will be reduced upon final approval of the EB-5 Program and the capital infusion received therefrom (the "Investment Fund").

For each of the two years prior to the Petition Date, Ms. Kutovoy was paid as follows. From July 1, 2014 through June 30, 2015, Ms. Kutovoy drew a total of \$101,641.33 from the Debtor's operations and invested \$27,200 in the form of loans to the Debtor, for a net draw of \$74,441.33. From July 1, 2015 through June 30, 2016, Ms. Kutovoy drew a total of \$103,084.05 from the Debtor's operations and invested \$10,000 in the form of loans to the Debtor, for a net draw of \$93,084.05. During the pendency of this chapter 11 case, Ms. Kutovoy has been paid \$106,640.88 by the Debtor, as of July 31, 2017.

C. <u>Management and Employees of the Debtor Before and During the Bankruptcy</u>

During the two years prior to the date on which the bankruptcy petition was filed and during the Debtor's chapter 11 case, the officers, directors, managers and persons in control of the Debtor (the "Managers") were Svetlana Kutovoy and Dr. Rasikbhai Patel. Mr. Patel was semi-retired during this period and formally transferred his interests in the Debtor to Svetlana Kutovoy in late 2015. Since late 2015 and during the Debtor's chapter 11 case, Svetlana Kutovoy has been the Debtor's sole Manager.

After the effective date of the order confirming the Plan, the director and officer of the Reorganized Debtor, will be Svetlana Kutovoy until the Investment Fund set forth above is received. The responsibilities and compensation of Ms. Kutovoy are described in section II.B. of this Disclosure Statement.

As of the Petition Date, the Debtor employed twenty-seven dentists, hygienists and other employees (the "Employees"). Mr. Kutovoy, Plan Proponent, is an employee of the Debtor. The Plan Proponent, among other things, prepares the Debtor's financial reports, is responsible for

ensuring the Debtor's payment of its obligations from its revenues, and assists the Debtor's accountants with the preparation of the Debtor's tax returns. The Plan Proponent is not an officer of the Debtor. Mr. and Ms. Kutovoy are separated and have resided in separate residences since prior to the Petition Date, though they remain married to each other. The employment of each of the Employees who have remained with the Debtor since the Petition Date will be retained following the Effective Date of the Plan.

D. Events Leading to Chapter 11 Filing

As set forth above, in recent years, the Debtor has experienced a series of challenges stemming from the changes in the health care laws that affected Medicaid coverage. Given that the Debtor services an area of Pennsylvania that has a high rate of poverty and a large number of persons who rely on Medicaid for their medical and dental needs, the removal of many dental services from coverage under Medicaid significantly reduced the Debtor's revenues.

As of the Petition Date, the Debtor faced significant rental and debt service obligations owed to secured and unsecured creditors.

Prior to the Petition Date, the Debtor's current management had reduced expenses and staff and had discontinued its mobile dental facility in order to continue the Debtor's core operations. The Debtor's current management was able to reduce expenses so that it is able to meet the needs of its on-going operations; however, Chapter 11 became the only avenue by which the Debtor could develop a plan to service its historical debt.

E. Significant Events During the Bankruptcy Case

On July 1, 2016, the Debtor filed a petition for relief under chapter 11 of the Bankruptcy Code.

Since the Petition Date, the Debtor has continued to operate as debtor in possession subject to the supervision of the Bankruptcy Court and in accordance with the Bankruptcy Code. The Debtor is authorized to operate its business and manage its property in the ordinary course, with transactions outside of the ordinary course of business requiring Bankruptcy Court approval.

On the first day of the Chapter 11 Case, the Debtor filed several applications and motions seeking certain relief by virtue of so-called "first day orders." Such motions sought, among other things, the following relief:

- (a) payment of certain of the Debtor's employees' prepetition compensation, benefits and expense reimbursement amounts;
- (b) authority to utilize its cash collateral; and
- (c) approval of deposits to utility companies in exchange for prohibiting the utility companies from altering, refusing or discontinuing services postpetition on account of prepetition debt.

The Debtor is represented in the Chapter 11 Case by Dilworth Paxson LLP ("Dilworth") as counsel and Calzaretto & Company as its accountants.

Over the course of its Chapter 11 Case, the Debtor has sought to replace its existing credit facility with Bank of America through a variety of means, including refinancing through traditional and non-traditional lenders. Because, ideally, the Debtor seeks a long-term resolution of its financial needs and because the Debtor is a small business entity owned by immigrants, the Debtor has been working with the EB-5 Program toward a financial partnership (the "EB-5 Process"). The significant documentations and approvals required by EB-5 Process has delayed the Debtor's ability to resolve the Chapter 11 Case as quickly as the Debtor initially intended; however, the Debtor's application is pending and, if approved, will enhance the Debtor's business operations. It is the Plan Proponent's understanding, based on discussions with the Debtor's accountants that the Debtor is seeking a capital investment of \$500,000 and anticipates the initial receipt of a portion of that Investment Fund to assist it with funding its Plan and servicing its ongoing operational expenses within six (6) months of the date of confirmation of this Plan. As described in further detail in Article IV.D.2. hereof, the Plan Proponent believes that the Debtor's existing revenues will sustain its business and be sufficient to fund the Plan even if the Debtor is not approved for investment through the EB-5 Program.

F. Projected Recovery of Avoidable Transfers

Pursuant to The Plan Proponent's Plan, the Debtor will not pursue preference, fraudulent conveyance, or other avoidance actions.

G. Claims Objections

Except to the extent that a claim is already allowed pursuant to a final non-appealable order, The Plan Proponent is reserving the Debtor's right to object to claims. Therefore, even if your claim is allowed for voting purposes, you may not be entitled to a distribution if an objection to your claim is later upheld. The procedures for resolving disputed claims are set forth in Article V of the Plan.

H. <u>Current and Historical Financial Conditions</u>

The identity and fair market value of the estate's assets are listed in Exhibit B. Additionally, the Debtor filed bankruptcy schedules in this case that detail the Debtor's assets. Such assets include cash on hand, bank accounts and investments, deposits, insurance policies, accounts receivable, real property and other items of personal property used by the Debtor in its operations. The assets are valued on a net book basis, which are not reflective of actual values. With respect to the Debtor's personal property, values are given without consideration of any security or other interests held by creditors and parties in interest.

The Debtor's most recent financial statements issued before bankruptcy, which was filed with the Court, is set forth in Exhibit C.

The most recent post-petition operating report filed since the commencement of the Debtor's bankruptcy case is set forth in Exhibit D.

III. SUMMARY OF THE PLAN OF REORGANIZATION AND TREATMENT OF CLAIMS AND EQUITY INTERESTS

A. What is the Purpose of the Plan of Reorganization?

As required by the Code, the Plan places claims and equity interests in various classes and describes the treatment each class will receive. The Plan also states whether each class of claims or equity interests is impaired or unimpaired. If the Plan is confirmed, your recovery will be limited to the amount provided by the Plan.

B. Unclassified Claims

Certain types of claims are automatically entitled to specific treatment under the Code. They are not considered impaired, and holders of such claims do not vote on the Plan. They may, however, object if, in their view, their treatment under the Plan does not comply with that required by the Code. As such, the Plan Proponent has not placed the following claims in any class:

1. Administrative Expenses

Administrative expenses are costs or expenses of administering the Debtor's chapter 11 case, which are allowed under § 507(a)(2) of the Code. Administrative expenses also include the value of any goods sold to the Debtor in the ordinary course of business and received within 20 days before the date of the bankruptcy petition. The Code requires that all administrative expenses be paid on the effective date of the Plan, unless a particular claimant agrees to a different treatment.

The following chart lists the estimated administrative expenses owed by the Debtor, and their proposed treatment under the Plan:

ТҮРЕ	ESTIMATED AMOUNT OWED	PROPOSED TREATMENT
	Amount Owed	
Expenses Arising in the Ordinary Course of Business After the Petition Date	\$0.00. The Debtor will be current with its postpetition obligations on the effective date of the Plan.	Paid in full on the effective date of the Plan, or according to terms of obligation if later.
The Value of Goods Received in the Ordinary Course of Business Within 20 Days Before the Petition Date	\$0.00	Paid in full on the effective date of the Plan, or according to terms of obligation if later.
Professional Fees, as approved by the Court	Professionals are in the process of filing fee applications. Estimated aggregate professional fees will be approximately \$180,000.	Paid in full according to separate agreement of each professional with the Debtor.

Office of the U.S. Trustee Fees	\$4,875, plus \$325 pursuant	Paid in full on the effective
	to Proof of Claim No. 5	date of the Plan.
TOTAL	\$185,200	

2. Priority Tax Claims

Priority tax claims are unsecured income, employment, and other taxes described by § 507(a)(8) of the Code. Unless the holder of such a § 507(a)(8) priority tax claim agrees otherwise, it must receive the present value of such claim, in regular installments paid over a period not exceeding 5 years from the order of relief.

The following chart lists the estimated § 507(a)(8) priority tax claims owed by the Debtor and their proposed treatment under the Plan:

DESCRIPTION	ESTIMATED	DATE OF	TREATMENT
(NAME OF	AMOUNT OWED	ASSESSMENT	
TYPE OF TAX)			
City of	\$19,418.03 ¹	See Proof of Claim 1	Paid in full on the effective
Philadelphia			date of the Plan.
Business Receipts			
and Net Profits			
Taxes			
Pennsylvania	\$342.14	See Proof of Claim 6	Paid in full on the effective
Department of			date of the Plan.
Revenue			

C. <u>Classes of Claims and Equity Interests</u>

The following are the classes set forth in the Plan, and the proposed treatment that they will receive under the Plan:

1. <u>Classes of Secured Claims</u>

Allowed Secured Claims are claims secured by property of the Debtor's bankruptcy estate (or that are subject to setoff) to the extent allowed as secured claims under § 506 of the Code. If the value of the collateral or setoffs securing the creditor's claim is less than the amount of the creditor's allowed claim, the deficiency will be classified as a general unsecured claim.

The following chart lists all classes containing Debtor's secured prepetition claims and their proposed treatment under the Plan:

CLASS#	DESCRIPTION	INSIDE	IMPAIRMENT	TREATMENT
		(YES/NO)		

¹ I have reviewed the Debtor's records regarding its tax payments and delinquencies. The Debtor work with the City of Philadelphia to determine the actual amount owed and to be paid upon the effective date of the Plan.

2	Secured claim of:			Monthly Dmt - \$5,000
2		27		Monthly $Pmt = \$5,000$
	Bank of America, N.A.	No	Impaired	
				Pmts Begin = March
	Collateral description =			2018 and include two
	All Assets of Debtor			lump sum payments in
				the amount of
	Total Amount Claimed =			\$100,000 each.
	\$642,097.80			\$100,000 cac ii.
	\$042,077.00			Interest rate % = 5.5
	Amount to be Daid Heden			Interest rate $\% = 3.3$
	Amount to be Paid Under			
	the Plan to Satisfy Debt =			Treatment of Lien =
	\$450,000, plus interest at			Retain first priority lien
	5.5% for 65 months.			on assets of
				Reorganized Debtor
	Priority of lien = First			until paid as set forth in
				the Stipulation
				Resolving Patelka
				Dental Management,
				LLC's Obligations to
				Bank of America,
				,
				N.A., attached as
				Exhibit A to the Plan.

2. <u>Classes of Priority Unsecured Claims</u>

Certain priority claims that are referred to in §§ 507(a)(1), (4), (5), (6), and (7) of the Code are required to be placed in classes. The Code requires that each holder of such a claim receive cash on the effective date of the Plan equal to the allowed amount of such claim. However, a class of holders of such claims may vote to accept different treatment.

The following chart lists all classes containing claims under §§ 507(a)(1), (4), (5), (6), and (7) of the Code and their proposed treatment under the Plan:

CLASS#	DESCRIPTION	IMPAIRMENT	TREATMENT
1	Priority unsecured claims	Unimpaired	Employed wage and
	pursuant to Sections 507(a)(4)		benefits claims approved
	and (5)		by prior order of the
			Bankruptcy Court have
	Total amt of claims =		been paid in full post-
	\$0 remaining unpaid		petition pursuant to prior
			order of the Bankruptcy
			Court.
1	Priority unsecured claim	Unimpaired	Patient Deposits for
	pursuant to Section 507(a)(7)		dental services to be
			provided. Reorganized
	Patients have paid		Debtor will provide
	approximately \$120,000 for		services in full

dental services yet to be	satisfaction of priority
rendered.	claims.

3. Classes of Settled Claims and General Unsecured Claims

General unsecured claims are not secured by property of the estate and are not entitled to priority under § 507(a) of the Code.

The following chart identifies the Plan's proposed treatment of Classes 3 through 7, which contain claims settled by the Debtor as well as general unsecured claims against the Debtor:

CLASS#	DESCRIPTION	IMPAIRMENT	TREATMENT
3	Claim of Bell's Corner Hidden Forrest, LLC, Bells Corner 447 Fort Washington LLC and Bell's Corner West 22 LLC, as tenants-in-common	Impaired	In exchange for the Debtor's assumption of the Lease of 8332 Bustleton Avenue, Unit B and C, Philadelphia, PA 19152, the Holder shall receive, in full satisfaction, settlement, release, extinguishment and discharge of its Claim, payment in the aggregate amount of \$50,000, payable pursuant to Article 6.01(a) of the Plan and as set forth in Exhibit B to the Plan.
4	Claim of Everest Business Funding f/k/a Yellowstone Capital	Impaired	The Claimant shall receive, in full satisfaction, settlement, release, extinguishment and discharge of its Claim and all Liens and guarantees associated therewith, \$6,000, payable as set forth in the Stipulation Resolving Patelka Dental Management, LLC's Obligations to EBF Partners, LLC, filed on September 13, 2017.
5	Claim of CAN Capital Asset	Impaired	The Claimant shall

	С т	1	
	Servicing, Inc.		receive, in full
			satisfaction, settlement,
			release, extinguishment
			and discharge of its
			Claim and all Liens and
			guarantees associated
			therewith, \$6,000,
			payable as set forth in the
			Stipulation Resolving
			Patelka Dental
			Management, LLC's
			Obligations to CAN
			Capital Asset Servicing,
			Inc., filed on September
			13, 2017.
6	Claim of High Speed Capital	Impaired	The Claimant shall
0	LLC	Impaned	receive, in full
	LLC		·
			satisfaction, settlement,
			release, extinguishment
			and discharge of its
			Claim and all Liens and
			guarantees associated
			therewith, \$1,500,
			payable as set forth in the
			Stipulation Resolving
			Patelka Dental
			Management, LLC's
			Obligations to High
			Speed Capital LLC, filed
			on September 13, 2017.
7	General Unsecured Class	Impaired	For each of calendar
		_	years 2018 through 2022,
			to the extent that the
			Debtor's gross annual
			revenues exceed
			\$2,200,000, after
			payment of operating
			expenses, claims in
			Classes 1 through 6 and
			the unclassified claims,
			Class 7 creditors will
			receive a pro rata share of
			50% of the net annual
			revenues.
			Estimated percent of
			Claim paid is presently

4. Class of Equity Interest Holders

Equity interest holders are parties who hold an ownership interest (i.e., equity interest) in the Debtor. In a limited liability company ("LLC"), the equity interest holders are the members.

The following chart sets forth the Plan's proposed treatment of the class of equity interest holders.

CLASS#	DESCRIPTION	IMPAIRMENT	TREATMENT
8	Equity interest of Svetlana Kutovoy	Impaired	Ms. Kutovoy will receive no distribution under the Plan. She will retain her equity
			interests.

D. Means of Implementing the Plan

1. Source of Payments

Payments and distributions under the Plan will be funded by the following:

- (a) ongoing operating revenues and accounts receivable;
- (b) Investment Fund of \$500,000, upon approval of the EB-5 Program.

Distributions will be made to the holders of allowed Claims in accordance with Article III of the Plan by the Debtor at the address listed on the holder's proof of claim or last known address of each holder, if a proof of claim was not filed. Distribution checks that are not negotiated within sixty (60) days after issuance shall be null and void. Amounts represented by a voided check will be held for one month, thereafter being deemed unclaimed.

2. Post-confirmation Management

Until the Investment Fund is received, the Post-Confirmation Manager of the Debtor, and her compensation, shall be as follows:

NAME	AFFILIATIONS	INSIDER	POSITION	ANNUAL
		(YES OR NO)		COMPENSATION
Svetlana Kutovoy	Owner	Yes	Member	\$105,000, as
			and	manager.
			Manager	

E. Risk Factors

The proposed Plan has the following risks, which should not be regarded as constituting the only risks associated with the Plan and its implementation:

Even if all voting impaired Classes vote in favor of the Plan, and if with respect to any impaired Class rejecting the Plan the requirements for "cramdown" are met, the Bankruptcy Court may choose not to confirm the Plan. Section 1129 of the Bankruptcy Code requires, among other things, a showing that confirmation of the Plan will not be followed by liquidation or the need for further financial reorganization of the Debtor, and that the value of distributions to dissenting holders of Claims will not be less than the value such holders would receive if the Debtor liquidated. Although The Plan Proponent believes that the Plan will meet these tests, there can be no assurance that the Bankruptcy Court will reach the same conclusion.

There can be no assurance that any estimated Claim amounts set forth in this Disclosure Statement are correct. The actual allowed amount of Claims likely will differ in some respect from the estimates. The estimated amounts are subject to certain risks, uncertainties, and assumptions. Should one or more of these risks or uncertainties materialize, or should any underlying assumptions prove incorrect, the actual allowed amount of Claims may vary from those estimated herein.

The Projections set forth in Exhibit G hereto have been prepared by management of the Debtor in consultation with its financial advisors and cover the projected operations of the Debtor through fiscal year 2020. These Projections are based on numerous assumptions that are an integral part of the Projections, including confirmation and consummation of the Plan in accordance with its terms, realization of the operating strategy of the Debtor, general business and economic conditions, and other matters.

Although the Projections are presented with numerical specificity and are based on assumptions considered reasonable by the Plan Proponent, the assumptions and estimates underlying the Projections are subject to business, economic and competitive uncertainties and contingencies. Accordingly, the Projections are only an educated, good faith estimate and are necessarily contingent in nature. It can be expected that some or all of the assumptions in the Projections will not be realized and that actual results will vary from the Projections, which variations may be material and may increase over time. The projected financial information contained herein should not be regarded as a guaranty by the Plan Proponent, the Debtor's advisors or any other Person that the Projections can or will be achieved. However, the Plan Proponent has reviewed the Projections and believes that the Projections are credible and that there is a reasonable likelihood that the results set forth in the Projections can be achieved.

F. Executory Contracts and Unexpired Leases

The Plan lists all executory contracts and unexpired leases that the Debtor will assume under the Plan. Assumption means that the Plan Proponent has proposed that the Debtor elect to continue to perform the obligations under such contracts and unexpired leases, and to cure defaults of the type that must be cured under the Code, if any. The Plan also lists how the Debtor will cure and compensate the other party to such contract or lease for any such defaults.

If you object to the assumption of your unexpired lease or executory contract, the proposed cure of any defaults, or the adequacy of assurance of performance, you must file and serve your objection to the Plan within the deadline for objecting to the confirmation of the Plan, unless the Court has set an earlier time.

All executory contracts and unexpired leases that are not listed in Article 6.01 of the Plan will be rejected under the Plan. Consult your adviser or attorney for more specific information about particular contracts or leases.

If you object to the rejection of your contract or lease, you must file and serve your objection to the Plan within the deadline for objecting to the confirmation of the Plan.

The Deadline for Filing a Proof of Claim Based on a Claim Arising from the Rejection of a Lease or Contract Is Thirty (30) Days from the Bankruptcy Court's entry of an order confirming the Plan. Any claim based on the rejection of a contract or lease will be barred if the proof of claim is not timely filed, unless the Court orders otherwise.

G. Tax Consequences of Plan

There are a number of income tax considerations, risks and uncertainties associated with consummation of the Plan. This information is provided for information purposes only and is based on the Internal Revenue Code of 1986, as amended, Treasury Regulations promulgated thereunder, Judicial Authorities and current administrative rulings and practices, all of which are subject to change or differing interpretation, possibly with retroactive effects that could affect the tax consequences of the Plan. This summary does not address all aspects of U.S. Federal income taxation that may be relevant to a particular holder of a Claim or to certain types of holders of Claims that may be subject to special treatment under the Internal Revenue Code. Additionally, this summary does not address any aspects of state, local or other taxation. Because the tax rules are complex and their application is uncertain in some respects, each holder of a claim is strongly encouraged to consult with its own tax advisor regarding the tax consequences of the Plan. To ensure compliance with United States Internal Revenue Service Circular 230, (a) any discussion of U.S. federal tax issues in this Disclosure Statement is not intended or written to be relied upon, and cannot be relied upon by holders of Claims, for purposes of avoiding penalties that may be imposed on such holders under the Internal Revenue Code; (b) such discussion is written to support the promotion of the Plan; and (c) each holder of a Claim should seek advice based on such Holder's particular circumstances from an independent tax advisor.

Among other things, the U.S. federal income tax consequences of a payment to a holder may depend initially on the nature of the original transaction pursuant to which the Claim arose. For example, a payment in repayment of the principal amount of a loan is generally not included in the gross income of an original lender.

The U.S. federal income tax consequences of a transfer to a holder may also depend on whether the item to which the payment relates has previously been included in the holder's gross income or has previously been subject to a loss or bad debt deduction. For example, if a payment is made in satisfaction of a receivable acquired in the ordinary course of a holder's trade or business, the holder had previously included the amount of such receivable payment in its gross income under its method of accounting, and had not previously claimed a loss or bad debt deduction for that amount, the receipt of the payment should not result in additional income to the holder but may result in a loss. Conversely, if the holder had previously claimed a loss or bad debt deduction with respect to the item previously included in income, the holder generally would be required to include the amount of the payment in income.

A holder receiving a payment under the Plan in satisfaction of its Claim generally may recognize taxable income or loss measured by the difference between (i) the amount of cash and the fair market value (if any) of any property received and (ii) its adjusted tax basis in the Claim. For this purpose, the adjusted tax basis may include amounts previously included in income (less any bad debt or loss deduction) with respect to that item. The character of any income or loss that is recognized will depend upon a number of factors, including the status of the creditor, the nature of the Claim in its hands, whether the Claim was purchased at a discount, whether and to what extent the creditor has previously claimed a bad debt deduction with respect to the Claim, and the creditor's holding period of the Claim. This income or loss may be ordinary income or loss if the distribution is in satisfaction of accounts or notes receivable acquired in the ordinary course of the holder's trade or business for the performance of services or for the sale of goods or merchandise. Generally, the income or loss will be capital gain or loss if the Claim is a capital asset in the holder's hands.

Certain payments or distributions pursuant to the Plan may be subject to information reporting to the IRS. Moreover, such reportable payments may be subject to backup withholding (at the then applicable rate) unless the taxpayer: (i) comes within certain exempt categories (which generally include corporations) and, when required, demonstrates this fact or (ii) provides a correct taxpayer identification number and certifies under penalty of perjury that the taxpayer identification number is correct and that the taxpayer is not subject to backup withholding because of a failure to report all dividend and interest income.

Backup withholding is not an additional tax but merely an advance payment, which may be refunded to the extent it results in an overpayment of tax and the appropriate information is supplied to the IRS.

In addition, from an information reporting perspective, Treasury Regulations generally require disclosure by a taxpayer on its federal income tax return of certain types of transactions in which the taxpayer participated, including, among other types of transactions, certain transactions that result in the taxpayer's claiming a loss in excess of specified thresholds.

Creditors and Equity Interest Holders Concerned with How the Plan May Affect Their Tax Liability Should Consult with Their Own Accountants, Attorneys, And/Or Advisors.

IV. CONFIRMATION REQUIREMENTS AND PROCEDURES

To be confirmable, the Plan must meet the requirements listed in §§ 1129(a) or (b) of the Code. These include the requirements that: the Plan must be proposed in good faith; at least one impaired class of claims must accept the plan, without counting votes of insiders; the Plan must distribute to each creditor and equity interest holder at least as much as the creditor or equity interest holder would receive in a chapter 7 liquidation case, unless the creditor or equity interest holder votes to accept the Plan; and the Plan must be feasible. These requirements are not the only requirements listed in § 1129, and they are not the only requirements for confirmation.

A. Who May Vote or Object

Any party in interest may object to the confirmation of the Plan if the party believes that the requirements for confirmation are not met.

Many parties in interest, however, are not entitled to vote to accept or reject the Plan. A creditor or equity interest holder has a right to vote for or against the Plan only if that creditor or equity interest holder has a claim or equity interest that is both (1) allowed or allowed for voting purposes and (2) impaired.

In this case, the Plan Proponent believes that classes 2 through 8 are impaired and that holders of claims in each of these classes are therefore entitled to vote to accept or reject the Plan. The Plan Proponent believes that class 1 is unimpaired and that holders of claims in this class, therefore, does not have the right to vote to accept or reject the Plan.

1. What Is an Allowed Claim or an Allowed Equity Interest

Only a creditor or equity interest holder with an allowed claim or an allowed equity interest has the right to vote on the Plan. Generally, a claim or equity interest is allowed if either (1) the Debtor has scheduled the claim on the Debtor's schedules, unless the claim has been scheduled as disputed, contingent, or unliquidated, or (2) the creditor has filed a proof of claim or equity interest, unless an objection has been filed to such proof of claim or equity interest. When a claim or equity interest is not allowed, the creditor or equity interest holder holding the claim or equity interest cannot vote unless the Court, after notice and hearing, either overrules the objection or allows the claim or equity interest for voting purposes pursuant to Rule 3018(a) of the Federal Rules of Bankruptcy Procedure.

The deadline for filing a proof of claim in this case was October 31, 2016.

2. What Is an Impaired Claim or Impaired Equity Interest

As noted above, the holder of an allowed claim or equity interest has the right to vote only if it is in a class that is impaired under the Plan. As provided in § 1124 of the Code, a class is considered impaired if the Plan alters the legal, equitable, or contractual rights of the members of that class.

3. Who is Not Entitled to Vote

The holders of the following five types of claims and equity interests are not entitled to vote:

- holders of claims and equity interests that have been disallowed by an order of the Court;
- holders of other claims or equity interests that are not "allowed claims" or "allowed equity interests" (as discussed above), unless they have been "allowed" for voting purposes;
- holders of claims or equity interests in unimpaired classes;
- holders of claims entitled to priority pursuant to §§ 507(a)(2), (a)(3), and (a)(8) of the Code; and

- holders of claims or equity interests in classes that do not receive or retain any value under the Plan;
- administrative expenses.

Even If You Are Not Entitled to Vote on the Plan, You Have a Right to Object to the Confirmation of the Plan.

4. Who Can Vote in More Than One Class

A creditor whose claim has been allowed in part as a secured claim and in part as an unsecured claim, or who otherwise hold claims in multiple classes, is entitled to accept or reject a Plan in each capacity, and should cast one ballot for each claim.

B. Votes Necessary to Confirm the Plan

If impaired classes exist, the Court cannot confirm the Plan unless (1) at least one impaired class of creditors has accepted the Plan without counting the votes of any insiders within that class, and (2) all impaired classes have voted to accept the Plan, unless the Plan is eligible to be confirmed by "cram down" on non-accepting classes, as discussed later in Section B.2.

1. <u>Votes Necessary for a Class to Accept the Plan</u>

A class of claims accepts the Plan if both of the following occur: (1) the holders of more than one-half (1/2) of the allowed claims in the class, who vote, cast their votes to accept the Plan, and (2) the holders of at least two-thirds (2/3) in dollar amount of the allowed claims in the class, who vote, cast their votes to accept the Plan.

A class of equity interests accepts the Plan if the holders of at least two-thirds (2/3) in amount of the allowed equity interests in the class, who vote, cast their votes to accept the Plan.

2. <u>Treatment of Nonaccepting Classes</u>

Even if one or more impaired classes reject the Plan, the Court may nonetheless confirm the Plan if the nonaccepting classes are treated in the manner prescribed by § 1129(b) of the Code. A plan that binds nonaccepting classes is commonly referred to as a "cram down" plan. The Code allows the Plan to bind nonaccepting classes of claims or equity interests if it meets all the requirements for consensual confirmation except the voting requirements of § 1129(a)(8) of the Code, does not "discriminate unfairly," and is "fair and equitable" toward each impaired class that has not voted to accept the Plan. The Debtor believes that it satisfies the requirements for a "cramdown" confirmation based on the facts and circumstances of this Chapter 11 Case.

You should consult your own attorney if a "cramdown" confirmation will affect your claim or equity interest, as the variations on this general rule are numerous and complex.

C. <u>Liquidation Analysis</u>

To confirm the Plan, the Court must find that all creditors and equity interest holders who do not accept the Plan will receive at least as much under the Plan as such claim and equity interest holders would receive in a chapter 7 liquidation. A liquidation analysis is attached to this Disclosure Statement as Exhibit E.

Importantly, in this case, the Debtor's assets largely consist of accounts receivable that are fully encumbered by the Debtor's obligations to its largest secured creditor. As the Debtor's business depends upon revenues and receivables coming from the provision of dental services, liquidation of the Debtor's business would result in a cessation of those ongoing receivables and the Debtor's accounts receivable, to the extent collectable in a liquidation, would be the property of Bank of America, N.A., leaving no assets of value available to other creditors. Moreover, cessation of the Debtor's business would result in the termination of the employment of each of the Debtor's employees as well as the ongoing business that the Debtor provides to its trade vendors.

Accordingly, by enabling the Debtor to remain in operation to earn revenues to fund the Plan, the Plan Proponent believes that all creditors and equity interest holders will receive more under the Plan than they would receive in a chapter 7 liquidation.

D. Feasibility

The Court must find that confirmation of the Plan is not likely to be followed by the liquidation, or the need for further financial reorganization, of the Debtor or any successor to the Debtor, unless such liquidation or reorganization is proposed in the Plan.

1. Ability to Initially Fund Plan

The Plan Proponent believes that the Debtor will have enough cash on hand on the effective date of the Plan to pay all the claims and expenses that are entitled to be paid on that date. Tables showing the amount of cash on hand on the effective date of the Plan, and the sources of that cash are attached to this disclosure statement as Exhibit F.

2. Ability to Make Future Plan Payments And Operate Without Further Reorganization

The Plan Proponent must also show that the Reorganized Debtor will have enough cash over the life of the Plan to make the required Plan payments.

The Plan Proponent has provided projected financial information. Those projections are listed in Exhibit G.

The Plan Proponent's financial projections show that the Debtor will have an aggregate annual average cash flow, after paying operating expenses and post-confirmation taxes and including the Investment Fund, of approximately \$2,500,000. The final Plan payment is expected to be paid on January 31, 2023 (assuming the Reorganized Debtor's gross annual revenues for 2022 exceed \$2,200,000.

The Plan contemplates that the Debtor will receive certain revenues as of the effective date of the Plan and will earn additional revenues from its operations following the effective date of the Plan, which will be used to fund the Plan obligations. The Debtor may also have additional funds available to it through the Investment Fund. These funds, if available, will supplement the Reorganized Debtor's revenues to provide additional assurance that the Debtor has sufficient cash flow available to it to satisfy all Claims and continue operations as and to the extent provided in the Plan and that no further financial restructuring will be necessary in the foreseeable future. Mr. Kutovoy has also reserved the Debtor's right to pay its remaining Plan obligations in full at any time. It is important to note that, while the Debtor's application to the EB-5 Investment Program has been pending and is proceeding through the approval process, no guarantees can be made that the Debtor will receive approval to receive investments through this program. For this reason, Mr. Kutovoy's Plan is not premised on or dependent upon receipt of the Investment Fund and is premised, in the first instance, on use of the Debtor's ongoing revenues for funding. As the Debtor has resolved its major debts with those creditors in Classes 4 through 6 of the proposed Plan, the revenues previously used to pay the obligations to those creditors prior to the Petition Date will no longer be needed for those obligations and will be available toward the revenue threshold necessary to make distributions to unsecured creditors. It is important to note that, as is evident from the Debtor's Statement of Financial Affairs [Docket No. 41] filed at the outset of this case, the Debtor's annual revenues exceeded \$2.2 million in each of the two years prior to the initiation of this case. As such, the Plan Proponent believes that the Plan complies with the financial feasibility standard of section 1129(a)(11) of the Bankruptcy Code. Indeed, throughout the Debtor's Chapter 11 case and despite the uncertainty of the U.S. healthcare laws and fluctuating revenues throughout the year, the Debtor has met all of its ongoing operational debts, payment of its fees to the Office of the United States Trustee and debt service payments to its senior secured creditor. The Plan Proponent submits that there is no reason why the Debtor's revenue stream should not continue after the effective date of the Plan.

Nevertheless, the Projections were developed by the Debtor's management in consultation with the Debtor's accountants. The Projections are based on a number of assumptions that are an integral part of the Projections, including, without limitation, confirmation and consummation of the Plan in accordance with its terms, realization of the Debtor's anticipated revenues, general business and economic conditions, competition, absence of material contingent or unliquidated litigation, and other matters. To the extent that the assumptions inherent in the Projections are based upon future operational decisions and objectives, they are subject to change. In addition, although they are presented with numerical specificity and the assumptions on which they are based are considered reasonable by the Debtor, the assumptions and estimates underlying the Projections are subject to organizational, economic and competitive uncertainties and contingencies. Accordingly, the Projections are only an educated, good faith estimate and are necessarily contingent in nature. It can be expected that some or all of the assumptions in the Projections will not be realized and that actual results will vary from the Projections, which variations may be material and may be adverse. The Projections should therefore not be regarded as a guaranty by the Plan Proponent, the Debtor or any other Person that the results set forth in the Projections will be achieved. The Plan Proponent, however, believes that the Projections are credible and that there is a reasonable likelihood that the results set forth in the Projections can be achieved.

The Plan Proponent does not intend to update or otherwise revise the Projections, including any revisions to reflect events or circumstances existing or arising after the date of the Projections or to reflect the occurrence of unanticipated events, even if any or all of the underlying assumptions do not come to fruition. Furthermore, the Plan Proponent does not intend to update or revise the Projections to reflect changes in general economic or industry conditions.

SAFE HARBOR STATEMENT UNDER THE PRIVATE SECURITIES LITIGATION REFORM ACT OF 1995: This Disclosure Statement and the financial projections contained herein and in the Projections include "forward-looking statements" within the meaning of Section 27A of the Securities Act and Section 21E of the Exchange Act. All statements other than statements of historical fact included in this Disclosure Statement are forward-looking statements, including, without limitation, financial projections, the statements, and the underlying assumptions, regarding the timing of, completion of and scope of the current restructuring, the Plan, debt and equity market conditions, current and future economic conditions, the potential effects of such matters on the Debtor's operating strategy, results of operations or financial position, and the adequacy of the Debtor's liquidity. The forward-looking statements are based upon current information and expectations. Estimates, forecasts and other statements contained in or implied by the forward-looking statements speak only as of the date on which they are made, are not guarantees of future performance and involve certain risks, uncertainties and assumptions that are difficult to evaluate and predict. Although the Debtor believes that the expectations reflected in the forward-looking statements are reasonable, parties are cautioned that any such forward-looking statements are not guarantees of future performance, and involve risks and uncertainties, and that actual results may differ materially from those contemplated by such forward-looking statements. Certain important factors that could cause actual results to differ materially from the Debtor's expectations or what is expressed, implied or forecasted by or in the forward-looking statements include developments in the Chapter 11 Case, adverse developments in the timing or results of the Debtor's business plan (including the time line to emerge from chapter 11), the timing and extent of changes in economic conditions, and motions filed or actions taken in connection with the bankruptcy proceedings. Additional factors that could cause actual results to differ materially from the Projections or what is expressed, implied or forecasted by or in the forward-looking statements are stated herein in cautionary statements made in conjunction with the forward-looking statements or are included elsewhere in this Disclosure Statement

You Should Consult with Your Accountant or other Financial Advisor If You Have Any Questions Pertaining to These Projections.

E. Best Interests of Creditors

If a plan is accepted by each class of claims, the Bankruptcy Code requires a bankruptcy court to determine that the plan is in the best interests of all holders of claims that are impaired by the plan and that have not accepted the plan. The "best interests" test, as set forth in section 1129(a)(7) of the Bankruptcy Code, requires a bankruptcy court to find either that all members of an impaired class of claims have accepted the plan or that the plan will provide a member who has not accepted the plan with a recovery of property of a value, as of the effective date of the

plan, that is not less than the amount that such holder would recover if the debtor were liquidated.

To calculate the probable distribution to holders of each impaired class of claims if the debtor was liquidated under chapter 7, a bankruptcy court must first determine the aggregate dollar amount that would be generated from the debtor's assets if its chapter 11 case were converted to a chapter 7 case under the Bankruptcy Code. This "liquidation value" would consist primarily of the proceeds from a forced sale of the debtor's assets by a chapter 7 trustee.

The amount of liquidation value available to unsecured creditors would be reduced, first, by the payment of the secured Claim held by Bank of America, N.A., which is secured by a first lien on all of the Debtor's assets, including its accounts receivable, and second, by the costs and expenses of liquidation, as well as by other administrative expenses and costs of both the chapter 7 case and the chapter 11 case. Costs of liquidation under chapter 7 of the Bankruptcy Code would include the compensation of a trustee, as well as of counsel and other professionals retained by the trustee, asset disposition expenses, all unpaid administrative expenses incurred by the debtors in their chapter 11 case that are allowed in the chapter 7 cases, litigation costs and claims arising from the operations of the debtor during the pendency of the chapter 11 case, including the return of advance customer deposits for services yet to be rendered by the Debtor. The liquidation itself would trigger certain priority payments that otherwise would be due in the ordinary course of business. Those priority claims would be paid in full from the liquidation proceeds before the balance would be made available to pay general unsecured claims or to make any distribution in respect of equity security interests. The liquidation would also prompt the rejection of the Debtor's executory contracts and unexpired leases and thereby significantly enlarge the total pool of unsecured claims by reason of resulting rejection damages claims.

Once the bankruptcy court ascertains the recoveries in liquidation of secured creditors and priority claimants, it must determine the probable distribution to general unsecured creditors and equity security holders from the remaining available proceeds in liquidation. If such probable distribution has a value greater than the distributions to be received by such creditors and equity security holders under the plan, then the plan is not in the best interests of creditors and equity security holders.

It is impossible to determine with certainty the value each holder of a Claim will receive under the Plan. Notwithstanding the difficulty in quantifying recoveries with precision, the Plan Proponent believes that the financial disclosures and projections contained herein imply the greatest potential recovery to holders of Claims in impaired Classes, largely because the vast majority of the Debtor's assets consist of revenues received from services provided. Moreover, the aggregate value of the Debtor's assets in a liquidation, after paying liquidation costs, would not exceed the value of the secured Claim held by Bank of America, N.A. Absent continuity of service, revenues will not exist and the collectability of outstanding receivables will likely deteriorate. Accordingly, the Plan Proponent believes that the "best interests" test of section 1129 of the Bankruptcy Code is satisfied.

V. EFFECT OF CONFIRMATION OF PLAN

A. Discharge of Debtor

<u>Discharge</u>. On the effective date of the Plan, the Debtor shall be discharged from any debt that arose before confirmation of the Plan, subject to the occurrence of the effective date, to the extent specified in § 1141(d)(1)(A) of the Code, except that the Debtor shall not be discharged of any debt (i) imposed by the Plan, (ii) of a kind specified in § 1141(d)(6)(A) if a timely complaint was filed in accordance with Rule 4007(c) of the Federal Rules of Bankruptcy Procedure, or (iii) of a kind specified in § 1141(d)(6)(B). After the effective date of the Plan your claims against the Debtor will be limited to the debts described in clauses (i) through (iii) of the preceding sentence.

B. <u>Modification of Plan</u>

The Plan Proponent may modify the Plan at any time before confirmation of the Plan. However, the Court may require a new disclosure statement and/or revoting on the Plan. The Plan Proponent may also seek to modify the Plan at any time after confirmation only if (1) the Plan has not been substantially consummated and (2) the Court authorizes the proposed modifications after notice and a hearing.

C. Final Decree

Once the estate has been fully administered, as provided in Rule 3022 of the Federal Rules of Bankruptcy Procedure, the Plan Proponent, or such other party as the Court shall designate in the Plan Confirmation Order, shall file a motion with the Court to obtain a final decree to close the case. Alternatively, the Court may enter such a final decree on its own motion.

VI. OTHER PLAN PROVISIONS

A. <u>Continued Existence</u>

Except as otherwise provided in the Plan, on the effective date, the Debtor shall continue to exist as a limited liability company organized under the laws of the Commonwealth of Pennsylvania.

B. Vesting of Assets

Upon the effective date, pursuant to sections 1141(b) and (c) of the Bankruptcy Code, all property of the Debtor shall vest in the Reorganized Debtor free and clear of all Claims, liens, encumbrances, charges and other interests, except as otherwise specifically provided in the Plan. All liens, Claims, encumbrances, charges and other interests shall be deemed fully released and discharged as of the effective date and, where applicable, receipt of payments provided pursuant to the Plan.

C. Discharged Claims

Pursuant to section 1141(d) the Bankruptcy Code, confirmation of the Plan and, where applicable, receipt by creditors of payment provided under the Plan, will discharge Claims against the Debtor. No holder of a Claim against the Debtor may, on account of such Claim, seek or receive any payment or other distribution from, or seek recourse against, the Debtor or its

property, except as expressly provided herein. Accordingly, except as otherwise provided herein, the order confirming this Plan shall provide, among other things, that no holder of a Claim against the Debtor may, on account of such Claim, seek or receive any payment or other distribution from, or seek recourse against, the Debtor or its property, except that from and after the date on which this Plan is confirmed, all Persons and Entities who have held, hold, or may hold Claims against the Debtor are permanently enjoined from taking any of the following actions against the Debtor, or its property on account of such Claims: (i) commencing or continuing, in any manner or in any place, any action or other proceeding; (ii) enforcing, attaching, collecting, or recovering in any manner any judgment, award, decree, or order; (iii) creating, perfecting, or enforcing any Lien or encumbrance; and (iv) commencing or continuing, in any manner or in any place, any action that does not comply with or is inconsistent with the provisions of the Plan; provided, however, that nothing contained herein shall preclude such Persons or Entities from exercising their rights pursuant to and consistent with the terms of the Plan. By accepting distributions pursuant to the Plan, each holder of an allowed Claim shall be deemed to have specifically consented to the injunctions set forth in Article 10.02 of the Plan.

D. Exculpation and Limitation of Liability

To the maximum extent permitted by the Bankruptcy Code and applicable law, none of the Plan Proponent, the Debtor nor any Exculpated Person shall have or incur any liability to any Person or Entity, including, without limitation, any Holder of a Claim or any other party in interest, or any of their respective agents, employees, representatives, financial advisors, attorneys or affiliates or any of their successors or assigns, for any act taken or omission made in connection with, relating to, contemplated by or arising out of, the Chapter 11 case, filing, negotiating, prosecuting, administering, formulating, implementing, soliciting support or acceptance of, confirming or consummating this Plan or the property to be distributed under this Plan, including all activities leading to the promulgation and confirmation of the Plan, the Disclosure Statement (including any information provided or statement made in the Disclosure Statement or omitted therefrom), or any contract, instrument, release or other agreement or document created in connection with or related to the Plan or the administration of the Debtor or this Chapter 11 case, provided, however, that the foregoing exculpation shall not apply to any act of gross negligence or willful misconduct.

E. Releases by Holders of Claims

Effective as of the effective date, and except as otherwise provided in the Plan or the order confirming the Plan, in consideration for the obligations of the Debtor under the Plan, each Person or Entity that has held, currently holds or may hold a Claim, and any Person or Entity acting on behalf of such Person or Entity, shall be deemed to have forever waived, released and discharged the Plan Proponent, the Debtor, its Estate, its property, and the Debtor's officers, employees, agents and professionals from any and all Claims, obligations, suits, judgments, damages, rights, causes of action and liabilities whatsoever (other than the right to enforce the performance of the respective obligations of the Debtor under the Plan, whether liquidated or unliquidated, fixed or contingent, matured or unmatured, known or unknown, foreseen or unforeseen, then existing or thereafter arising, in law, equity or otherwise that are based in whole or in part on any act or omission, transaction, event or other occurrence taking place on or prior to the effective date of the Plan in any way relating to the Debtor, the Chapter 11 case, the Plan

or the Disclosure Statement other than Claims or liabilities arising out of or relating to any act or omission that constitutes a failure to perform the duty to act in good faith and where such failure to perform constitutes willful misconduct, gross negligence, or fraud; provided, that Article 10.03(a) of the Plan shall not release any Person or Entity from any Claim or Cause of Action existing as of the effective date, based on (x) the Internal Revenue Code or any other domestic state, city or municipal tax code, (y) any liability that the Person or Entity may have as an owner or operator of real property after Confirmation under the environmental laws of the United States or any domestic state, city or municipality or (z) any criminal laws of the United States or any domestic state, city or municipality.

F. Injunction

All provisions of the Plan notwithstanding other than with respect to any act of gross negligence or willful misconduct, on the effective date, the order confirming the Plan shall constitute an injunction permanently enjoining any Person or Entity (excluding the Debtor) that has held, currently holds or may hold a Claim, demand, debt, right, cause of action or liability that is released pursuant to Article 10.03 of the Plan from enforcing or attempting to enforce any such Claim, demand, debt, right, cause of action or liability against (1) the Plan Proponent, (2) the Debtor, (3) any member, trustee, officer, employee, agent, advisor, professional, representative or other person acting on behalf of the Debtor, or (4) any of the respective property of any of the foregoing.

RECOMMENDATION AND CONCLUSION

For all of the reasons set forth in this Disclosure Statement, the Plan Proponent believes that confirmation and consummation of the Plan is preferable to all other alternatives. Consequently, the Plan Proponent urges all holders of Claims in voting Classes to vote to ACCEPT the Plan, and to complete and return their ballots so that they will be RECEIVED on or before **January 12, 2018**, at 5:00 p.m. prevailing Eastern time.

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Dated: December 13, 2017

Igor Kutovoy, Plan Proponent

EXHIBITS

EXHIBIT A - PLAN OF REORGANIZATION

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UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF PENNSYLVANIA

In re: : Chapter 11

Patelka Dental Management, LLC, : Case No. 16-14743 (MDC)

Debtor. : Small Business Case under Chapter 11

IGOR KUTOVOY'S CHAPTER 11 PLAN OF REORGANIZATION OF PATELKA DENTAL MANAGEMENT, LLC, DATED DECEMBER 13, 2017

ARTICLE I

SUMMARY

This Plan of Reorganization (the "Plan") under chapter 11 of the Bankruptcy Code (the "Code") proposes to pay creditors of Patelka Dental Management, LLC (the "Debtor") from cash flow from operations, future revenues and future investment proceeds.

This Plan provides for 1 class of secured claims; 6 classes of unsecured claims; and 1 class of equity interests. Unsecured creditors in class 7, holding allowed claims, will receive distributions, which the proponent of this Plan has valued at approximately 16 cents on the dollar. This Plan also provides for the payment of priority claims on the effective date of the Plan and payment of administrative claims as agreed upon between the Debtor and each administrative claimant.

All creditors and equity holders should refer to Articles III through VI of this Plan for information regarding the precise treatment of their claim. A disclosure statement that provides more detailed information regarding this Plan and the rights of creditors and equity security holders has been circulated with this Plan. Your rights may be affected. You should read these papers carefully and discuss them with your attorney, if you have one. (If you do not have an attorney, you may wish to consult one.)

ARTICLE II

CLASSIFICATION OF CLAIMS AND INTERESTS

2.01	<u>Class 1</u> .	All allowed claims entitled to priority under § 507 of the Code (except administrative expense claims under § 507(a)(2) and priority tax claims under § 507(a)(8).
2.02	Class 2.	The claim of Bank of America, N.A.
2.03	Class 3.	The claim of Bell's Corner Hidden Forrest, LLC, Bells Corner 447 Fort Washington LLC and Bell's Corner West 22 LLC, as tenants-in-common.
2.04	Class 4.	The claim of Everest Business Funding f/k/a Yellowstone Capital.
2.05	Class 5.	The claim of CAN Capital Asset Servicing, Inc.
2.06	<u>Class 6</u> .	The claim of High Speed Capital LLC.
2.07	Class 7.	All unsecured claims allowed under § 502 of the Code.
2.08	Class 8.	Equity interests of the Debtor.

ARTICLE III

TREATMENT OF ADMINISTRATIVE EXPENSE CLAIMS, U.S. TRUSTEES FEES, AND PRIORITY TAX CLAIMS

- 3.01 <u>Unclassified Claims.</u> Under section §1123(a)(1), administrative expense claims, and priority tax claims are not in classes.
- 3.02 Administrative Expense Claims. Each holder of an administrative expense claim allowed under § 503 of the Code, excluding the claim of the Landlord that is treated in Class 3, shall receive, in full and final satisfaction, release and discharge: (a) the amount of such unpaid Allowed Administrative Claim on or as soon as reasonably practicable after the later of (i) the Effective Date, (ii) the date on which such Administrative Claim becomes Allowed, or (iii) a date agreed to in writing by the Debtor and the Holder of such Administrative Claim; or (b) such other treatment on such other terms and conditions as may be agreed upon in writing by the Holder of such Administrative Claim and the Debtor, or as the Bankruptcy Court may order. Notice of the Administrative Claim Bar Date shall be included in the Notice of Effective Date sent to each creditor and party in interest upon the Effective Date of the Plan. By agreement, all professionals appointed in the Chapter 11 Case have agreed to accept payment of the total allowed amount of their respective fees and expenses over time.

- 3.03 Priority Tax Claims. Each holder of a priority tax claim will be receive, in full satisfaction, release and discharge: (a) the amount of such unpaid Allowed Priority Tax Claim on or as soon as reasonably practicable after the later of (i) the Effective Date, (ii) the date on which such Priority Tax Claim becomes Allowed, and (iii) a date agreed to by the Debtor and the Holder of such Priority Tax Claim; or (b) such other treatment on such other terms and conditions as may be agreed upon in writing by the Holder of such Priority Tax Claim and the Debtor or as the Bankruptcy Court may order. Prior to the Effective Date, the Plan Proponent shall have the right to prepay at any time, in whole or in part, any Allowed Priority Tax Claim without premium or penalty of any sort or nature.
- 3.04 <u>United States Trustee Fees.</u> All fees required to be paid by 28 U.S.C. §1930(a)(6) (U.S. Trustee Fees) will accrue and be timely paid until the case is closed, dismissed, or converted to another chapter of the Code. Any U.S. Trustee Fees owed on or before the effective date of this Plan will be paid on the effective date.

ARTICLE IV

TREATMENT OF CLAIMS AND INTERESTS UNDER THE PLAN

4.01 Claims and interests shall be treated as follows under this Plan:

Class	Impairment	Treatment
Class 1 - Priority Claims	Unimpaired	Each Holder of an Allowed Class 1 Priority Claim shall receive in full satisfaction, settlement, release, extinguishment and discharge of such Claim: (a) the amount of such unpaid Allowed Class 1 Priority Claim on or as soon as reasonably practicable after the later of (i) the effective date, (ii) the date on which such Class 1 Priority Claim becomes Allowed, and (iii) a date agreed to by the Plan Proponent and the Holder of such Class 1 Priority Claim; or (b) such other treatment on such other terms and conditions as may be agreed upon in writing by the Holder of such Class 1 Priority Claim and the Debtor.

Class 2 – Secured Claim of Bank of America, N.A.	Impaired	The Holder of a Class 2 Claim shall have an Allowed Secured Claim in the amount of \$450,000 (the "Class 2 Allowed Claim Amount") and shall be secured by a properly perfected, first priority lien on and security interest in the personal property of the Reorganized Debtor by virtue of such liens existing prior to the Petition Date. Repayment of the Class 2 Allowed Claim Amount shall be made according to the terms of the Stipulation Resolving Patelka Dental Management, LLC's Obligations to Bank of America, N.A., attached hereto as Exhibit A and incorporated by reference.
Class 3 – Claim of Landlord	Impaired	Pursuant to an agreement between the Debtor and the Claimant to resolve the prepetition arrears, in consideration of the Debtor's assumption of the Lease of 8332 Bustleton Avenue, Unit B and C, Philadelphia, PA 19152 by and between the Landlord and the Debtor, as amended from time to time pursuant to the terms of the Plan, the holder shall receive, in full satisfaction, settlement, release, extinguishment and discharge of the cure amounts stated in the Class 3 Claim, payment in the aggregate amount of \$50,000, payable from the Debtor's revenues as set forth in Article 6.01(a) hereof and in the settlement between the Landlord and the Debtor, attached hereto as Exhibit B and incorporated by reference.

Class 4 – Claim of Everest Business Funding f/k/a Yellowstone Capital	Impaired	The Holder of an Allowed Class 4 Claim shall receive, in full satisfaction, settlement, release, extinguishment and discharge of such Class 4 Claim and all Liens and guarantees associated therewith, \$6,000 from the Debtor's revenues, as agreed upon by and between the Debtor and the Claimant as set forth in the settlement agreement attached hereto at Exhibit C.
Class 5 – Claim of CAN Capital Asset Servicing, Inc.		The holder of a Class 5 Claim shall receive, upon allowance and in full satisfaction, settlement, release, extinguishment and discharge of its Class 5 Claim and all Liens associated therewith, \$6,000 from the Debtor's revenues, as agreed upon by and between the Debtor and the Claimant as set forth in the settlement agreement attached hereto at Exhibit C.
Class 6 – High Speed Capital LLC	Impaired	The Holder of an Allowed Class 6 Claim shall receive, in full satisfaction, settlement, release, extinguishment and discharge of such Class 6 Claim and all Liens and guarantees associated therewith, \$1,500 from the Debtor's revenues, as agreed upon by and between the Debtor and the Claimant as set forth in the settlement agreement attached hereto at Exhibit C.

Class 7 - General Unsecured Creditors	Impaired	Class 7 General Unsecured Claims include all Claims, including Rejection Claims, that are not: Administrative Claims; Priority Tax Claims; or Claims designated in Classes 1 through 6. Each Holder of an Allowed Class 7 General Unsecured Claim shall receive, in full satisfaction, settlement, release, extinguishment and discharge of such Allowed Class 7 General Unsecured Claim its pro rata share of fifty percent of the Reorganized Debtor's gross annual revenues in excess of \$2,200,000, if any, in calendar years 2018 through 2022, after payment of operating expenses, the unclassified Claims and Claims in Classes 1 through 6, on account of such Holder's Allowed Class 7 Allowed General Unsecured Claim.
Class 8 - Equity Security Holders of the Debtor	Impaired	Class 8 Interests include the 100% ownership interests of Svetlana Kutovoy. Class 8 Interests shall receive no distribution under the Plan. In consideration for Ms. Kutovoy's efforts to obtain the Investment Fund, Ms. Kutovoy shall retain her Interests in the Debtor until such time as the process to obtain the Investment Funds through the United States Customs and Immigration EB-5 Investors Program is completed. Thereafter, her continued interests in the Reorganized Debtor will be governed by the requirements of the EB-5 Investors Program and amended corporate formation documents.

ARTICLE V

ALLOWANCE AND DISALLOWANCE OF CLAIMS

5.01 <u>Disputed Claim.</u> A disputed claim is a claim that has not been allowed or disallowed by a final non-appealable order, and as to which either: (i) a proof of claim has been filed or deemed filed, and the Debtor or another party in interest has filed an objection; or (ii) no proof of claim has been filed, and the Debtor has scheduled such claim as disputed, contingent, or unliquidated.

- 5.02 <u>Delay of Distribution on a Disputed Claim.</u> No distribution will be made on account of a disputed claim unless such claim is allowed by a final non-appealable order.
- 5.03 <u>Settlement of Disputed Claims.</u> The Debtor will have the power and authority to settle and compromise a disputed claim with court approval and compliance with Rule 9019 of the Federal Rules of Bankruptcy Procedure.

ARTICLE VI

PROVISIONS FOR EXECUTORY CONTRACTS AND UNEXPIRED LEASES

- 6.01 <u>Assumed Executory Contracts and Unexpired Leases.</u> The Debtor will assume the following executory contracts and/or unexpired leases effective upon the effective date of this Plan as provided in Article VII:
 - (a) Lease of 8332 Bustleton Avenue, Unit B and C, Philadelphia, PA 19152 by and between the Landlord and the Debtor, as amended from time to time, in exchange for an aggregate payment of \$50,000 to cure prepetition defaults thereunder.
 - (b) Pursuant to sections 365 and 1123 of the Bankruptcy Code, each of the executory contracts and unexpired leases within the following categories shall be deemed assumed as of the effective date (and the proposed cure of any defaults with respect to each shall be zero dollars):
 - (i) Each of the Debtor's Insurance Plans and Workers' Compensation Plans;
 - (ii) Any indemnification obligation to an officer or employee that was employed by the Debtor on or after the Petition Date;
 - (iii) Each Employee Agreement entered into by the Debtor and any person employed by the Debtor on the effective date who accepts distributions pursuant to the Plan which distributions shall be deemed made in full cure and satisfaction of all outstanding obligations owed to such person, shall be deemed assumed;
 - (iv) As of the effective date of the Plan, whether or not such employee benefits are provided for in an Employee Agreement (by operation of this Plan or otherwise), the Debtor, in its sole and absolute discretion, may honor, in the ordinary course of business, any written contracts, agreements, policies, programs and plans for, among other things, compensation, health care benefits, disability benefits, severance benefits, retirement benefits, welfare benefits,

life insurance and accidental death and dismemberment insurance, programs and plans for bonuses and other incentives or compensation for the officers and employees. However, notwithstanding anything else herein, at the discretion of the Debtor, any assumed plans shall be subject to modification in accordance with the terms thereof.

6.02 Rejected Executory Contracts and Unexpired Leases. The Debtor will be conclusively deemed to have rejected all executory contracts and/or unexpired leases not expressly assumed under Article 6.01 above, or before the date of the order confirmation this Plan, upon the effective date of this Plan. A proof of a claim arising from the rejection of an executory contract or unexpired lease under this Article must be filed no later than thirty (30) days after the date of the order confirming this Plan.

ARTICLE VII

MEANS FOR IMPLEMENTATION OF THE PLAN

- 7.01. <u>Continued Existence</u>. Except as otherwise provided in the Plan, the Debtor shall, as a Reorganized Debtor, continue to exist after the effective date as a legal entity, with all the powers of a Limited Liability Company under the laws of the Commonwealth of Pennsylvania and without prejudice to any right to alter or terminate such existence (whether by merger or otherwise) under Pennsylvania law. Upon completion of the EB-5 Investor Program and receipt of the Investment Fund, the Reorganized Debtor will become a two member Limited Liability Company.
- 7.02. <u>Restructuring Transactions</u>. The Plan is being funded by the Debtor's ongoing operational revenues and, upon completion of the EB-5 Investor Program process, the Investment Funds. It is anticipated that final approvals will be obtained within six (6) months of the effective date of the Plan, though much of the process is outside of the Debtor's control.
- 7.03. <u>Timing of Distributions.</u> Except as specifically set forth in the Plan, distributions will be made to holders of allowed Claims in accordance with Article III of the Plan. If a Claim is not an allowed Claim as of the effective date of the Plan, distributions will be made only if and when the Claim is allowed. For Claims that are disputed pursuant to a claim objection or as listed in the Debtor's bankruptcy schedules, or have otherwise not yet been allowed as of the effective date, the Debtor shall reserve sufficient funds for distribution to the holders of such Claims in the event that such Claims become allowed.
- 7.04. <u>Delivery of Distributions</u>. Distributions to holders of allowed Claims shall be made by the Debtor: (a) at the address listed on the holders' proofs of claim or at the last known addresses of each holder, if a proof of claim was not filed, or (b) at the addresses set forth in any

written notices of address changes delivered to the Debtor on or before the effective date. If any holder's distribution is returned as undeliverable, no further distributions to such holder shall be made unless and until the Debtor is notified of such holder's then current address prior to the entry of the Final Decree.

- 7.05. Failure to Negotiate Checks. Checks issued in respect of distributions under the Plan shall be null and void if not negotiated within sixty (60) days after the date of issuance. Requests for reissuance for any such check shall be made directly to the Debtor by the holder of the allowed Claim on or before the entry of the Final Decree. All amounts represented by any voided check will be held until one (1) month after date on which the check is voided. Thereafter, all such amounts shall be deemed to be unclaimed property, and all holders of Claims in respect of void checks shall be forever barred, estopped and enjoined from asserting a claim to such funds in any manner against the Debtor or its assets.
- 7.06. Unclaimed Distributions. All property distributed on account of allowed Claims must be claimed prior to the date on which the Bankruptcy Court enters the Final Decree, or, in the case of a distribution made in the form of a check, must be negotiated by such date or have a pending request for reissuance by such date as provided in this Article VII. All Unclaimed property will be retained by the Debtor for the benefit of the holder of the relevant Claim until such time as the Final Decree is entered. Upon entry of the Final Decree, any Unclaimed property will be retained by and shall revert to the Reorganized Debtor. All full or partial payments made by the Debtor and received by the holder of an allowed Claim prior to the effective date will be deemed to be payments under the Plan for purposes of satisfying the obligations of the Debtor pursuant to the Plan. Nothing contained in the Plan shall require the Debtor to attempt to locate any holder of an allowed Claim other than by reviewing the records of the Debtor and any Claims filed in the Chapter 11 Case. Pursuant to section 1143 of the Bankruptcy Code, all Claims in respect of unclaimed property shall be deemed disallowed and the holder of any Claim disallowed in accordance with this Article 7.06 will be forever barred, expunged, estopped and enjoined from asserting such Claim in any manner against the Debtor or its assets.
- 7.07. <u>Fractional Dollars</u>. Notwithstanding any other provision of the Plan, distributions of fractions of dollars will not be made; rather, whenever any payment of a fraction of a dollar would be called for, the actual payment made shall reflect a rounding of such fraction to the nearest whole dollar (up or down), with half dollars being rounded down.
- 7.08. Compliance With Tax Requirements. In connection with each distribution with respect to which the filing of an information return (such as an Internal Revenue Service Form 1099 or 1042) or withholding is required, the Debtor, as appropriate, shall file such information return with the Internal Revenue Service and provide any required statements in connection therewith to the recipients of such distribution or effect any such withholding and deposit all moneys so withheld as required by law. With respect to any Person or Entity from whom a tax identification number, certified tax identification number or other tax information

required by law to avoid withholding has not been received by the Debtor within thirty (30) days from the date of such request, the Debtor, at its option, may withhold the amount required and distribute the balance to such Person or Entity or decline to make such distribution until the information is received.

ARTICLE VIII

GENERAL PROVISIONS

8.01 <u>Definitions and Rules of Construction.</u> The definitions and rules of construction set forth in §§ 101 and 102 of the Code shall apply when terms defined or construed in the Code are used in this Plan, and they are supplemented by the following definitions:

"Exculpated Persons" means to the maximum extent permitted by the Bankruptcy Code and applicable law: (a) the Debtor; (b) Dilworth Paxson LLP; (c) Calzaretto & Company; and (d) as to the parties listed in (a), (b) and (c), any of their respective members, affiliates, officers, employees, advisors, attorneys or agents acting in such capacity on or after the Petition Date.

"Final Decree" means the order entered by the Bankruptcy Court closing this Chapter 11 case.

"Investment Funds" means the investment of \$500,000 as anticipated to be approved through the United States Customs and Immigration EB-5 Investor Program and which will be invested as a capital infusion into the Reorganized Debtor to fund ongoing operations and continued payments under this Plan.

"Landlord" means Bell's Corner Hidden Forrest, LLC, Bells Corner 447 Fort Washington LLC and Bell's Corner West 22 LLC, as tenants-in-common.

- 8.02 <u>Effective Date of Plan.</u> The effective date of this Plan is the first business day following the date that is fourteen days after the entry of the order of confirmation. If, however, a stay of the confirmation order is in effect on that date, the effective date will be the first business day after the date on which the stay of the confirmation order expires or is otherwise terminated.
- 8.03 <u>Severability.</u> If any provision in this Plan is determined to be unenforceable, the determination will in no way limit or affect the enforceability and operative effect of any other provision of this Plan.

- 8.04 <u>Binding Effect.</u> The rights and obligations of any entity named or referred to in this Plan will be binding upon, and will inure to the benefit of the successors or assigns of such entity.
- 8.05 <u>Captions.</u> The headings contained in this Plan are for convenience of reference only and do not affect the meaning or interpretation of this Plan.
- 8.06 <u>Controlling Effect.</u> Unless a rule of law or procedure is supplied by federal law (including the Code or the Federal Rules of Bankruptcy Procedure), the laws of the Commonwealth of Pennsylvania governs this Plan and any agreements, documents, and instruments executed in connection with this Plan, except as otherwise provided in this Plan.

ARTICLE IX

DISCHARGE

9.01. <u>Discharge.</u> On the confirmation date of this Plan, the debtor will be discharged from any debt that arose before confirmation of this Plan, subject to the occurrence of the effective date, to the extent specified in § 1141(d)(1)(A) of the Code, except that the Debtor will not be discharged of any debt: (i) imposed by this Plan; (ii) of a kind specified in § 1141(d)(6)(A) if a timely complaint was filed in accordance with Rule 4007(c) of the Federal Rules of Bankruptcy Procedure; or (iii) of a kind specified in § 1141(d)(6)(B).

ARTICLE X

OTHER PROVISIONS

10.01. <u>Vesting of Assets</u>. Upon the effective date, pursuant to sections 1141(b) and (c) of the Bankruptcy Code, all property of the Debtor, shall vest in the Reorganized Debtor, free and clear of all Claims, liens, encumbrances, charges and other interests, except as otherwise specifically provided in the Plan to the same extent and validity as such interest existed prior to the effective date. All liens, Claims, encumbrances, charges and other interests shall be deemed fully released and discharged as of the effective date, except as otherwise provided in the Plan. As of the effective date, the Reorganized Debtor may operate its organization and may use, acquire and dispose of property without supervision or approval by the Bankruptcy Court and free of any restrictions of the Bankruptcy Code or the Bankruptcy Rules, other than as required by the Plan.

10.02. Injunction.

(a) <u>Discharged Claims</u>.

Pursuant to section 1141(d) the Bankruptcy Code, Confirmation and, where applicable, receipt by creditors of payment provided under the Plan, will discharge Claims against the Debtor. No holder of a Claim against the Debtor may, on account of such Claim, seek or receive any payment or other distribution from, or seek recourse against the Debtor or its property, except as expressly provided herein. Accordingly, except as otherwise provided herein, the order confirming this Plan shall provide, among other things, that no holder of a Claim against the Debtor may, on account of such Claim, seek or receive any payment or other distribution from, or seek recourse against, the Debtor or its property, except that from and after the date on which this Plan is confirmed, all Persons and Entities who have held, hold, or may hold Claims against the Debtor are permanently enjoined from taking any of the following actions against the Debtor, or its property on account of such Claims: (i) commencing or continuing, in any manner or in any place, any action or other proceeding; (ii) enforcing, attaching, collecting, or recovering in any manner any judgment, award, decree, or order; (iii) creating, perfecting, or enforcing any Lien or encumbrance; and (iv) commencing or continuing, in any manner or in any place, any action that does not comply with or is inconsistent with the provisions of the Plan; provided, however, that nothing contained herein shall preclude such Persons or Entities from exercising their rights pursuant to and consistent with the terms of the Plan. By accepting distributions pursuant to the Plan, each holder of an allowed Claim shall be deemed to have specifically consented to the injunctions set forth in this Article 10.02.

(b) Exculpation and Limitation of Liability.

To the maximum extent permitted by the Bankruptcy Code and applicable law, none of the Plan Proponent, the Debtor nor any Exculpated Person shall have or incur any liability to any Person or Entity, including, without limitation, any Holder of a Claim or any other party in interest, or any of their respective agents, employees, representatives, financial advisors, attorneys or affiliates or any of their successors or assigns, for any act taken or omission made in connection with, relating to, contemplated by or arising out of, the Chapter 11 Case, filing, negotiating, prosecuting, administering, formulating, implementing, soliciting support or acceptance of, confirming or consummating this Plan or the property to be distributed under this Plan, including all activities leading to the promulgation and confirmation of the Plan, the Disclosure Statement (including any information provided or statement made in the Disclosure Statement or omitted therefrom), or any contract, instrument, release or other agreement or document created in connection with or related to the Plan or the administration of the Debtor or this Chapter 11 Case, provided, however, that the foregoing exculpation shall not apply to any act of gross negligence or willful misconduct.

10.03. Releases

(a) Releases by Holders of Claims.

Effective as of the effective date, and except as otherwise provided in the Plan or the order confirming this Plan, in consideration for the obligations of the Debtor under the Plan, each Person or Entity that has held, currently holds or may hold a Claim, and any Person or Entity acting on behalf of such Person or Entity, shall be deemed to have forever waived, released and discharged the Plan Proponent, the Debtor, its Estate, its property, and the Debtor's officers, employees, agents and professionals from any and all Claims, obligations, suits, judgments, damages, rights, Causes of Action and liabilities whatsoever (other than the right to enforce the performance of the respective obligations of the Debtor under the Plan, whether liquidated or unliquidated, fixed or contingent, matured or unmatured, known or unknown, foreseen or unforeseen, then existing or thereafter arising, in law, equity or otherwise that are based in whole or in part on any act or omission, transaction, event or other occurrence taking place on or prior to the effective date of the Plan in any way relating to the Debtor, the Chapter 11 Case, the Plan or the Disclosure Statement other than Claims or liabilities arising out of or relating to any act or omission that constitutes a failure to perform the duty to act in good faith and where such failure to perform constitutes willful misconduct, gross negligence, or fraud; provided, that this Article 10.03(a) shall not release any Person or Entity from any Claim or Cause of Action existing as of the effective date, based on (x) the Internal Revenue Code or any other domestic state, city or municipal tax code, (y) any liability that the Person or Entity may have as an owner or operator of real property after Confirmation under the environmental laws of the United States or any domestic state, city or municipality or (z) any criminal laws of the United States or any domestic state, city or municipality.

(b) Injunction.

All provisions of the Plan notwithstanding other than with respect to any act of gross negligence or willful misconduct, on the effective date, the order confirming the Plan shall constitute an injunction permanently enjoining any Person or Entity (excluding the Debtor) that has held, currently holds or may hold a Claim, demand, debt, right, cause of action or liability that is released pursuant to this Article 10.03 of the Plan from enforcing or attempting to enforce any such Claim, demand, debt, right, cause of action or liability against (1) the Plan Proponent, (2) the Debtor, (3) any member, trustee, officer, employee, agent, advisor, professional, representative or other person acting on behalf of the Debtor, or (4) any of the respective property of any of the foregoing.

10.04. <u>Binding Effect of Plan</u>. The provisions of the Plan shall be binding upon and inure to the benefit of the Debtor, the Estate, any holder of any Claim treated herein or any Person named or referred to in the Plan, and each of their respective heirs, executors, administrators, representatives, predecessors, successors, assigns, agents, officers and directors,

trustees and, to the fullest extent permitted under the Bankruptcy Code and other applicable law, each other Person or Entity affected by the Plan.

10.05. <u>Bar Date for Professionals.</u> Applications for compensation for services rendered and reimbursement of expenses incurred by professionals retained in this case from the Petition Date through the effective date shall be filed no later than forty-five (45) days after the effective date. Applications that are not timely filed will not be considered by the Court. The Debtor may pay any professional fees and expenses incurred after the effective date without any application to the Bankruptcy Court.

The Debtor hereby requests confirmation of the Plan pursuant to section 1129(a) or section 1129(b) of the Bankruptcy Code.

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		MM
Dated: December 13, 2017	BY:	Igor Kutovoy, Plan Proponent

EXHIBIT A

[BOA SETTLEMENT]

(TO BE FILED)

EXHIBIT B

[LANDLORD SETTLEMENT]

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF PENNSYLVANIA

IN RE:

PATELKA DENTAL MANAGEMENT, LLC,

: CASE NO: 16-14743 (MDC)

: SMALL BUSINESS CASE UNDER

DEBTOR. : CHAPTER 11

STIPULATION RESOLVING PATELKA DENTAL MANAGEMENT, LLC'S OBLIGATIONS TO BELLS CORNER HIDDEN FORREST, LLC, BELL'S CORNER 447 FORT WASHINGTON LLC AND BELL'S CORNER WEST 22 LLC, AS TENANTS-IN-COMMON

Bell's Corner Hidden Forrest, LLC, Bell's Corner 447 Fort Washington LLC and Bell's Corner West 22 LLC, as tenants-in-common ("Claimant"), and Patelka Dental Management LLC, f/k/a Patelka Dental, LLC ("Patelka"), hereby stipulate and agree as follows:

- Claimant asserts that prior to July 1, 2016, Patelka owed outstanding rent and utility obligations in the aggregate amount of \$139,511, as reflected in Proof of Claim No. 11 filed by Claimant in Patelka's Chapter 11 case number 16-14713(MDC) filed in the United States Bankruptcy Court for the Eastern District of Pennsylvania. Patelka seeks to retain its lease of 8332 Bustleton Avenue, Unit B and C, Philadelphia, PA 19152 with the Claimant on the same terms set forth therein.
- Patelka and Claimant wish to avoid litigating the extent to which Patelka may be obligated to the Claimant for rent and other obligations accrued prior to July 1, 2016.

NOW, THEREFORE, in consideration of the mutual promises and covenants contained herein, Patelka and Claimant hereby stipulate and agree as follows:

- Claimant's interests as set forth in paragraph 1 above shall be satisfied on the A. following terms:
- Upon the earlier to occur of (a) confirmation of a Chapter 11 plan; (b) the approval of this stipulation by the Bankruptcy Court pursuant to Fed. R. Bankr.P. 9019; or (c) dismissal of this case, a payment in the amount of \$25,000 on or before October 31, 2017 and a payment in the amount of \$25,000 on or before December 31, 2017, for a total settlement payment of \$50,000;
- In consideration of the payments referenced in the foregoing paragraph, Claimant shall forever release and waive any claims that it has against Patelka, its principals, and/or its property relating to any claims that accrued prior to July 1, 2016.

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- 3. In consideration of the release referenced in the foregoing paragraph, Patelka shall forever release and waive any claims that it has against the Claimant and/or its property relating to any amounts owed to Patelka or paid by Patelka prior to July 1, 2016.
- B. Upon receipt of the payment from Patelka, as set forth herein, Claimant shall take any steps necessary to release its claims against Patelka and/or its property that accrued prior to July 1, 2016.

Dated: October 24, 2017

APPROVED:

Patelka Dental Management, LLC

Svetlana Kutovoy/President

Bells Corner Hidden Forrest, LLC, Bell's Corner 447 Fort Washington LLC and Bell's Corner West 22 LLC astenants-in-common

EXHIBIT C

[LIEN SETTLEMENTS]

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF PENNSYLVANIA

TAT TO ID.	
IN RE:	•

PATELKA DENTAL MANAGEMENT, LLC, :

: CASE NO: 16-14743 (MDC)

: SMALL BUSINESS CASE UNDER

DEBTOR. : CHAPTER 11

STIPULATION RESOLVING PATELKA DENTAL MANAGEMENT, LLC'S OBLIGATIONS TO EBF PARTNERS, LLC

EBF Partners, LLC ("Claimant"), and Patelka Dental Management LLC, f/k/a Patelka Dental, LLC ("Patelka"), hereby stipulate and agree as follows:

- 1. On or about November 12, 2015, Claimant purchased the receivables from Patelka in the original amount of \$120,000 and obtained a security interest in certain of Patelka's revenues and accounts receivable.
- 2. Patelka and Claimant wish to avoid litigating the extent to which Claimant's interest may or may not be secured and perfected and the amount of the outstanding balance owed to Claimant.

NOW, THEREFORE, in consideration of the mutual promises and covenants contained herein, Patelka and Claimant hereby stipulate and agree as follows:

- A. Claimant's interests as set forth in paragraph 1 above shall be satisfied on the following terms:
- 1. Upon the earlier to occur of (a) confirmation of a Chapter 11 plan; (b) the approval of this stipulation by the Bankruptcy Court pursuant to Fed. R. Bankr.P. 9019; or (c) dismissal of this case, payment in the total amount of \$6,000, payable in four equal monthly installments of \$1,500 each on or before September 30, 2017, October 31, 2017, November 30, 2017 and December 31, 2017 respectively;
- 2. In consideration of the payment referenced in the foregoing paragraph, Claimant shall forever release and waive any claims that it has against Patelka and/or its property relating to any claims that accrued prior to the date of this Stipulation.
- 3. In consideration of the release referenced in the foregoing paragraph, Patelka shall forever release and waive any claims that it has against the Claimant and/or its property relating to any amounts owed to Patelka or paid by Patelka prior to the date of this Stipulation.

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- 4. That nothing in this Stipulation will prevent Claimant from pursuing its rights against any other liable parties under the purchase agreement.
- B. Upon receipt of the full payment from Patelka, as set forth herein, Claimant shall take any steps necessary to have any lien it holds against Patelka and/or its property marked satisfied as of record.

EBF Partners, LLC

September Dated: August 5, 2017

APPROVED:

Patelka Dental Managorhent, LLC

Svetlana Kutovoy, President

UNITED STATES BANKRUPTCY COURT' FOR THE EASTERN DISTRICT OF PENNSYLVANIA

In re:

Patelka Dental Management, LLC,

Debtor.

Chapter 11

Case No. 16-14743 (MDC)

Small Business Case under Chapter 11

STIPULATION RESOLVING DEBTOR'S OBLIGATIONS TO HIGH SPEED CAPITAL LLC

High Speed Capital LLC ("Claimant"), and Patelka Dental Management LLC, as debtor and debtor-in-possession (the "Debtor"), hereby stipulate and agree as follows:

- 1. On July 1, 2016 (the "Petition Date"), the Debtor filed for Chapter 11 relief, initiating the above-captioned bankruptcy case.
- 2. Prior to the Petition Date, on or about December 16, 2015, Claimant purchased the future receivables of the Debtor with an amount purchased of \$65,250.00 and obtained a security interest in certain of the Debtor's pre-petition accounts receivable.
- 3. The Debtor and Claimant wish to avoid litigating the extent to which Claimant's interest may or may not be secured and perfected, the amount of the outstanding balance owed to Claimant, and the extent to which pre-petition payments to Claimant may be subject to avoidance pursuant to provisions of the Bankruptcy Code.

NOW, THEREFORE, in consideration of the mutual promises and covenants contained herein, the Debtor and Claimant hereby stipulate and agree as follows:

- A. Claimant's interests as set forth in paragraph 2 above shall be satisfied on the following terms:
- 1. A payment in the amount of \$1,500 on the effective date of a Chapter 11 Plan of Reorganization filed in the Debtor's bankruptcy case;
- 2. In consideration of the payment referenced in the foregoing paragraph, Claimant shall forever release and waive any claims that it has against the Debtor, its principals, and/or its property relating to any claims that accrued prior to the Petition Date.
- 3. In consideration of the release referenced in the foregoing paragraph, the Debtor shall forever release and waive any claims that it has against the Claimant, its principals, successors, attorneys, employees and/or its property relating to any amounts owed to the Debtor or paid by the Debtor prior to the Petition Date.

- B. The terms and conditions of the agreement set forth in this Stipulation shall be incorporated into any Chapter 11 Plan of Reorganization filed in the Debtor's bankruptcy case, which is subject to final bankruptcy court approval.
- C. Upon receipt of the payment from the Debtor, as set forth herein, Claimant shall take any steps necessary to have any lien it holds against the Debtor and/or its property marked satisfied as of record.

Dated: July 31, 2017

APPROVED:

Patelka Dental Management/LLC

Svetlana Kutovoy, Prosident

High Speed Capital

Renata Bukhman, Esq.

Attorney for

High Speed Capital, LLC

UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF PENNSYLVANIA

IN RE:

PATELKA DENTAL MANAGEMENT, LLC,

: CASE NO: 16-14743 (MDC)

: SMALL BUSINESS CASE UNDER

DEBTOR. : CHAPTER 11

STIPULATION RESOLVING PATELKA DENTAL MANAGEMENT, LLC'S OBLIGATIONS TO CAN CAPITAL ASSET SERVICING, INC.

CAN Capital Asset Servicing, Inc. ("Claimant"), and Patelka Dental Management LLC, f/k/a Patelka Dental, LLC ("Patelka"), hereby stipulate and agree as follows:

- 1. On or about October 21, 2014, WebBank loaned money to Patelka in the original amount of \$200,000. Shortly thereafter, Claimant purchased the Business Loan Agreement between the Debtor and WebBank and obtained a security interest in certain of Patelka's accounts receivable.
- 2. Patelka and Claimant wish to avoid litigating the extent to which Claimant's interest may or may not be secured and perfected and the amount of the outstanding balance owed to Claimant.

NOW, THEREFORE, in consideration of the mutual promises and covenants contained herein, Patelka and Claimant hereby stipulate and agree as follows:

- A. Claimant's interests as set forth in paragraph 1 above shall be satisfied on the following terms:
- 1. Upon the earlier to occur of (a) confirmation of a Chapter 11 plan; (b) the approval of this stipulation by the Bankruptcy Court pursuant to Fed. R. Bankr.P. 9019; or (c) dismissal of this case, a payment in the amount of \$3,000 on or before September 30, 2017 and a payment in the amount of \$3,000 within thirty (30) days thereafter, for a total settlement payment of \$6,000;
- 2. In consideration of the payments referenced in the foregoing paragraph, Claimant shall forever release and waive any claims that it has against Patelka, its principals, and/or its property relating to any claims that accrued prior to the date of this Stipulation.
- 3. In consideration of the release referenced in the foregoing paragraph, Patelka shall forever release and waive any claims that it has against the Claimant and/or its property relating to any amounts owed to Patelka or paid by Patelka prior to the date of this Stipulation.

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B. Upon receipt of the payment from Patelka, as set forth herein, Claimant shall take any steps necessary to have any lien it holds against Patelka and/or its property marked satisfied as of record.

Dated: August ___, 2017

APPROVED:

Patelka Dental Management, LLC

Svetlana Kutovoy, President

CAN Capital Asset Servicing, Inc.

James Holder, Collections Manager

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EXHIBIT B - IDENTITY AND VALUE OF DEBTOR'S MATERIAL ASSETS

Total:	\$ 439,765.19
Leasehold Improvements (depreciation value) ²	\$ 155,000
including stored Mobile Unit)	\$ 52,300
Furniture and Equipment (depreciation value,	
(\$19,875 over 90 days)	
Accounts Receivable as of June 30, 2017	\$ 222,920
Wells Fargo Checking Account ending 9053	\$ 2,871.08
Wells Fargo Checking Account ending 1199	\$ 1,295.64
Wells Fargo Checking Account ending 8017	\$ 5,378.47

 2 These improvements are fixed to the Debtor's leased office space and the value does not include removal costs in the event of liquidation.

EXHIBIT C - PREPETITION FINANCIAL STATEMENTS

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Profits and Losses Page 1 of 3

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Cash Basis

Patelka Dental LLC Profit & Loss

January through December 2015

	Jan - Dec 15
Ordinary Income/Expense	
Income	
Revenue	
UNCO	39,870.16
Cigna	21,494.30
AETNA	78,427,56
1776 H&W FUND	2,870.00
Groupon Inc	494.11
DDPA	157,597.14
AVESIS	296,149.50
Cash Deposit	51,150.00
Counter deposits	567,402.01
Credit card deposits DENTAQUEST LLC	495,016.43
GE Money	73,790.25
Keystone Mercy	139,691.02
PA TREASURY DEPT PROMISE	254,676.99 136,238.72
Unitedhealthcare	49,070.50
Omtodifications	49,010.30
Total Revenue	2,363,938.69
Total Income	2,363,938.89
Expense	
Advertising & Promotion	41,119.98
Automobile Expenses	
Cars	
Auto Lease	6,866.00
Gas	208.10
Insurance	3,306.50
Registration	72.00
Repairs	918.00
Total Cars	11,370.60
Total Automobile Expenses	11,370.60
Bank Charges	2 200 40
Continuing Education	3,826.46
Credit cards	-635.11
American Express	7,100.00
Bank of America	4,651.38
Chase Bank	1,200.00
Credit cards - Other	19,870.06
Total Credit cards	32,821,44
Credit Card Merchant Fees	20,096.36
Dental Lab Expenses	137,636.87
Dental Supplies	107,000,01
Implant Surgeries	59,933,55
Orthodontics	20,746.37
Dental Supplies - Other	96,074,70
Total Dental Supplies	176,754.62
Donations	1,300.00
Dues & Subscriptions	378.89
Entertainment & Meals	16,173.82
Insurance	
Workers Compensation	2,218.41
Insurance - Other	21,469.49
Total Insurance	23,687.90

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Patelka Dental LLC Profit & Loss

January through December 2015

	Jan - Dec 15
Interest Wells Fargo (Oleg Gutman)	1,500.00
Total Interest	1,500.00
License & Registration Office Expense Outside Services	1,965.00 28,516.99
Orthodontics Cleaning Dental Assistant Dentists Dr Delie	149,925.87 21,700.00 3,496.20 2,000.00
Dr. Patel Health Ins Medical Expenses	3,724.80 396.46
Total Dr. Patel	4,121.26
Dentists - Other	503,862.50
Total Dentists	509,983.76
Hygienists Patient Transport Transportation Others Outside Services - Other	142,375.84 23,000.00 16,210.00 3,315.00 4,750.00
Total Outside Services	874,756.67
Payroll Expenses Salaries & Wages Employer Payroll Taxes Paychex Taxpay	333,685.17 31,923.83 35,945.81
Total Payroll Expenses	401,554.81
Permits Postage Professional Fees Accounting Billing expenses Legal Network/Sales/Support Payroll Prep Temp Agency	100.00 2,894.60 10,000.00 7,180.96 5,000.00 6,554.00 8,580.54 9,257.83
Total Professional Fees	46,573.33
Refunds Rent	64,543.34 54,166.83
Repairs & Maintenance Security Taxes Phila BPT	9,899.05 1,512.00 71,610.82
Total Taxes	71,610.82
Telephone Trash Removal Travel Lodging/Airfare/Train	7,232.76 5,401.30 19,036.41 1,470.00
Parking & Tolls Total Travel	20,506.41
TULAL TIAVEL	20,000,43

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Profits and Losses Page 3 of 3

4:33 PM 07/15/16 Patelka Dental LLC **Profit & Loss**

January through December 2015 Cash Basis

	Jan - Dec 15	
Uniforms and Laundry Utilities	6,236.63 18,920.09	
Total Expense	2,082,422.46	
Net Ordinary Income	281,516.23	
Net Income	281,516.23	

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Patelka Dental LLC **Statement of Cash Flows** January through December 2015

	Jan - Dec 15
OPERATING ACTIVITIES	
Net Income	281,516.23
Net cash provided by Operating Activities	281,516.23
INVESTING ACTIVITIES	
L/R - Torresdale	-18,304.00
L/R - Art of Smile	-9,802.42
L/R- Wiesner Maria	-247.30
Cost of Finance: High Speed Capital	-3,134.00 -20,544.00
Cost of Finance:Yelfowstone Capital	-20,544.00
Net cash provided by Investing Activities	-52,031.72
FINANCING ACTIVITIES	***
L/P - HSC \$699.00	22,347.00
L/P - Yellowstone \$1333.33	1,491.11
L/P-Gena	17,000.00 25,000.00
L/P - Ella	-20,210.00
L/P - Igor Kutovoy L/P - Tatyana Quinn	-11,250.00
L/P - Wells Fargo (Oleg Gutman)	-15,000.00
L/P - Citizens Bank	-11,900.00
L/P - WebBank \$671.67	-175,305.87
L/P - Fast Business \$1,077	-30,791.00
L/P - Yellowstone \$1,399	3,883.00
L/P-High Speed Capital \$499	-2,934.00
Draw	-24,261.16
Draw:Personal Auto	2,313.17
Draw:Lana Kutovoy	3,407.89
Draw:Medical Expenses	-8,864.56
Draw:Health Insurance	-2,266.00
Capital Contributions:Lana Kutovoy	-7,739.08
Member Capital:Lana Kutovoy	- 7 3,956.43
Retained Earnings	22,685.45
Net cash provided by Financing Activities	-286,350.48
Net cash increase for period	-56,865.97
Cash at beginning of period	46,394.99
sh at end of period	-10,470.98

EXHIBIT D - MOST RECENT MONTHLY OPERATING REPORT

B 25C (Official Form 25C) (12/08)

UNITED STATES BANKRUPTCY COURT

In re Patelka Dental Management, LLC	, Case No.	16-14743		
Debtor	Small Busin	ess Case under Chap	oter 11	
	<u></u> .			
SMALL BUSINE	SS MONTHLY OPERATING REI	ORT		
Month: November, 2017	Date filed:	12/13/17		
Line of Business: Dental Practice Manager	nent NAISC Code:			n. kapanen in i waran
IN ACCORDANCE WITH TITLE 28, SECTION 17 PERJURY THAT I HAVE EXAMINED THE FOLL ACCOMPANYING ATTACHMENTS AND, TO THE CORRECT AND COMPLETE.	OWING SMALL BUSINESS MONTHL	Y OPERATING RE	PORT AN	ID THE
RESPONSIBLE PARTY:				
Clery				
Original Signature of Responsible Party				
Sveilana KuTovoy	:			
Printed Name of Responsible Party				
Questionnaire: (All questions to be answered on beha	lf of the debtor.)		Yes	No
1. IS THE BUSINESS STILL OPERATING?			Ø	▢
2. HAVE YOU PAID ALL YOUR BILLS ON TI	ME THIS MONTH?		CQI	0
3. DID YOU PAY YOUR EMPLOYEES ON TIME	ME?		1 2	
4. HAVE YOU DEPOSITED ALL THE RECEIP THIS MONTH?	TS FOR YOUR BUSINESS INTO THE	DIP ACCOUNT	Ø	
5. HAVE YOU FILED ALL OF YOUR TAX RE MONTH	TURNS AND PAID ALL OF YOUR TA	XES THIS	Ø	o
6. HAVE YOU TIMELY FILED ALL OTHER R	EQUIRED GOVERNMENT FILINGS?		Ø	О
7. HAVE YOU PAID ALL OF YOUR INSURAN	ICE PREMIUMS THIS MONTH?		Ø	
8. DO YOU PLAN TO CONTINUE TO OPERA	TE THE BUSINESS NEXT MONTH?		Ø	
9. ARE YOU CURRENT ON YOUR QUARTER	LY FEE PAYMENT TO THE U.S. TRU	STEE?	Ø.	
10. HAVE YOU PAID ANYTHING TO YOUR A MONTH?	TTORNEY OR OTHER PROFESSIONA	LS THIS	O	Ŋ
II. DID YOU HAVE ANY UNUSUAL OR SIGN MONTH?	IFICANT UNANTICIPATED EXPENSE	S THIS	o	Х
12. HAS THE BUSINESS SOLD ANY GOODS C ASSETS TO ANY BUSINESS RELATED TO		ERRED ANY	O	Ø
13. DO YOU HAVE ANY BANK ACCOUNTS O	PEN OTHER THAN THE DIP ACCOU	NT?	īΣī	П

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			Page 2
B 25	C (Official Form 25C) (12/08)		
14.	HAVE YOU SOLD ANY ASSETS OTHER THAN INVENTORY THIS MONTH?		
15.	DID ANY INSURANCE COMPANY CANCEL YOUR POLICY THIS MONTH?		(3)
16.	HAVE YOU BORROWED MONEY FROM ANYONE THIS MONTH?		\S
17.	HAS ANYONE MADE AN INVESTMENT IN YOUR BUSINESS THIS MONTH?		X
18.	HAVE YOU PAID ANY BILLS YOU OWED BEFORE YOU FILED BANKRUPTCY?	o	Ŋ
	TAXES		
	YOU HAVE ANY PAST DUE TAX RETURNS OR PAST DUE POST-PETITION TAX LIGATIONS?	J	Ø
BE	YES, PLEASE PROVIDE A WRITTEN EXPLANATION INCLUDING WHEN SUCH RETURNS WILL FILED, OR WHEN SUCH PAYMENTS WILL BE MADE AND THE SOURCE OF THE FUNDS FOR E PAYMENT.		
	(Exhibit A)		
	INCOME		
SHO	CASE SEPARATELY LIST ALL OF THE INCOME YOU RECEIVED FOR THE MONTH. THE LIST DULD INCLUDE ALL INCOME FROM CASH AND CREDIT TRANSACTIONS. (THE U.S. TRUSTEE // WAIVE THIS REQUIREMENT.)		
	TOTAL INCOME	\$	152,372
	SUMMARY OF CASH ON HAND		
	Cash on Hand at Start of Month	\$	7,763
	Cash on Hand at End of Month	\$	47,975
PL!	EASE PROVIDE THE TOTAL AMOUNT OF CASH CURRENTLY AVAILABLE TO YOU TOTAL (Exhibit B)	\$	47,975
	EXPENSES		
AC	CASE SEPARATELY LIST ALL EXPENSES PAID BY CASH OR BY CHECK FROM YOUR BANK COUNTS THIS MONTH. INCLUDE THE DATE PAID, WHO WAS PAID THE MONEY, THE RPOSE AND THE AMOUNT. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.)		
	TOTAL EXPENSES	\$	120,342
	(Exhibit C)		
	CASH PROFIT		
INC	COME FOR THE MONTH (TOTAL FROM EXHIBIT B)	\$	152,372
EXI	PENSES FOR THE MONTH (TOTAL FROM EXHIBIT C)	\$	120,342
	(Subtract Line C from Line B) CASH PROFIT FOR THE MONTH	\$	32,030

B 25C (Official Form 25C) (12/08)

UNPAID BILLS

PLEASE ATTACH A LIST OF ALL DEBTS (INCLUDING TAXES) WHICH YOU HAVE INCURRED SINCE THE DATE YOU FILED BANKRUPTCY BUT HAVE NOT PAID. THE LIST MUST INCLUDE THE DATE THE DEBT WAS INCURRED. WHO IS OWED THE MONEY. THE PURPOSE OF THE DEBT AND WHEN THE DEBT IS DUE. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.) 0 TOTAL PAYABLES \$ (Exhibit D) MONEY OWED TO YOU PLEASE ATTACH A LIST OF ALL AMOUNTS OWED TO YOU BY YOUR CUSTOMERS FOR WORK YOU HAVE DONE OR THE MERCHANDISE YOU HAVE SOLD. YOU SHOULD INCLUDE WHO OWES YOU MONEY, HOW MUCH IS OWED AND WHEN IS PAYMENT DUE. (THE U.S. TRUSTEE MAY WAIVE THIS REQUIREMENT.) 196,700 TOTAL RECEIVABLES \$ (Exhibit E) BANKING INFORMATION PLEASE ATTACH A COPY OF YOUR LATEST BANK STATEMENT FOR EVERY ACCOUNT YOU HAVE AS OF THE DATE OF THIS FINANCIAL REPORT OR HAD DURING THE PERIOD COVERED BY THIS REPORT. (Exhibit F) **EMPLOYEES** NUMBER OF EMPLOYEES WHEN THE CASE WAS FILED? 17 NUMBER OF EMPLOYEES AS OF THE DATE OF THIS MONTHLY REPORT? 17 **PROFESSIONAL FEES BANKRUPTCY RELATED:** PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? -0-TOTAL PROFESSIONAL FEES RELATING TO THE BANKRUPTCY CASE PAID SINCE THE FILING OF THE CASE? -0-NON-BANKRUPTCY RELATED: PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID DURING THIS REPORTING PERIOD? -0-TOTAL PROFESSIONAL FEES NOT RELATING TO THE BANKRUPTCY CASE PAID SINCE THE -0-FILING OF THE CASE?

Patelka Dental LLC Balance Sheet

As of November 30, 2017

	Nov 30, 17
ASSETS	
Current Assets	
Checking/Savings Check Wells Fargo 8017 good Checking - Wells Fargo 1199	43,039.44 4,935.34
Total Checking/Savings	47,974.78
Total Current Assets	47,974.78
Fixed Assets Fixed Assets Leasehold Improvements Phila, PA Torresdale Baku, Azerbaijan	409,953.84 15,304.00 6,966.60
Total Leasehold Improvements	432,224.44
Equipment Phila, PA Baku, Azerbaijan	645,510.30 11,146.56
Total Equipment	656,656.86
Mobile Unit Accumulated Depreciation	108,171.08 -756,787.81
Total Fixed Assets	440,264.57
Total Fixed Assets	440,264.57
Other Assets Legal Retainer Goodwill Accumulated Amortization Deferred BOA Interest Deferred WebBank Interest Deferred Yellwstne/EBF Interest Deferred HSC \$699 Interest Security Deposits Phila, PA Baku, Azerbaijan	10,000.00 52,001.00 -36,703.30 39,391.58 14,927.39 48,000.00 20,250.00 8,143.95 6,966.60
Total Security Deposits	15,110.55
Total Other Assets	162,977.22
TOTAL ASSETS	651,216.57
LIABILITIES & EQUITY Liabilities Long Term Liabilities L/P - Bank of America \$5,694.79 L/P - Citizens Bank L/P - Igor Kutovoy L/P - Tatyana Quinn L/P - WebBank/CAN Cap \$671.67 L/P - Ella L/P - Yellowstone/EBF \$1333.33 L/P - High Speed Capita \$699.00 L/P - Art of Smile, LLC	474,882.67 36,853.77 25,550.00 71,250.00 27,930.81 23,000.00 43,947.43 25,498.00 25,000.00
Total Long Term Liabilities	753,912.68
Total Liabilities	753,912.68

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11:39 AM 12/06/17 Cash Basis

Patelka Dental LLC Balance Sheet As of November 30, 2017

	Nov 30, 17
Equity	
Draw	
Lana Kutovoy	-67,100.00
Personal Taxes	-2,051.00
Health Insurance	-18,435.78
Medical Expenses	-6,416.35
Draw - Other	-20,920.05
Total Draw	-114,923.18
Member Capital	107 272 70
Lana Kutovoy	-187,273.78
Total Member Capital	-187,273.78
Net Income	199,500.85
Total Equity	-102,696.11
TOTAL LIABILITIES & EQUITY	651,216.57

Patelka Dental LLC Profit & Loss November 2017

	Nov 17
Ordinary Income/Expense	
Income	
Revenue	152,372.04
Total Income	152,372.04
Expense	
Automobile Expenses	813.66
Bank Charges	95.59
Continuing Education	59.00
Dental Lab Expenses	10,413.98
Dental Supplies	11,901.58
Donations	150.00
Dues & Subscriptions	94.07
Entertainment & Meals	1,328.85
Insurance	2,782.93
Office Expense	533.17
Outside Services	44,307.36
Payroll Expenses	30,767.85
Postage	108.99
Refunds	5,000.00
Rent	6,518.85
Repairs & Maintenance	225.00
Telephone	616.43
Trash Removal	413.77
Uniforms and Laundry	992.79
Utilities	3,217.74
Total Expense	120,341.61
Net Ordinary Income	32,030.43
Income	32,030.43

Patelka Dental LLC Profit & Loss Detail

Ту	pe Date	Num	Name	Memo	Debit	Credit	Balance
Ordina Inco	ry Income/Expense						
F	Revenue						
Deposit	HUMANA INS. 11/14/2017			377756 TRN*1*01942003468552		257.00	257.00
Deposit	11/27/2017			377756 TRN*1*01560009998249		148.00	405.00
	Total HUMANA INS.				0.00	405.00	405.00
	MET LIFE INS.						
Deposit	11/01/2017			1ML009052914 TRN*1*0079900		179.20	179.20
Deposit	11/02/2017 11/02/2017			1ML009095853 TRN*1*0079900 1ML009113776 TRN*1*0079900		176.00 489.70	355.20 844.90
Deposit Deposit	11/03/2017			1ML009134428 TRN*1*0079900		275.00	1,119.90
Deposit	11/06/2017			1ML009176859 TRN*1*0079900		223.80	1,343.70
Deposit	11/08/2017			1ML009257356 TRN*1*0079900		374.00	1,717.70
Deposit Deposit	11/09/2017 11/13/2017			1ML009315343 TRN*1*0079900 1ML009339715 TRN*1*0079900		26.00 109.00	1,743.70 1,852.70
Deposit	11/14/2017			1ML009401829 TRN*1*0079900		273.00	2,125.70
Deposit	11/15/2017			1ML009431073 TRN*1*0079900		372.80	2,498.50
Deposit Deposit	11/16/2017 11/17/2017			1ML009473778 TRN*1*0079900 1ML009515508 TRN*1*0079900		1,086.10 480.00	3,584.60 4,064.60
Deposit	11/17/2017			1ML009534433 TRN*1*0079900		680.50	4,745.10
Deposit	11/20/2017			1ML009618965 TRN*1*0079900		187.00	4,932.10
Deposit	11/20/2017			1ML009600158 TRN*1*0079900		145.00 2,060.20	5,077.10 7,137 <i>.</i> 30
Deposit Deposit	11/20/2017 11/24/2017			1ML009556972 TRN*1*0079900 1ML009742791 TRN*1*0079900		45.00	7,182.30
Deposit	11/27/2017			1ML009765077 TRN*1*0079900		227.50	7,409.80
Deposit	11/28/2017			1ML009831386 TRN*1*0079900		1,056.80	8,466.60
Deposit Deposit	11/28/2017 11/29/2017			1ML009809431 TRN*1*0079900 1ML009872624 TRN*1*0079900		454.00 157.00	8,920.60 9,077.60
Deposit				MILLOSOF 2024 THAT 1 007 0000	0.00	9,077.60	9,077.60
	Total MET LIFE INS.				0.00	9,077.60	9,077.00
Di4	AMERITAS LIFE GRP			NOV 0000656992 DNT PATELK		99.00	99.00
Deposit Deposit	11/01/2017 11/07/2017			NOV 0000659398 DNT PATELK		63.20	162.20
Deposit	11/08/2017			NOV 0000660052 DNT PATELK		248.80	411.00
Deposit	11/17/2017			NOV 0000664490 DNT PATELK		249.60	660.60
Deposit Deposit	11/21/2017 11/27/2017			NOV 0000665746 DNT PATELK NOV 0000667707 DNT PATELK		64.00 150.40	724.60 875.00
Deposit	11/30/2017			NOV 0000669652 DNT PATELK		249.60	1,124.60
	Total AMERITAS LIFE GRP				0.00	1,124.60	1,124.60
	UNCO						
Deposit	11/07/2017			1386815785 TRN*1*0902321681		68.05 268.51	68.05 336.56
Deposit Deposit	11/07/2017 11/07/2017			1386815785 TRN*1*0902319355 1386815785 TRN*1*0902314445		302.10	638.66
Deposit	11/14/2017			1386815785 TRN*1*0902328266		660.30	1,298.96
Deposit	11/14/2017			1386815785 TRN*1*0902333981	22.40	553.88	1,852.84 1,829.36
Check Deposit	11/17/2017 11/17/2017			PLUS ACHTRANS 171117 XXXX XXXXX7266 TRN*1*32934192*1	23.48	1,235.80	3,065.16
Deposit	11/21/2017			XXXXX6538 TRN*1*0902349038		1,692.06	4,757.22
Deposit	11/21/2017			1386815785 TRN*1*0902343602		1,135.81	5,893.03
Deposit	11/21/2017			1386815785 TRN*1*0902341314 PLUS ACHTRANS 171121 XXXX	0.82	49.00	5,942.03 5,941.21
Check Deposit	11/21/2017 11/21/2017			XXXXX7266 TRN*1*33152534*1	0.02	43.00	5,984.21
Deposit	11/27/2017			XXXXX6538 TRN*1*0902358247		1,023.25	7,007.46
Deposit	11/27/2017			1386815785 TRN*1*0902363122		292.27	7,299.73
	Total UNCO				24.30	7,324.03	7,299.73
	Cigna					±2.1.1.1	
Deposit	11/02/2017			1386815785 TRN*1*77232368*1		558.90 122.00	558.90 680.90
Deposit Deposit	11/03/2017 11/09/2017			1386815785 TRN*1*77366739*1 1386815785 TRN*1*77534303*1		1,250.40	1,931.30
Deposit	11/16/2017			1386815785 TRN*1*77841367*1		816.20	2,747.50
Deposit	11/24/2017			1386815785 TRN*1*78140524*1		995.20	3,742.70
Deposit	11/30/2017			1386815785 TRN*1*78386305*1		1,043.20	4,785.90
	Total Cigna				0.00	4,785.90	4,785.90
	AETNA			TDM#41947204500006440*40006		470 40	176.40
Deposit	11/03/2017 11/10/2017	Aetna Aetna		TRN*1*817304520006112*10660 TRN*1*817311510005741*10660		176.40 268.00	176.40 444.40
Deposit Deposit	11/17/2017	Aetna		TRN*1*817318540004561*10660		137.00	581.40
Deposit	11/17/2017	Aetna		TRN*1*817318550004311*10660		56.00	637.40
	Total AETNA				0.00	637.40	637.40
	1776 H&W FUND			m m -		****	00100
Deposit	11/03/2017			Patelka Dental LLC		364.00	364.00
	Total 1776 H&W FUND				0.00	364.00	364.00

Patelka Dental LLC Profit & Loss Detail

Ту	pe Date	Num	Name	Memo	Debit	Credit	Balance
Deposit	DDPA 11/01/2017 11/03/2017 11/08/2017 11/08/2017 11/09/2017 11/09/2017 11/15/2017 11/17/2017 11/12/2017 11/22/2017 11/22/2017			240625101002 TRN*1*20171029 240625101002 TRN*1*20171029 240625101002 TRN*1*20171031 240625101002 TRN*1*20171103 240625101002 TRN*1*20171105 240625101002 TRN*1*20171105 240625101002 TRN*1*20171112 240625101002 TRN*1*20171114 240625101002 TRN*1*201711112 240625101002 TRN*1*201711112 240625101002 TRN*1*20171117 240625101002 TRN*1*20171117		560.00 738.80 1,486.20 306.00 907.50 1,180.20 43.00 1,152.80 3,244.60 420.40 69.00	560.00 1,298.80 2,785.00 3,091.00 3,998.50 5,178.70 5,221.70 6,374.50 9,619.10 10,039.50 10,108.50
	Total DDPA				0.00	10,108.50	10,108.50
Deposit Deposit Deposit Deposit Deposit	11/01/2017 11/08/2017 11/15/2017 11/20/2017 11/29/2017			112718BU Patelka Dental Manag 112718BU Patelka Dental Manag 112718BU Patelka Dental Manag 112718BU Patelka Dental Manag 112718BU Patelka Dental Manag		4,448.00 3,335.00 4,049.00 1,328.00 5,086.00	4,448.00 7,783.00 11,832.00 13,160.00 18,246.00
	Total AVESIS				0.00	18,246.00	18,246.00
Deposit Deposit Deposit Deposit	Counter deposits 11/01/2017 11/02/2017 11/03/2017 11/06/2017 11/06/2017			:218010374785 :212050185800		1,200.00 1,131.20 684.56 365.40 321.00	1,200.00 2,331.20 3,015.76 3,381.16 3,702.16
Deposit	11/07/2017 11/08/2017 11/09/2017 11/09/2017 11/10/2017 11/10/2017 11/13/2017 11/14/2017 11/20/2017 11/20/2017 11/20/2017 11/20/2017 11/20/2017 11/20/2017					509.50 2,076.36 677.80 200.00 6,101.52 650.50 3,001.68 1,574.00 1,577.60 128.40 1,786.60 1,175.60 1,681.40 2,484.00	4,211.66 6,288.02 6,965.82 7,165.82 13,267.34 13,917.84 16,919.52 18,493.52 20,071.12 20,199.52 21,986.12 23,161.72 24,843.12 27,327.12
	Total Counter deposits				0.00	27,327.12	27,327.12
Check Deposit	Credit card deposits 11/01/2017 11/02/2017 11/03/2017 11/06/2017 11/06/2017 11/09/2017 11/09/2017 11/10/2017 11/13/2017 11/13/2017 11/14/2017 11/14/2017 11/16/2017 11/20/2017 11/20/2017 11/20/2017 11/27/2017 11/27/2017 11/27/2017 11/27/2017 11/27/2017 11/27/2017 11/27/2017 11/27/2017			-0425162301 11/02 -0425162301 11/03 -0425162301 11/06 -0425162301 11/06 -0425162301 11/07 -0425162301 11/07 -0425162301 11/10 -0425162301 11/13 -0425162301 11/13 -0425162301 11/14 -0425162301 11/14 -0425162301 11/17 -0425162301 11/17 -0425162301 11/17 -0425162301 11/20 -0425162301 11/20 -0425162301 11/27 -0425162301 11/27 -0425162301 11/27 -0425162301 11/27 -0425162301 11/27 -0425162301 11/27 -0425162301 11/27 -0425162301 11/27 -0425162301 11/28 -0425162301 11/28 -0425162301 11/28 -0425162301	2,079.85	1,780.20 588.00 408.85 1,425.40 1,992.50 7,230.40 358.80 1,787.85 1,842.00 1,079.90 1,317.49 1,096.00 250.00 947.82 1,250.00 57.60 2,230.45 7,508.33 4,441.40	-2,079.85 -299.65 268.35 677.20 2,102.60 4,095.10 11,325.50 11,684.30 13,472.15 15,314.15 16,394.05 17,7711.54 18,807.54 19,057.54 20,005.36 21,255.36 21,312.96 23,543.41 31,051.74
	Total Credit card deposi	ts			2,079.85	37,572.99	35,493.14
Deposit Deposit Deposit	DENTAL BENEFIT 11/03/2017 11/09/2017 11/13/2017			XXXXX7266 TRN*1*1309785935 XXXXX7266 TRN*1*1310942747 XXXXX7266 TRN*1*1311625804	***************************************	591.00 90.00 446.25	591.00 681.00 1,127.25
	Total DENTAL BENEFIT	Г			0.00	1,127.25	1,127.25
Deposit Deposit Deposit Deposit Deposit	DENTAQUEST LLC 11/03/2017 11/03/2017 11/17/2017 11/17/2017 11/17/2017			2506624604 PATELKA DENTAL 2506624605 PATELKA DENTAL 2506641205 PATELKA DENTAL 1816639736 PATELKA DENTAL 2506641387 PATELKA DENTAL		862.20 541.80 660.60 248.00 220.50	862.20 1,404.00 2,064.60 2,312.60 2,533.10
	Total DENTAQUEST LL	С			0.00	2,533.10	2,533.10

Patelka Dental LLC Profit & Loss Detail

•	Туре	Date	Num	Name	Memo	Debit	Credit	Balance
Deposit Deposit Deposit Deposit Check Check		11/03/2017 11/08/2017 11/10/2017 11/13/2017 11/15/2017 11/21/2017		GE Money GE Money GE Money GE Money GE Money	534812028493552 PATELKA DE 534812028493552 PATELKA DE 534812028493552 PATELKA DE 534812028493552 PATELKA DE SYNCHRONY BANK BTOT DEP SYNCHRONY BANK MTOT DEP	1,133.90 31.99	2,013.74 1,243.06 282.30 636.12	2,013.74 3,256.80 3,539.10 4,175.22 3,041.32 3,009.33
	Total GE Mo	oney				1,165.89	4,175.22	3,009.33
Deposit Deposit Deposit Deposit		Mercy 11/10/2017 11/10/2017 11/10/2017 11/27/2017 11/27/2017			7184 PATELKA DENTAL LLC PATELKA DENTAL LLC 64231 PATELKA DENTAL LLC PATELKA DENTAL LLC 64231 PATELKA DENTAL LLC		311.20 1,747.30 3,188.30 3,480.80 415.00	311.20 2,058.50 5,246.80 8,727.60 9,142.60
	Total Keysto	one Mercy				0.00	9,142.60	9,142.60
Deposit Deposit Deposit Deposit Deposit		JRY DEPT PRO 11/01/2017 11/08/2017 11/15/2017 11/22/2017 11/29/2017	OMISE		AP031346144 TRN*1*710075170 AP031443195 TRN*1*710075180 AP031506792 TRN*1*710075190 AP031605503 TRN*1*710075200 AP031683889 TRN*1*710075210		3,205.25 4,982.10 3,768.80 4,638.52 3,610.85	3,205.25 8,187.35 11,956.15 16,594.67 20,205.52
	Total PA TR	REASURY DEP	F PROMISE			0.00	20,205.52	20,205.52
Deposit Deposit Deposit Deposit Deposit Deposit Deposit		thcare 11/03/2017 11/03/2017 11/03/2017 11/03/2017 11/07/2017 11/17/2017 11/17/2017 11/17/2017			64231 PATELKA DENTAL LLC 64231 PATELKA DENTAL LLC XXXXX7266 TRN*1*1309765936 XXXXX7266 TRN*1*1310245954 XXXXX7266 TRN*1*1310694901 64231 PATELKA DENTAL LLC XXXXX7266 TRN*1*1312791724 XXXX7266 TRN*1*1313101466		155.00 30.00 46.75 162.00 520.00 243.00 17.00 311.50	155.00 185.00 231.75 393.75 913.75 1,156.75 1,173.75 1,485.25
	Total United	ihealthcare				0.00	1,485.25	1,485.25
	Total Revenue					3,270.04	155,642.08	152,372.04
To	otal Income					3,270.04	155,642.08	152,372.04
Ex	cpense Automobile Ex Cars	cpenses						
Check	Auto Le	ase 11/30/2017		T.M.C.C.	RECURRINGxxxxxxTL427 ON 11	460.00		460.00
	Total Au	to Lease				460.00	0.00	460.00
011	Gas	4410710047		QV	DUDOLIAGE AARO DUU ADEL DIA	05.03		25.27
Check	Total Ga	11/27/2017		Wawa	PURCHASE 11/26 PHILADELPH	35.67	0.00	35.67 35.67
	Insuran					35.67	0.00	35.67
Check		11/28/2017		ERIE INSURANCE	Q122809330 Igor Kutovoy	317.99		317.99
	Total Ins	urance				317.99	0.00	317.99
	Total Cars					813.66	0.00	813.66
	Total Automobi	le Expenses				813.66	0.00	813.66
Check Check Check Check Check Check		11/08/2017 11/13/2017 11/20/2017 11/30/2017 11/30/2017 11/30/2017		ONLINE DEP DETAIL & IMAGE Chase Bank Wells Fargo Financing Cash Deposited Fee	TRANSACTION FEE FEE	3.00 0.09 5.00 14.00 22.50 51.00		3.00 3.09 8.09 22.09 44.59 95.59
	Total Bank Cha	arges				95.59	0.00	95.59
~ ,	Continuing Ed			BEADING A CONTRACTOR	DUDOULOG 11/00 010 001 0700			50.00
Check		11/30/2017		PENNWELL CONTINUIN	PURCHASE 11/29 918-831-9720	59.00		59.00
	Total Continuin	-				59.00	0.00	59.00
Check Check Check Check Check Check		11/07/2017 11/07/2017 11/07/2017 11/13/2017 11/17/2017 11/22/2017	2107 2113 2127 2146 2148 2155	Aveas Dental Lab Inc. Aveas Dental Lab Inc.	aug fin sept#1	500.00 4,609.98 500.00 500.00 3,804.00 500.00		500.00 5,109.98 5,609.98 6,109.98 9,913.98 10,413.98
	Total Dental La	b Expenses				10,413.98	0.00	10,413.98

Patelka Dental LLC Profit & Loss Detail

-	Туре	Date Nun	n Name	Memo	Debit	Credit	Balance
	Dental Supplies						
Check	Implant Surgeri 11/2	les 8/2017	Zest Anchors Inc.	PURCHASE 11/27 760-743-7744	405.50		405.50
Check	11/2	9/2017	Dentsply Inc	RECURRING PAYMENT 11/28 7	1,803.45		2,208.95
Check	11/2	9/2017	Dentsply Inc	RECURRING PAYMENT 11/28 7	1,918.25		4,127.20
	Total Implant Su	rgeries			4,127.20	0.00	4,127.20
	Orthodontics						
Check Check		0/2017 2 <i>/</i> 2017	DYNA FLEX 800-4894020 MO	PURCHASE 11/16 800-4894020 PURCHASE 11/21 SAN JOSE C	235.14 250.00		235.14 485.14
Check		9/2017	Align Technology, Inc	PURCHASE 11/27 800-4894020	18.53		503.67
Check	11/2	9/2017		PURCHASE 11/28 SAN JOSE C	250.00		753.67
	Total Orthodonti	ics			753.67	0.00	753.67
	Dental Supplies	s - Other					
Check	11/0	1/2017	Amazon.com	PURCHASE 10/31 AMZN.COM/B	54.89		54.89
Check		01/2017	TRADENT SUPPLY	PURCHASE 10/31 347-2817836	69.40		124.29 174.89
Check Check		01/2017 01/2017 2092	Dentsply Inc Alpha Beta Dental Inc	PURCHASE 10/31 800-877-0020 0589	50.60 1,986,84		2,161.73
Check		2/2017	PAYPAL *VEPORT	PURCHASE 11/01 402-935-7733	12.72		2,174.45
Check		2/2017	PAYPAL *WEIFANG123	PURCHASE 11/01 402-935-7733	148.99		2,323.44
Check		2/2017	PAYPAL *HENANBAIST	PURCHASE 11/01 402-935-7733	60.77		2,384.21
Check		2/2017	Amazon.com	PURCHASE 11/01 AMZN.COM/B	126.14		2,510.35
Check Check)2/2017)2/2017	Amazon.com AMAZON MKTPLACE	PURCHASE 11/01 AMZN.COM/B PURCHASE 11/01 AMZN.COM/B	126.14 50.98		2,636.49 2,687.47
Check		6/2017	DENTAL PRODX	PURCHASE 11/03 901-347-3104	197.45		2,884.92
Check		8/2017	Amazon.com	PURCHASE 11/08 AMZN.COM/B	67.99		2,952.91
Check		9/2017	ANAHEIM DENTAL SUP	PURCHASE 11/07 ANAHEIM CA	64.75		3,017.66
Check		9/2017	Amazon.com	PURCHASE 11/08 AMZN.COM/B	16.39		3,034.05 3,401.55
Check Check		3/2017 3/2017	Glove World Amazon.com	PURCHASE 11/10 610-4616100 PURCHASE 11/11 AMZN.COM/B	367.50 58.23		3,459.78
Check		3/2017	Amazon.com	PURCHASE 11/10 AMZN.COM/B	18.99		3,478.77
Check	11/1	4/2017	Amazon.com	PURCHASE 11/14 AMZN.COM/B	37.99		3,516.76
Check		5/2017	PAYPAL *CLOUDENTER	PURCHASE 11/14 402-935-7733	10.75		3,527.51
Check Check		5/2017 5/2017	PAYPAL *WENQINGFAN PAYPAL *LIJINRONG	PURCHASE 11/14 402-935-7733 PURCHASE 11/14 402-935-7733	8.41 4.99		3,535.92 3,540.91
Check		5/2017	PAYPAL *A1HANDPIEC	PURCHASE 11/14 402-935-7733	258.20		3,799.11
Check		5/2017	Amazon.com	PURCHASE 11/15 AMZN.COM/B	7.28		3,806.39
Check		5/2017	Amazon.com	PURCHASE 11/14 AMZN.COM/B	21.72		3,828.11
Check		5/2017	Lares Research	PURCHASE 11/14 530-345-1767	220.32		4,048.43 4,073.42
Check Check		5/2017 6/2017	Amazon.com PAYPAL *DENTALWORK	PURCHASE 11/14 AMZN.COM/B PURCHASE 11/15 402-935-7733	24.99 169.00		4,242.42
Check		6/2017	PAYPAL *CHINASKYSE	PURCHASE 11/15 402-935-7733	30,76		4,273.18
Check	11/1	6/2017	PAYPAL *LIJIAN	PURCHASE 11/15 402-935-7733	33.80		4,306.98
Check		6/2017 2116	Citi Cards	01/00/1405 / //7 144511 0011/0	1,000.00		5,306.98
Check		7/2017	Amazon.com	PURCHASE 11/17 AMZN.COM/B PURCHASE 11/16 866-221-8397	87.89 330.60		5,394.87 5,725.47
Check Check		7/2017 7/2017	Hey Dental Amazon.com	PURCHASE 11/16 600-221-0397 PURCHASE 11/16 AMZN.COM/B	151.36		5,876.83
Check		20/2017	PAYPAL *TOMIKKH	PURCHASE 11/17 402-935-7733	28.34		5,905.17
Check		20/2017	PAYPAL *MOVEIT	PURCHASE 11/17 402-935-7733	29.00		5,934.17
Check		20/2017	ANAHEIM DENTAL SUP	PURCHASE 11/16 ANAHEIM CA	143.75		6,077.92
Check Check		20/2017 22/2017	Amazon.com DENTAL DIAMOND SUPPPLY	PURCHASE 11/17 AMZN.COM/B PURCHASE 11/21 818-8374472	137.69 23.88		6,215.61 6,239.49
Check		24/2017	INTERNATIONAL DENT	PURCHASE 11/22 305-817-2800	31,48		6,270.97
Check		24/2017	Amazon.com	PURCHASE 11/22 AMZN.COM/B	70.24		6,341.21
Check		24/2017	Amazon.com	PURCHASE 11/23 AMZN.COM/B	55.19		6,396.40
Check		24/2017	ARNOLD DENTAL SUPP	PURCHASE 11/22 425-712-8786	19.65 112.87		6,416.05 6,528.92
Check Check		29/2017 29/2017		PURCHASE 11/28 800-543-2577 PURCHASE 11/28 NEW YORK	216.50		6,745.42
Check		29/2017	Amazon.com	PURCHASE 11/28 AMZN.COM/B	51.00		6,796.42
Check		29/2017	Amazon.com	PURCHASE 11/29 AMZN.COM/B	224.29		7,020.71
	Total Dental Sur	oplies - Other			7,020.71	0.00	7,020.71
	Total Dental Suppli	•			11,901.58	0.00	11,901.58
	•••	63			17,507.50	0.00	. 1,00 1.00
Check	Donations 11/3	30/2017 2161	Lubavitch Center For Russian J		150.00		150.00
	Total Donations				150.00	0.00	150.00
		iono			100.00	5.55	
Check	Dues & Subscripti 11/1	ions 13/2017	MAG*RENEW WOMAN'S	PURCHASE 11/12 800-929-2691	7.99		7.99
Check		3/2017	JSC WENGEORGIA	PURCHASE INTL 11/12 TBILISI	3.11		11.10
Check		3/2017	MAG*RENEW YOGA JOU	PURCHASE 11/11 800-929-2691	15.97		27.07
Check		24/2017	MAG*RENEW MARTHA	PURCHASE 11/23 800-929-2691	28.00		55.07 70.07
Check Check		24/2017 24/2017	MAG*RENEW HOUSE MAG*RENEW EVER	PURCHASE 11/23 800-929-2691 PURCHASE 11/23 800-929-2691	15.00 24.00		94.07
•	Total Dues & Subso				94.07	0.00	94.07
	Entertainment & M	·					
Check)8/2017	SHISH KABOB PALACE	PURCHASE 11/07 PHILADELPH	183.80		183.80
Check	11/2	20/2017	Withdrawal	11/19 ATM ASB FAIRMONT HOT	474.21		658.01
Check		22/2017	Boston Market	PURCHASE 11/21 ABINGTON P	82.36		740.37
Check	11/3	30/2017	SAKS NY REST	PURCHASE 11/28 NEW YORK	588.48		1,328.85
	Total Entertainment	t & Meals			1,328.85	0.00	1,328.85

11:40 AM 12/06/17 Cash Basis

Patelka Dental LLC Profit & Loss Detail

November 2017

Тур	e Date	Num	Name	Memo	Debit	Credit	Balance
	surance						
Check	Workers Compensation 11/07/2017		INSURELINX INC. INS PREM E	INSURELINX INC. INS PREM EF	30.85		30.85
Check	11/14/2017		INSURELINX INC. INS PREM E	INSURELINX INC. INS PREM EF	29.99		60.84
Check	11/21/2017		INSURELINX INC. INS PREM E	INSURELINX INC. INS PREM EF	30.90		91.74
Check	11/28/2017			INSURELINX INC. INS PREM EF	31.55		123.29
	Total Workers Compensation	n			123.29	0.00	123.29
Check	Insurance - Other 11/28/2017		PENN NAT'L INS.	ON-LINE xxxxx64748 ON 11-28	2,659.64		2,659.64
	Total Insurance - Other			_	2,659.64	0.00	2,659.64
То	otal Insurance				2,782.93	0.00	2,782.93
Of	fice Expense						
Check	11/08/2017		QuickBook Banking		14.95		14.95
Check	11/10/2017	2132	Lapsley Printing		124.20		139.15
Check	11/20/2017		Ctowles	PURCHASE 11/18 ORBITZ.COM	35.00		174.15
Check Check	11/20/2017 11/21/2017		Staples NESPRESSO	PURCHASE 11/17 800-3333330 PURCHASE 11/20 888-637-7737	101.11 117.00		275.26 392.26
Check	11/24/2017		McDonalds Av.Paper and Plasti	PURCHASE 11/22 BROOKLYN	130.92		523,18
Check	11/27/2017		APL* ITUNES.COM	PURCHASE 11/26 866-712-7753	9.99		533.17
То	otal Office Expense				533.17	0.00	533.17
Οι	utside Services						
	Billing expenses			DUDGULAGE 40104 000 700 F4F0	24.22		24.00
Check Check	11/01/2017 11/13/2017		NATELECATTACHMENT Henry Schein Techno	PURCHASE 10/31 800-782-5150 PURCHASE 11/10 866-739-7695	34.00 204.58		34.00 238.58
Check	11/16/2017		HSPS ESERVICES	PURCHASE 01/11 866-739-7695	358.66		597.24
Check	11/17/2017		HSPS ESERVICES	PURCHASE 01/11 866-739-7695	32.35		629.59
Check	11/30/2017		Henry Schein Techno	PURCHASE 11/29 800-472-4346	662.19		1,291.78
	Total Billing expenses				1,291.78	0.00	1,291.78
Check	Network/Sales/Support 11/30/2017		Compass Network Group Inc.	PURCHASE 11/29 717-2992383	500.00		500.00
	Total Network/Sales/Suppor	t		•	500.00	0.00	500.00
	Payroli Prep						
Check	11/03/2017		WF PAYROLL	171117 3210489 PAYROLL DD	73.30		73.30
Check	11/10/2017		WF PAYROLL	171117 3210489 PAYROLL DD	73.30		146.60
Check	11/16/2017		WF PAYROLL	171117 3210489 PAYROLL DD	73.30		219,90
Check	11/24/2017		WF PAYROLL	171117 3210489 PAYROLL DD	73.30		293.20
	Total Payroll Prep				293.20	0.00	293.20
Charle	Temp Agency 11/08/2017		H&R Dental Power,Inc	PURCHASE 11/06 215-735-6929	194.94		194.94
Check Check	11/15/2017		H&R Dental Power,Inc	PURCHASE 11/13 215-735-6929	73.44		268.38
	Total Temp Agency			-	268.38	0.00	268.38
	Cleaning						
Check	11/09/2017	2124		10/30-11/02	250.00		250.00
Check	11/09/2017	2128			1,000.00		1,250.00
Check	11/13/2017	2129		11/06-11/09	250.00		1,500.00
Check Check	11/16/2017 11/27/2017	2144 2156		11/13-11/16 11/18-11/24	250.00 300.00		1,750.00 2,050.00
	Total Cleaning			_	2,050.00	0.00	2,050.00
	Dentists						
	Dr. Patel						
	Services				0.000.00		0.000.00
Check	11/09/2017	2100			2,800.00 2,800.00		2,800.00 5,600.00
Check Check	11/13/2017 11/27/2017	2139 2147			2,800.00		8,400.00
	Total Services			- Aug	8,400.00	0.00	8,400.00
	Health Ins		-u	manual control of the			22.52
Check	11/21/2017		SilverScript	RECURRINGxxxx69320 ON 11-21	28.50		28.50
	Total Health Ins			-	28.50	0.00	28.50
	Total Dr. Patel				8,428.50	0.00	8,428.50

11:40 AM 12/06/17 Cash Basis

Patelka Dental LLC Profit & Loss Detail

November 2017

-	Туре	Date	Num	Name	Memo	Debit	Credit	Balance
Ob - :	Dentists		0407		446447		-	***************************************
Check Check		11/01/2017 11/02/2017	2105 2103		11/01/17	400.00 2,000.00		400.00 2,400.00
Check		11/03/2017	2093		10/3,10/25	2,000.00		4,400.00
Check Check		11/03/2017 11/03/2017	2098 2101		10/06/17 sept #2	770.00 1,600.00		5,170.00 6,770.00
Check		11/08/2017	2123		11/08	400.00		7,170.00
Check Check		11/10/2017 11/10/2017	2104 2110		10/30.11/01 10/13	2,000.00 770.00		9,170.00 9,940.00
Check		11/10/2017	2114		10/10	1,000.00		10,940.00
Check Check		11/10/2017 11/13/2017	2115 2108			400.00 570.00		11,340.00
Check		11/14/2017	2133		11/09	337.50		11,910.00 12,247.50
Check Check		11/15/2017 11/16/2017	2143 2138		11/15	400.00		12,647.50
Check		11/17/2017	2121		11/06,11/08	1,400.00 2,000.00		14,047.50 16,047.50
Check		11/17/2017	2122		10/20	770.00		16,817.50
Check Check		11/24/2017 11/24/2017	2150 2141		10/27/17 11/13,11/15	770.00 2,000.00		17,587.50 19,587.50
Check		11/24/2017	2151			2,000.00		21,587.50
Check Check		11/29/2017 11/30/2017	2162 2158		11/29/17	400.00 1,400.00		21,987.50 23,387.50
		ntists - Other				23,387.50	0.00	23,387.50
	Total Dentis	its				31,816.00	0.00	31,816.00
	Hygienists							
Check Check		11/02/2017 11/03/2017	2099 2106		10/13/17 10/15-10/21	271.00 1,446.00		271.00 1,717.00
Check		11/09/2017	2112		10/13-10/21	149.00		1,866.00
Check Check		11/10/2017	2111		10/27	272.00		2,138.00
Check		11/10/2017 11/10/2017	2120 2126		10/28 10/22-10/28	291.00 1,545.00		2,429.00 3,974.00
Check		11/14/2017	2135		36.00 11/10	259.00		4,233.00
Check Check		11/17/2017 11/20/2017	2145 2130		10/29-11/04 OCT #2	1,720.00 215.00		5,953.00 6,168.00
Check		11/22/2017	2152		11/05-11/12	1,640.00		7,808.00
Check		11/24/2017	2149		11/03	280.00		8,088.00
	Total Hygier					8,088.00	0.00	8,088.00
	Total Outside S					44,307.36	0.00	44,307.36
	Payroll Expension & \							
Check		11/03/2017		WF PAYROLL	171106 3137053 PAYROLL DD	5,262.01		5,262.01
Check Check		11/10/2017 11/16/2017		WF PAYROLL WF PAYROLL	171113 3172195 PAYROLL DD 171117 3210489 PAYROLL DD	5,113.15 5,261.84		10,375.16 15,637.00
Check		11/24/2017		WF PAYROLL	171117 3210489 PAYROLL DD	5,376.96		21,013.96
	Total Salari	es & Wages				21,013.96	0.00	21,013.96
Charl.		es - Auto Deb	it	ME DAVDOLL	DAVOOLL DUILADELDUIA	0.005.04		0.005.04
Check Check		11/02/2017 11/03/2017		WF PAYROLL WF PAYROLL	PAYROLL PHILADELPHIA, PAYROLL PHILADELPHIA,	2,035.64 1,921.16		2,035.64 3,956.80
Check		11/13/2017		WF PAYROLL	PAYROLL PHILADELPHIA,	1,876.27		5,833.07
Check Check		11/16/2017 11/24/2017		WF PAYROLL WF PAYROLL	PAYROLL PHILADELPHIA, PAYROLL PHILADELPHIA.	1,942.45 1,978.37		7,775.52 9,753.89
OHOUR		I Taxes - Auto	Debit	W TATROLL	TATROLE PRICADEL TIIA,	9,753.89	0.00	9,753.89
	Total Payroll Ex					30,767.85	0.00	30,767.85
	Postage							
Check		11/10/2017		Pitney Bowes,Inc	ON-LINE xxxxxxxxxx72105 ON 1	108.99		108.99
	Total Postage					108.99	0.00	108.99
Check		11/10/2017	2134			2,500.00		2,500.00
Check		11/13/2017	2140			2,500.00		5,000.00
	Total Refunds					5,000.00	0.00	5,000.00
Check		11/13/2017		Bells Corner Hidden Forrest LLC	Oct MADE IN A BRANCH/STORE	5,518.85		5,518.85
Check		11/27/2017	2131	CHMO Organization LLC	nov	1,000.00		6,518.85
	Total Rent					6,518.85	0.00	6,518.85
Check	Repairs & Mai	11/07/2017	2109		electric	225.00		225.00
	Total Repairs 8	Maintenance				225.00	0.00	225.00
.	Telephone	44/04/00:~		W Adabilia	474004 0700004 84751 111 1111	807.77		
Check Check		11/01/2017 11/29/2017		T Mobile T Mobile	171031 0780624 PATELKA DEN PURCHASE 11/28 800-937-8997	395.38 221.05		395.38 616.43
	Total Telephon					616.43	0.00	616.43
	, olopiloli	-				0.10.70	0.00	0.0.40

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11:40 AM 12/06/17 Cash Basis Patelka Dental LLC Profit & Loss Detail

November 2017

	Type Date	Num	Name	Memo	Debit	Credit	Balance
Check Check	Trash Removal 11/09/2017 11/14/2017		BioHaz Solutions, Inc. Waste Management	PURCHASE 11/08 570-6452180 ON-LINE xxxxxxxxx24484 ON 1	42.00 371.77	-	42.00 413.77
	Total Trash Removal				413.77	0.00	413.77
Check Check Check Check	Uniforms and Laundry 11/02/2017 11/07/2017 11/13/2017 11/30/2017 Total Uniforms and Laundry		Carriage Trade Cleaners Uniform Advantage Uniform Advantage Carriage Trade Cleaners	RECURRING PAYMENT 11/01 2 PURCHASE 11/06 800-283-8708 PURCHASE 11/11 800-283-8708 RECURRING PAYMENT 11/29 2	408.75 50.92 76.97 456.15 992.79	0.00	408.75 459.67 536.64 992.79
Check Check Check Check Check Check	Utilities 11/08/2017 11/13/2017 11/13/2017 11/13/2017 11/12/1/2017 11/27/2017		Verizon Bells Corner Hidden Forrest LLC Bells Corner Hidden Forrest LLC Bells Corner Hidden Forrest LLC PGW Comcast	ON-LINE xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx	562.02 243.00 988.79 1,293.59 1.00 129.34		562.02 805.02 1,793.81 3,087.40 3,088.40 3,217.74
	Total Utilities				3,217.74	0.00	3,217.74
T	otal Expense				120,341.61	0.00	120,341.61
Net (Ordinary Income				123,611.65	155,642.08	32,030.43
Net Inco	ome				123,611.65	155,642.08	32,030.43

Date:	12/03/2017									Page:	1
	CE COMPANY/GROU SENT SERV SUBSCRIBER	/ICE	TRACER ON SIGN. OF BENEF	PHONE # HOLD RE-SENT ITS ID NUM	GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	
Aetna/Aetr				(800)451-7715	00150000330000)1		OCCUR. DE SERVE EN LA EL MANIMA ANTI-ANTI-ANTI-ANTI-ANTI-ANTI-ANTI-ANTI-	and the second s	AAAAAAAA SAYSIISTA SAYAAAAA AA	
	/ 12/01/2017 11/17 Ion Corporation	/2017			218.00	300.00	0.00	0.00	0.00	300.00	
Primary	11/27/2017 11/25	/2017			619405-13-001 0.00	200.00	0.00	0.00	0.00	200.00	
	Clinical Research I 11/29/2017 11/27			(800)451-7715	06595670310000		0.00	0.00	0.00	200.00	
	Financial Services 11/28/2017 11/28/			(877)238-6200	165.00 0015000033000 0	200.00)1	0.00	0.00	0.00	200.00	
Aetna/Ree	d Elsevier Inc				0.00 698434-42-031	250.00	0.00	0.00	0.00	250.00	
	09/26/2017 09/23			(800)487-5553	0.00 10-518087-1	0.00	0.00	150.00	0.00	150.00	
	11/16/2017 11/16				360.00	500.00	0.00	0.00	0.00	500.00	
	11/19/2017 11/18/				215.40	700.00	0.00	0.00	0.00	700.00	
_	11/30/2017 11/27 Workers Philadelphi		os Workers Phila	adelı(215)535-0800	0.00	1300.00	0.00	0.00	0.00	1300.00	
Primary	11/10/2017 11/08, alth Partners Medica	/2017		(888)209-1243	1139.00	1625.00	0.00	0.00	0.00	1625.00	
Primary	11/30/2017 11/30/	/2017			250.00	500.00	0.00	0.00	0.00	500.00	
	11/30/2017 11/30/	/2017		(855)536-7764	250.00	500.00	0.00	0.00	0.00	500.00	
	09/12/2017 08/15	/2017 		(855)536-7764	0.00	0.00	0.00	500.00	0.00	500.00	
Primary	11/30/2017 11/30/			(833)336-7764	0.00	500.00	0.00	0.00	0.00	500.00	
	12/01/2017 11/30/ orporated/Avesis	/2017		(888)209-1243	520.00	520.00	0.00	0.00	0.00	520.00	
	10/27/2017 10/27	/2017		(000)203-1243	0.00	0.00	225.00	0.00	0.00	225.00	
Primary	11/13/2017 11/11/	2017			0.00	1250.00	0.00	0.00	0.00	1250.00	
Primary	11/17/2017 11/15/				300.00	350.00	0.00	0.00	0.00	350.00	
Ĭ					288.00	300.00	0.00	0.00	0.00	300.00	
	11/17/2017 11/15/				350.00	400.00	0.00	0.00	0.00	400.00	
	11/17/2017 11/15/				375.00	425.00	0.00	0.00	0.00	425.00	
	11/17/2017 11/15/				150.00	200.00	0.00	0.00	0.00	200.00	
Í	11/17/2017 11/15/				420.00	420.00	0.00	0.00	0.00	420.00	
Í	11/19/2017 11/17/				450.00	500.00	0.00	0.00	0.00	500.00	
	11/19/2017 11/19/				375.00	375.00	0.00	0.00	0.00	375.00	
	11/20/2017 11/18/				450.00	500.00	0.00	0.00	0.00	500.00	
	11/20/2017 11/18/				450.00	450.00	0.00	0.00	0.00	450.00	
Primary	11/20/2017 11/20/	2017			81.00	250.00	0.00	0.00	0.00	250.00	

Date:	12/03/2017		Pateiki	a Dental LLC					Page:	2
	E COMPANY/GROUP PL SENT SERVICE SUBSCRIBER	AN P TRACER ON HOLI ASSIGN. OF BENEFITS	HONE # D RE-SENT ID NUM	GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	
	orporated/Avesis	(8	88)209-1243						The control of the State of the	Home
	11/20/2017 11/17/2017			450.00	500.00	0.00	0.00	0.00	500.00	
	11/20/2017 11/18/2017			75.00	250.00	0.00	0.00	0.00	250.00	
	11/20/2017 11/20/2017			200.00	250.00	0.00	0.00	0.00	250.00	
<u> </u>	11/21/2017 11/21/2017			0.00	500.00	0.00	0.00	0.00	500.00	
	11/26/2017 11/25/2017			812.00	1195.00	0.00	0.00	0.00	1195.00	
Í	11/26/2017 11/25/2017			186.00	250.00	0.00	0.00	0.00	250.00	
	11/26/2017 11/25/2017			150.00	200.00	0.00	0.00	0.00	200.00	
1	11/27/2017 11/27/2017			450.00	500.00	0.00	0.00	0.00	500.00	
	11/27/2017 11/08/2017			0.00	1200.00	0.00	0.00	0.00	1200.00	
	11/27/2017 11/25/2017			0.00	200.00	0.00	0.00	0.00	200.00	
ĺ	11/27/2017 11/25/2017			350.00	350.00	0.00	0.00	0.00	350.00	
	11/27/2017 11/18/2017			150.00	200.00	0.00	0.00	0.00	200.00	
	11/27/2017 11/18/2017			0.00	1250.00	0.00	0.00	0.00	1250.00	
	11/27/2017 11/18/2017			550.00	600.00	0.00	0.00	0.00	600.00	
	11/27/2017 11/27/2017			420.00	420.00	0.00	0.00	0.00	420.00	
	11/27/2017 11/20/2017			200.00	250.00	0.00	0.00	0.00	250.00	
	11/27/2017 11/27/2017		-	180.00	230.00	0.00	0.00	0.00	230.00	
	11/29/2017 11/27/2017			0.00	350.00	0.00	0.00	0.00	350.00	
	11/29/2017 11/29/2017			0.00	1200.00	0.00	0.00	0.00	1200.00	
	11/29/2017 11/29/2017			300.00	350.00	0.00	0.00	0.00	350.00	
Í	11/30/2017 11/29/2017			650.00	650.00	0.00	0.00	0.00	650.00	
Ĭ	11/30/2017 11/29/2017			450.00	500.00	0.00	0.00	0.00	500.00	
	11/30/2017 11/29/2017			80.00	775.00	0.00	0.00	0.00	775.00	
	12/01/2017 11/30/2017			375.00	375.00	0.00	0.00	0.00	375.00	
	12/01/2017 11/30/2017			420.00	420.00	0.00	0.00	0.00	420.00	
	12/02/2017 12/01/2017			200.00	250.00	0.00	0.00	0.00	250.00	
	12/02/2017 12/02/2017			0.00	650.00	0.00	0.00	0.00	650.00	
	12/02/2017 12/02/2017			468.00	500.00	0.00	0.00	0.00	500.00	
	12/02/2017 12/01/2017			0.00	1750.00	0.00	0.00	0.00	1750.00	
	12/02/2017 12/01/2017			820.00	1000.00	0.00	0.00	0.00	1000.00	
	12/02/2017 12/02/2017			300.00	300.00	0.00	0.00	0.00	300.00	
Primary	12/02/2017 12/02/2017			0.00	175.00	0.00	0.00	0.00	175.00	

Date:	12/03/2017		Pateika	a Dental LLC					Page:	;
	E COMPANY/GROUP PL SENT SERVICE SUBSCRIBER	AN TRACER ON HO ASSIGN. OF BENEFITS	PHONE # LD RE-SENT ID NUM	GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	
	orporated/Health Partner		(888)209-1243							
Ī	09/13/2017 09/09/2017 10/14/2017 10/14/2017			350.00	0.00	0.00	1100.00	0.00	1100.00	
	11/06/2017 10/14/2017			0.00	0.00	500.00	0.00	0.00	500.00	
	11/17/2017 11/15/2017			420.00	420.00	0.00	0.00	0.00	420.00	
	11/17/2017 11/17/2017			250.00	250.00	0.00	0.00	0.00	250.00	
	11/17/2017 11/17/2017			425.00	425.00	0.00	0.00	0.00	425.00	
	11/17/2017 11/17/2017			300.00	300.00	0.00	0.00	0.00	300.00	
	11/17/2017 11/17/2017			375.00	375.00	0.00	0.00	0.00	375.00	
				450.00	450.00	0.00	0.00	0.00	450.00	
	11/19/2017 11/17/2017 11/19/2017 11/17/2017			425.00	425.00	0.00	0.00	0.00	425.00	
				150.00	700.00	0.00	0.00	0.00	700.00	
	11/19/2017 11/17/2017 11/19/2017 11/17/2017			200.00	0.00	0.00	0.00	0.00	0.00	
	11/19/2017 11/17/2017			500.00	500.00	0.00	0.00	0.00	500.00	
	11/20/2017 11/20/2017			500.00	500.00	0.00	0.00	0.00	500.00	
Í	11/20/2017 11/18/2017			200.00	200.00	0.00	0.00	0.00	200.00	
_	11/20/2017 11/18/2017			350.00	350.00	0.00	0.00	0.00	350.00	
ĺ	11/20/2017 11/20/2017			375.00	375.00	0.00	0.00	0.00	375.00	
ĺ	11/20/2017 11/20/2017			450.00	450.00	0.00	0.00	0.00	450.00	
Í	11/20/2017 11/18/2017			300.00	300.00	0.00	0.00	0.00	300.00	
Í	11/20/2017 11/18/2017			410.00	410.00	0.00	0.00	0.00	410.00	
	11/20/2017 11/16/2017			395.00	395.00	0.00	0.00	0.00	395.00	
				200.00	200.00	0.00	0.00	0.00	200.00	
	11/21/2017 11/21/2017			0.00	500.00	0.00	0.00	0.00	500.00	
_	11/26/2017 11/25/2017			1750.00	1750.00	0.00	0.00	0.00	1750.00	
	11/26/2017 11/25/2017 11/26/2017 11/25/2017			200.00	200.00	0.00	0.00	0.00	200.00	
Ī				420.00	420.00	0.00	0.00	0.00	420.00	
Í	11/27/2017 11/27/2017 11/27/2017 11/18/2017			300.00	300.00	0.00	0.00	0.00	300.00	
Í				400.00	400.00	0.00	0.00	0.00	400.00	
	11/27/2017 11/17/2017			500.00	500.00	0.00	0.00	0.00	500.00	
	11/27/2017 11/25/2017			250.00	250.00	0.00	0.00	0.00	250.00	
ĺ	11/27/2017 11/27/2017			250.00	250.00	0.00	0.00	0.00	250.00	
ĺ	11/27/2017 11/27/2017			500.00	500.00	0.00	0.00	0.00	500.00	
rimary	11/27/2017 11/27/2017			420.00	420.00	0.00	0.00	0.00	420.00	

Date:	12/03/2017		rateika	a Dental LLC					Page:	
	E COMPANY/GROUP PL SENT SERVICE SUBSCRIBER	AN F TRACER ON HOL ASSIGN. OF BENEFITS	PHONE # .D RE-SENT ID NUM	GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	
	orporated/Health Partner		888)209-1243						The second secon	
	11/27/2017 11/25/2017			350.00	350.00	0.00	0.00	0.00	350.00	
	11/29/2017 11/29/2017			200.00	200.00	0.00	0.00	0.00	200.00	
	11/29/2017 11/29/2017			375.00	375.00	0.00	0.00	0.00	375.00	
	11/30/2017 11/29/2017			200.00	200.00	0.00	0.00	0.00	200.00	
	11/30/2017 11/29/2017			375.00	375.00	0.00	0.00	0.00	375.00	
	11/30/2017 11/29/2017			820.00	820.00	0.00	0.00	0.00	820.00	
	11/30/2017 11/30/2017			0.00	500.00	0.00	0.00	0.00	500.00	
Í	11/30/2017 11/29/2017			225.00	225.00	0.00	0.00	0.00	225.00	
-	11/30/2017 11/01/2017			200.00	200.00	0.00	0.00	0.00	200.00	
	12/01/2017 12/01/2017			425.00	425.00	0.00	0.00	0.00	425.00	
	12/02/2017 12/02/2017			600.00	600.00	0.00	0.00	0.00	600.00	
	12/02/2017 12/01/2017		•	300.00	300.00	0.00	0.00	0.00	300.00	
	12/02/2017 12/01/2017			250.00	250.00	0.00	0.00	0.00	250.00	
	12/02/2017 12/02/2017			200.00	200.00	0.00	0.00	0.00	200.00	
	12/02/2017 12/01/2017			500.00	500.00	0.00	0.00	0.00	500.00	
•	12/02/2017 12/02/2017			420.00	420.00	0.00	0.00	0.00	420.00	
	12/02/2017 12/01/2017			250.00	250.00	0.00	0.00	0.00	250.00	
	orporated/HP Plus 800 do 11/30/2017 11/29/2017		888)209-1243							
econdary	12/02/2017 12/01/2017	,		323.00	900.00	0.00	0.00	0.00	900.00	
	Blue Shield of TN/Auto 09/26/2017 09/23/2017		800)924-7141	0.00 130401	1200.00	0.00	0.00	0.00	1200.00	
ueCross	Eduy, soliii BlueShield of MA/TJX ai	nd Marshalls (6	800)882-1178	0.00 107399052	0.00	0.00	425.00	0.00	425.00	
	11/27/2017 11/25/2017			0.00	1400.00	0.00	0.00	0.00	1400.00	
	11/27/2017 11/18/2017			0.00	175.00	0.00	0.00	0.00	175.00	
ĺ	12/01/2017 11/30/2017			0.00	600.00	0.00	0.00	0.00	600.00	
-	12/01/2017 11/30/2017			0.00	250.00	0.00	0.00	0.00	250.00	
	Health and Welfare/Carp 11/15/2017 11/13/2017		215)569-1634							
Primary	11/16/2017 11/15/2017			695.00	1550.00	0.00	0.00	0.00	1550.00	
gna/Allie	dbarton Security Service 11/27/2017 11/25/2017	es (8	800)882-4462	165.00 3329294	200.00	0.00	0.00	0.00	200.00	
	pass Group USA,inc		300)882-4462	120.00 3174584	175.00	0.00	0.00	0.00	175.00	
Primary gna/FEDI	11/27/2017 11/20/2017 EX CORPORATION	· [8	300)882-4462	120.00 2499247	200.00	0.00	0.00	0.00	200.00	
Primary	10/16/2017 10/14/2017		·	120.00	0.00	250.00	0.00	0.00	250.00	

Patelka Dental LLC

Date:

12/03/2017

Date:	12/03/2017								Page:	5
	E COMPANY/GROUP PI SENT SERVICE SUBSCRIBER	AN TRACER ON HO ASSIGN. OF BENEFITS	PHONE # LD RE-SENT ID NUM	GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	
	ndividual USAA	-	(800)882-4462	4700160				18.00.0 miles (18.00 miles (18.		
Cigna/Sola	12/01/2017 11/30/2017 rCity Corporation		(800)882-4462	420.00 3335889	420.00	0.00	0.00	0.00	420.00	
Ĭ	11/08/2017 11/08/2017			141.40	700.00	0.00	0.00	0.00	700.00	
Delta of P			(800)932-0783	866.60 01230-03101	1650.00	0.00	0.00	0.00	1650.00	
Delta of P	11/27/2017 11/20/2017 VARIA HEALTH		(800)932-0783	100.00 51898-019	175.00	0.00	0.00	0.00	175.00	
	07/25/2017 07/10/2017			301.10	0.00	0.00	0.00	500.00	500.00	
Delta of P	08/09/2017 07/19/2017 VEmployers Health Insu	rance trus	(800)932-0783	572.30 10840-00001	0.00	0.00	0.00	975.00	975.00	
Delta of PA	11/08/2017 11/08/2017 VJohnson,Mirmiran & T	hompson Inc	(800)932-0783	0.00 18758	200.00	0.00	0.00	0.00	200.00	
Delta of P/	11/20/2017 11/06/2017 VNutri System Inc.		(800)932-0783	585.00 18570	1400.00	0.00	0.00	0.00	1400.00	
Delta Denta	11/29/2017 11/27/2017		(800)932-0738	917.50 18334-00001	1850.00	0.00	0.00	0.00	1850.00	
Delta Denta	11/14/2017 11/13/2017	re	(800)955-2030	178.00 DU7508	275.00	0.00	0.00	0.00	275.00	
Delta Denta	11/13/2017 11/02/2017 al of GA/RockTenn		(800)521-2651	0.00 15550-10201	325.00	0.00	0.00	0.00	325.00	
Ĭ	11/15/2017 10/16/2017 11/27/2017 11/27/2017			0.00	1400.00	0.00	0.00	0.00	1400.00	
<i></i>	12/01/2017 11/30/2017			0.00	275.00	0.00	0.00	0.00	275.00	
Í	12/01/2017 11/13/2017			0.00	1300.00	0.00	0.00	0.00	1300.00	
Delta Denta	I Of GA/Tenet HealthSys	stem Medical,inc	(800)521-2651	300.00 18438-00030	300.00	0.00	0.00	0.00	300.00	
	11/30/2017 11/29/2017			420.00	0.00	0.00	420.00	0.00	420.00	
Delta Denta	Il Of New Jersey/Hamilto	on Township Boe	(800)452-9310	540.00 07552-00003	700.00	0.00	0.00	0.00	700.00	
Delta Denta	al Of New Jersey/West W 11/26/2017 11/25/2017	/ard	(800)452-9310	0.00 09496-00002	250.00	0.00	0.00	0.00	250.00	
Delta Denta	I Of Pa/Pa Individual Ex 12/01/2017 12/01/2017	change	(800)932-0783	300.00 50196-10004	300.00	0.00	0.00	0.00	300.00	
	12/01/2017 12/01/2017			0.00	1250.00	0.00	0.00	0.00	1250.00	
	12/01/2017 11/30/2017			300.00	300.00	0.00	0.00	0.00	300.00	
Delta Denta	Il Of Pa/Small Business 12/01/2017 11/30/2017	Program	(800)932-0783	300.00 97424-01291	300.00	0.00	0.00	0.00	300.00	
Delta PA/Al	oington Memorial Hospit 11/27/2017 11/27/2017	al	(800)932-0783	119.20 09406-00002	200.00	0.00	0.00	0.00	200.00	
Delta PA/Ak	ington School District		(800)932-0783	263.00 01280-01111	300.00	0.00	0.00	0.00	300.00	
secondary	11/18/2017 10/18/2017			128.00	250.00	0.00	0.00	0.00	250.00	

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Patelka Dental LLC

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INSURANCI	E COMPANY/GROUP PL SENT SERVICE GUBSCRIBER	AN F TRACER ON HOL ASSIGN. OF BENEFITS	PHONE # LD RE-SENT ID NUM	GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	
	ington School District		(800)932-0783	01280-01111	THE PARTY OF THE P				NAMES AND ADDRESS OF THE PARTY	***************************************
	11/18/2017 10/23/2017			415.00	420.00	0.00	0.00	0.00	420.00	
	B.E.W.Local #126 H&W F 11/30/2017 11/27/2017		(800)932-0783	03052-00001	175.00					
	nn Color Inc. 12/01/2017 11/30/2017	,		120.00 3512-0500	175.00	0.00	0.00	0.00	175.00	
Delta PA/Ph	illadelphia Corporation 10/30/2017 10/28/2017	For Ag ((800)932-0783	140.00 05443-00011	175.00	0.00	0.00	0.00	175.00	
Delta PA/SE	EIU Local 32	 	(800)932-0783	110.60 03205-00015	0.00	300.00	0.00	0.00	300.00	
Delta PA/US	11/30/2017 11/22/2017 W Local 286 Welfare Tr	ust Fun (800)932-0783	803.00 03223-10018	1625.00	0.00	0.00	0.00	1625.00	
	12/01/2017 11/30/2017 t/ABH Children 0-20 year		855)343-7401	163.40	1300.00	0.00	0.00	0.00	1300.00	
Primary	11/07/2017 11/07/2017	· •		250.00	500.00	0.00	0.00	0.00	500.00	
1	11/17/2017 11/15/2017 11/27/2017 11/18/2017			140.00	175.00	0.00	0.00	0.00	175.00	
				140.00	175.00	0.00	0.00	0.00	175.00	
	11/27/2017 11/25/2017 12/02/2017 12/01/2017			300.00	300.00	0.00	0.00	0.00	300.00	
	ABH Kids Full Cost CH		855)343-7401	400.00	500.00	0.00	0.00	0.00	500.00	
	11/26/2017 11/25/2017	•		300.00	300.00	0.00	0.00	0.00	300.00	
	11/26/2017 11/25/2017		855)343 - 7401	500.00	500.00	0.00	0.00	0.00	500.00	
	11/16/2017 11/15/2017	,		165.00	200.00	0.00	0.00	0.00	200.00	
Primary	11/17/2017 11/15/2017			620.00	775.00	0.00	0.00	0.00	775.00	
	11/17/2017 11/15/2017			595.00	595.00	0.00	0.00	0.00	595.00	
	11/19/2017 11/17/2017			425.00	425.00	0.00	0.00	0.00	425.00	
	11/20/2017 11/18/2017			205.00	240.00	0.00	0.00	0.00	240.00	
	11/20/2017 11/18/2017			875.00	875.00	0.00	0.00	0.00	875.00	
	11/20/2017 11/18/2017			375.00	375.00	0.00	0.00	0.00	375.00	
	11/26/2017 11/25/2017			300.00	300.00	0.00	0.00	0.00	300.00	
	11/27/2017 11/18/2017			200.00	250.00	0.00	0.00	0.00	250.00	
	11/27/2017 11/25/2017			600.00	1200.00	0.00	0.00	0.00	1200.00	
	11/27/2017 11/27/2017			100.00	200.00	0.00	0.00	0.00	200.00	
	12/02/2017 12/01/2017			202.50	750.00	0.00	0.00	0.00	750.00	
	12/02/2017 12/02/2017			165.00	200.00	0.00	0.00	0.00	200.00	
Primary	12/02/2017 12/02/2017 Bravo-Cigna 0-195		855)343-7401	340.00	375.00	0.00	0.00	0.00	375.00	
DontaO										

Date:	12/03/2017		Patelka	a Dental LLC					Page:	7
	COMPANY/GROUP PL	.AN TRACER ON HO	PHONE #	GROUP NUM. PATIENT NAME	BIRTHDAY				· ugo.	
	UBSCRIBER	ASSIGN. OF BENEFITS	ID NUM	ESTIMATE	CURRENT	31-60	61-90	> 90	TOTAL	
	Bravo-Cigna BASIC		(855)343-7401							
	11/21/2017		(855)343-7401	275.00	275.00	0.00	0.00	0.00	275.00	
	11/20/2017 11/20/2017		(033)343-7401	420.00	420.00	0.00	0.00	0.00	420.00	
Primary	11/26/2017 11/25/2017	,		150.00	200.00	0.00	0.00	0.00	200.00	
	11/27/2017 11/25/2017			225.00	275.00	0.00	0.00	0.00	275.00	
	of Public Welfare/Acce 11/27/2017 11/18/2017			300.00	300.00	0.00	0.00	0.00	300.00	
	BS /Sincere Care Agen 11/21/2017 11/21/2017		(877)606-3338	902802-001			5.55	0.00	555.55	
	ling and Construction (11/30/2017 11/20/2017		(215)885-2443	690.00 BCGOLD	1200.00	0.00	0.00	0.00	1200.00	
Fidelio/Loca	l 542			300.00 TR0703	800.00	0.00	0.00	0.00	800.00	
Fidelio/Paint	11/17/2017 11/15/2017 ters & Allied Trades DC	21	(215)885-2443	0.00 PG2555	1200.00	0.00	0.00	0.00	1200.00	
GEHA Conne		EHA Connection dental	(877)434-2336	165.00 AA	200.00	0.00	0.00	0.00	200.00	
	11/08/2017 11/06/2017 PP Total sourceinc			75.00 G-00404556	150.00	0.00	0.00	0.00	150.00	
	05/09/2017 03/12/2017 P Totalsource INC.		(800)541-7846	225.00 G-00404556	0.00	0.00	0.00	250.00	250.00	
Ī	11/29/2017 11/29/2017 mily Design Resources		(800)541-7846	46.00 00355090	250.00	0.00	0.00	0.00	250.00	
Primary 1	1/27/2017 11/27/2017 w Life Home Care and		(800)541-7846	320.00 00518161	500.00	0.00	0.00	0.00	500.00	
	06/12/2017		(300)041 1040	0.00	0.00	0.00	0.00	700.00	700:00	
	07/11/2017 06/28/2017			0.00	0.00	0.00	0.00	350.00	350.00	
	07/11/2017 06/28/2017			0.00	0.00	0.00	0.00	350.00	350.00	
	fident Care Corp. 1/15/2017 11/13/2017		(800)433-6825	3003A-78 0.00	1300.00	0.00	0.00	0.00	1200.00	
Primary 1	1/30/2017 11/30/2017			0.00	650.00	0.00	0.00	0.00	1300.00 650.00	
	ce Healthcare Services 1/16/2017 11/15/2017		(800)433-6825	0483L8-0000	300.00	0.00	0.00	0.00	000.00	
lorizon/NJ T			(800)433-6825	300.00 0879170005	300.00	0.00	0.00	0.00	300.00	
Ĭ	1/30/2017 11/29/2017			193.60	700.00	0.00	0.00	0.00	700.00	
Primary 1	1/30/2017 11/30/2017		(800)433-6825	249.60 0963910001	700.00	0.00	0.00	0.00	700.00	
	<u>1/13/2017</u> 11/08/2017		(000)400-0020	0.00	425.00	0.00	0.00	0.00	425.00	
Horizon /Blue Primary 1	e Cross Blue Shield 1/30/2017 04/20/2017		(888)667-4547	3003A-78						
	1/30/2017 11/30/2017			0.00	300.00	0.00	0.00	0.00	300.00	
				0.00	300.00	0.00	0.00	0.00	300.00	

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	E COMPANY/GROUP PL SENT SERVICE SUBSCRIBER	.AN TRACER ON HO ASSIGN. OF BENEFITS	PHONE # PLD RE-SENT ID NUM	GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	
	BS NJ/Morts Auto Rep		(888)667-4547	00688G					***************************************	
	11/30/2017 11/01/2017			0.00	300.00	0.00	0.00	0.00	300.00	
Horizon BC	11/30/2017 04/20/2017 CBS NJ	((877)241-8414	0.00 76108-1141	300.00	0.00	0.00	0.00	300.00	
	11/14/2017 11/13/2017			221.60	700.00	0.00	0.00	0.00	700.00	
	11/27/2017 11/27/2017	7		221.60		0.00	0.00	0.00	700.00	
Humana Primary	11/13/2017 11/08/2017	,	(800)342-5209	INDIZPA						
	umana Medicare PPO 11/03/2017 11/02/2017	•	(800)833-2223	300.00 675717	300.00	0.00	0.00	0.00	300.00	
	11/17/2017 11/16/2017			425.00	625.00	0.00	0.00	0.00	625.00	
	11/29/2017 11/29/2017			445.00	445.00	0.00	0.00	0.00	445.00	
Keystone F	irst/Claim Appeal Depar	tment	(877)408-0878	0.00	200.00	0.00	0.00	0.00	200.00	
Primary Keystone F	11/30/2017 11/30/2017 First/Keystone First	•	(877)408-0878	0.00	4700.00	0.00	0.00	0.00	4700.00	
	11/12/2016 11/12/2016 04/14/2017 04/08/2017			0.00	0.00	0.00	0.00	4700.00	4700.00	
	04/14/2017 04/08/2017 09/28/2017 09/28/2017			425.00	0.00	0.00	0.00	425.00	425.00	
	09/28/2017 09/28/2017			0.00	0.00	0.00	4700.00	0.00	4700.00	
	11/09/2017 10/25/2017			0.00	0.00	0.00	4700.00	0.00	4700.00	
	11/09/2017 11/01/2017			40.50	350.00	0.00	0.00	0.00	350.00	
	11/09/2017 11/08/2017			40.50	350.00	0.00	0.00	0.00	350.00	
	11/09/2017 11/08/2017			65.50	375.00	0.00	0.00	0.00	375.00	
Primary	11/10/2017 11/08/2017		1	420.00	420.00	0.00	0.00	0.00	420.00	
Primary	11/11/2017 11/11/2017			40.50	350.00	0.00	0.00	0.00	350.00	
Primary	11/14/2017 11/14/2017			0.00	4700.00	0.00	0.00	0.00	4700.00	
Primary	11/14/2017 11/14/2017			50.00	500.00	0.00	0.00	0.00	500.00	
Primary_	11/17/2017 11/15/2017			0.00	4700.00	0.00	0.00	0.00	4700.00	
Primary	11/17/2017 11/15/2017			250.00	250.00	0.00	0.00	0.00	250.00	
Primary	11/20/2017 11/18/2017			425.00	425.00	0.00	0.00	0.00	425.00	
Primary	11/20/2017 11/20/2017			250.00	250.00	0.00	0.00	0.00	250.00	
Primary	11/20/2017 11/18/2017			440.00	440.00	0.00	0.00	0.00	440.00	
Primary	11/20/2017 11/18/2017			395.00	395.00	0.00	0.00	0.00	395.00	
Primary	11/20/2017 11/18/2017			125.00	125.00	0.00	0.00	0.00	125.00	
Primary	11/20/2017 11/20/2017			200.00	200.00	0.00	0.00	0.00	200.00	
Primary	11/20/2017 11/20/2017			250.00	250.00	0.00	0.00	0.00	250.00	
The state of the s				250.00	250.00	0.00	0.00	0.00	250.00	

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	E COMPANY/GROUP PL SENT SERVICE SUBSCRIBER	AN PHO TRACER ON HOLD ASSIGN. OF BENEFITS	ONE # RE-SENT ID NUM	GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	
Ceystone F	First/Keystone First	(877	7)408-0878						***************************************	***************************************
Primary	11/20/2017 11/18/2017	,		200.00	200.00	0.00	0.00	0.00	200.00	
-	11/20/2017 11/20/2017			425.00		0.00	0.00	0.00	425.00	
Primary	11/20/2017 11/20/2017	,		200.00		0.00	0.00	0.00	200.00	
	11/20/2017 11/20/2017			420.00		0.00	0.00	0.00	420.00	
Primary	11/20/2017 11/18/2017	,		200.00	200.00	0.00	0.00	0.00	200.00	
	11/20/2017 11/18/2017			270.00	270.00	0.00	0.00	0.00	270.00	
_	11/21/2017 11/20/2017			375.00	375.00	0.00	0.00	0.00	375.00	
Primary	11/26/2017 11/25/2017	,		500.00	500.00	0.00	0.00	0.00	500.00	
Primary	11/26/2017 11/25/2017	,		425.00	425.00	0.00	0.00	0.00	425.00	
Primary	11/26/2017 11/25/2017	•		250.00	250.00	0.00	0.00	0.00	250.00	
Primary	11/27/2017 11/17/2017	•		175.00	175.00	0.00	0.00	0.00	175.00	
Primary	11/27/2017 11/27/2017	•		475.00	475.00	0.00	0.00	0.00	475.00	
Primary	11/27/2017 11/27/2017	•		340.00	340.00	0.00	0.00	0.00	340.00	
Primary	11/27/2017 11/25/2017	,		565.00	565.00	0.00	0.00	0.00	565.00	
Primary	11/27/2017 11/25/2017	,		300.00	300.00	0.00	0.00	0.00	300.00	
Primary	11/27/2017 11/20/2017	•		275.00	275.00	0.00	0.00	0.00	275.00	
Primary	11/27/2017 11/27/2017			425.00		0.00	0.00	0.00	425.00	
rimary	11/27/2017 11/27/2017			175.00	175.00	0.00	0.00	0.00	175.00	
Primary	11/27/2017 11/27/2017			250.00	250.00	0.00	0.00	0.00	250.00	
rimary	11/27/2017 11/25/2017			200.00	200.00	0.00				
Primary	11/29/2017 11/29/2017			500.00	500.00		0.00	0.00	200.00	
Primary	11/29/2017 11/29/2017			40.50		0.00	0.00	0.00	500.00	
rimary	11/30/2017 11/30/2017				350.00	0.00	0.00	0.00	350.00	
rimary	11/30/2017 11/29/2017			50.00	500.00	0.00	0.00	0.00	500.00	
rimary	11/30/2017 11/29/2017			500.00		0.00	0.00	0.00	500.00	
rimary	11/30/2017 11/08/2017			175.00	175.00	0.00	0.00	0.00	175.00	
rimary	11/30/2017 11/29/2017			420.00	420.00	0.00	0.00	0.00	420.00	
Primary	11/30/2017 11/29/2017			350.00	350.00	0.00	0.00	0.00	350.00	
Primary	12/01/2017 11/30/2017			126.00	745.00	0.00	0.00	0.00	745.00	
rimary	12/02/2017 12/02/2017			300.00	300.00	0.00	0.00	0.00	300.00	
Primary	12/02/2017 12/02/2017			200.00	200.00	0.00	0.00	0.00	200.00	
Primary	12/02/2017 12/01/2017			250.00	250.00	0.00	0.00	0.00	250.00	
	AVANDENA ALAMANA AND AND AND AND AND AND AND AND AND			175.00	175.00	0.00	0.00	0.00	175.00	

Patelka Dental LLC

Date:	12/03/2017		i ateike	a Demai LLC					Page:	10
INSURANC	CE COMPANY/GROUP PL SENT SERVICE SUBSCRIBER			GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	
	First/Keystone First 12/02/2017 12/02/2017	7	(877)408-0878	7/7/2017	MCCOMMONATION CASE AND AN AND AN AND AN AND AN AND AN ANALYSIS AND AN ANALYSIS AND AND AN ANALYSIS AND ANALYSIS ANALYSIS AND ANALYSIS ANALYSIS AND A					
	12/02/2017 12/02/2017			275.00	275.00	0.00	0.00	0.00	275.00	
	cement Health Benefit/La		Health B(215)364-3529	250.00 LEHB	250.00	0.00	0.00	0.00	250.00	
Primary	11/27/2017 11/20/2017	7		715.00	1550.00	0.00	0.00	0.00	1550.00	
	nancial Group/Lincoln Fi 08/22/2017 08/21/2017		(800)423-2765	000346660000						
Primary	11/27/2017 10/09/2017	7		100.00 125.00	125.00	0.00	0.00	175.00	175.00	
Local 1776 Primary	5/Rite Aid 10/23/2017 10/21/2017	7	(610)941-9400	125.00	123.00	0.00	0.00	0.00	125.00	
	11/07/2017 11/04/2017			305.00	0.00	375.00	0.00	0.00	375.00	
Local 1776		_	(610)941-9400	125.00	125.00	0.00	0.00	0.00	125.00	
•	11/08/2017 11/08/2017 11/30/2017 11/20/2017			725.00	725.00	0.00	0.00	0.00	725.00	
Local 634	H&W Fund/Philadelphia	School District	(215)483-6000	318.00	600.00	0.00	0.00	0.00	600.00	
Primary	11/30/2017 11/21/2017	7		304.48	700.00	0.00	0.00	0.00	700.00	
	11/30/2017 11/21/2017 12/01/2017 11/07/2017			560.00	700.00	0.00	0.00	0.00	700.00	
	H&W Fund/School Cafete		(215)364-6500	280.00 LOCAL 634	350.00	0.00	0.00	0.00	350.00	
	11/13/2017 10/16/2017			554.72	960.00	0.00	0.00	0.00	960.00	
	11/29/2017 11/27/2017			0.00	350.00	0.00	0.00	0.00	350.00	
Meritain He	12/01/2017 11/06/2017		(800)925-2272	0.00 13567	1310.00	0.00	0.00	0.00	1310.00	
	11/15/2017 11/13/2017	,	(000)323-2272	87.50	200.00	0.00	0.00	0.00	200.00	
Metlife Primary	11/21/2017 11/20/2017	,	(877)638-3379	5932861	200.00	0.00	0.00	0.00	200.00	
	mbardier Transit Corpora		(877)638-3379	200.00 313211	225.00	0.00	0.00	0.00	225.00	
	11/30/2017 11/28/2017 ti Corporation		(077)500 0070	194.00	700.00	0.00	0.00	0.00	700.00	
	11/08/2017 11/08/2017		(877)638-3379	5318734 125.00	125.00	0.00	0.00	0.00	105.00	
	leral Employees Dental 12/01/201711/30/2017	,	(877)638-3379	120731	125.00	0.00	0.00	0.00	125.00	
Metlife/FEI	OVIP		(877)638-3379	200.00 0120731	250.00	0.00	0.00	0.00	250.00	
	11/30/2017 11/22/2017			625.00	675.00	0.00	0.00	0.00	675.00	
	Anorth America services 05/12/2017 04/12/2017	,	(877)638-3379	136561	0.00	0.00	0.00			
Primary	05/12/2017 04/12/2017	,		445.00 445.00	0.00	0.00	0.00	445.00 445.00	445.00 445.00	
	NETT COMPANY INC 12/02/2017 12/02/2017	,	(877)638-3379	176853	0.00	0.00	0.00	773,00	443.00	
Metlife/LIF	EWAY FOODS INC.		(877)638-3379	133.50 5641865	650.00	0.00	0.00	0.00	650.00	
Primary	11/27/2017 11/18/2017			993.00	1300.00	0.00	0.00	0.00	1300.00	

Patelka Dental LLC

12/03/2017

Date:

Date.	12/00/2017								Page:	11
	E COMPANY/GROUP PL SENT SERVICE SUBSCRIBER	AN TRACER ON HO ASSIGN. OF BENEFITS	PHONE # DLD RE-SENT ID NUM	GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	ALBERTANIA SE SERVIZIONE PARTICIPATO
Metlife/PRA		_	(877)638-3379	5995866				makalajumpikuratikunia sirin arabid era et il arabid arabi d		***************************************
·	12/01/2017 06/01/2017 NDSTAD PROFRSSIONA			0.00	300.00	0.00	0.00	0.00	300.00	
Primary	11/19/2017 11/18/2017	LS US,L.P		150712	050.00	0.00	0.00	2.22	050.00	
	RAINIAN CATHOLIC ARC 10/25/2017 10/11/2017		(877)638-3379	0.00 5943934	250.00	0.00	0.00	0.00	250.00	
OneCallCa			(888)539-0577	1919.30	0.00	5000.00	0.00	0.00	5000.00	
Primary	10/07/2013 04/01/2013	3	(000)000 0011	0.00	0.00	0.00	0.00	800.00	800.00	
Primary	10/07/2013 05/23/2013	3		0.00		0.00	0.00	300.00	300.00	
Primary	10/07/2013 02/25/2013	3		0.00	0.00	0.00	0.00	250.00	250.00	
Primary	10/07/2013 08/26/2013	3		0.00	0.00	0.00	0.00	1775.00	1775.00	
•	06/24/2014 06/09/2014	1		0.00	0.00	0.00	0.00	6575.00	6575.00	
	10/14/2014 09/15/2014			0.00	0.00	0.00	0.00	850.00	850.00	
	07/05/2017 07/05/2017			140.00	0.00	0.00	0.00	175.00	175.00	
	07/22/2017 07/21/2017			165.00	0.00	0.00	0.00	200.00	200.00	
	nancial/Green Racing M 11/28/2017 11/27/2017		(800)442-7742	K1900354						
	INANCIAL/PHOEBE DEV		(800)442-7742	0.00 K1900398	500.00	0.00	0.00	0.00	500.00	
	11/21/2017 11/20/2017 ancial/H and K Tool and		(900)442,0005	200.00	850.00	0.00	0.00	0.00	850.00	
	11/30/2017 11/29/2017		(800)443-2995	05486229	050.00		2.00	0.00	050.00	
	Teamsters Health and W 11/16/2017 11/15/2017		(215)364-6500	160.00 107	250.00	0.00	0.00	0.00	250.00	
•	11/29/2017 11/29/2017			140.00	175.00	0.00	0.00	0.00	175.00	
	11/30/2017 11/18/2017			0.00	200.00	0.00	0.00	0.00	200.00	
	Health/Welfare		(215)364-6500	856.00 LOCAL 107	2450.00	0.00	0.00	0.00	2450.00	
	09/08/2017 08/09/2017	7	(210)001 0000	140.00	0.00	0.00	175.00	0.00	175.00	
Primary	09/20/2017 08/23/2017	,		140.00	0.00	0.00	175.00	0.00	175.00	
Primary	11/03/2017 11/03/2017	•		425.00	425.00	0.00	0.00	0.00	425.00	
•	11/03/2017 10/03/2017			280.00	350.00	0.00	0.00	0.00	350.00	
Primary	11/17/2017 11/15/2017	•		660.00	900.00	0.00	0.00	0.00	900.00	
	11/30/2017 11/18/2017			280.00	350.00	0.00	0.00	0.00	350.00	
	Local 107/Teamsters Loc 08/15/2017 04/01/2017		(800)523-2846							
Primary	10/27/2017 09/26/2017	7		280.00	0.00	0.00	0.00	350.00	350.00	
	k Management /Worker		(215)592-5000	300.00	0.00	375.00	0.00	0.00	375.00	
	09/21/2017 09/20/2017			400.00	0.00	0.00	400.00	0.00	400.00	
	l		(610)941-9400	3001FT						
	The second secon			0.00	0.00	665.00	0.00	0.00	665.00	

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Patelka Dental LLC

Date:	12/03/20	17			i ateiki	a Dentai LLC					Page:	1.
INSURAN	CE COMPANY SENT SUBSCRIBER	SERVICE	AN TRACER ASSIGN. OF BE	ON HOLD	ONE # RE-SENT ID NUM	GROUP NUM. PATIENT NAME ESTIMATE	BIRTHDAY CURRENT	31-60	61-90	> 90	TOTAL	
	cal 1776/Shop			(610))941-9400	LOCAL 1776						····
ĺ	11/10/2017					400.00	500.00	0.00	0.00	0.00	500.00	
Primary	12/01/2017	12/01/2017	7			105.00	425.00					
Jnited Co	ncordia/CHIP			(800)332-0366	425.00 100934054	425.00	0.00	0.00	0.00	425.00	
Primary	06/28/2017	06/26/2017	,	,	,							
Primary	11/30/2017	11/28/2017	,			0.00	0.00	0.00	0.00	900.00	900.00	
-						200.00	200.00	0.00	0.00	0.00	200.00	
Jnited Cor Primary	ncordia/IBC P 12/01/2017	PO OPM SI 11/30/2017	LVER DEDUCTION	BLE (800))332-0366 	100500033						
						325.00	325.00	0.00	0.00	0.00	325.00	
	ncordia/JEVS 12/01/2017					252376000						
i illilaiy	12/01/2017	11/30/2017				435.00	600.00	0.00	0.00	0.00	600.00	
	ncordia/Philac			(800)332-0366	919902008						
_	11/30/2017					960.00	1200.00	0.00	0.00	0.00	1200.00	
Jnited Co	ncordia/Temp	le Universit	y health system	(800)332-0366	848776000		0.00	0.00	0,00	1200.00	
Primary	11/19/2017	11/18/2017				0.00	700.00	0.00	0.00	0.00	700.00	
			nion Local 234	(800)332-0366	907746101	700.00	0.00	0.00	0.00	700.00	
Primary	11/17/2017	11/15/2017 				1278.69	2225.00	0.00	0.00	0.00	2225.00	
Jnited Co	ncordia/Ward	Transport A	And Logistics Co	(800)332-0366	252208000	2223.00	0.00	0.00	0.00	2225.00	
Primary	10/16/2017	10/14/2017				250 10	0.00	405.00	0.00	0.00	105.00	
	althcare/Claim			(800)508-4876	356.19	0.00	425.00	0.00	0.00	425.00	
Primary	10/18/2017	10/18/2017	•			005.00	0.00	205.00				
Primary	12/02/2017	12/01/2017				325.00	0.00	325.00	0.00	0.00	325.00	
Drimorn	10/00/0017	10/00/0017				315.00	350.00	0.00	0.00	0.00	350.00	
r mnary	12/02/2017	12/02/2017				520.00	520.00	0.00	0.00	0.00	520.00	
Primary	12/02/2017	12/02/2017										
InitedHea	Ithcare			(800)822-5353	520.00 994006	520.00	0.00	0.00	0.00	520.00	
	10/30/2017	10/28/2017		,500	,							
						450.00	0.00	450.00	0.00	0.00	450.00	

	ESTIMATE	CURRENT	31 - 60	61 - 90	OVER 90	TOTAL
PRIMARY CLAIM TOTALS:	88608.88	151405.00	8890.00	12745.00	20015.00	193055.00
SECONDARY CLAIM TOTALS:	1634.40	2170.00	0.00	0.00	1475.00	3645.00
TOTALS ALL CLAIMS:	90243.28	153575.00	8890.00	12745.00	21490.00	196700.00

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Patelka Dental Management, LLC

Accounts Payable

Period: November, 2017

renou. November, 20	. T \		
	Invoice	Due	Amount
Vendor	Date	Date	Due
NONE			
			0.00

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Wells Fargo Business Choice Checking

Account number: 8017 Movember 1, 2017 - November 30, 2017 Page 1 of 12



PATELKA DENTAL LLC DEBTOR IN POSSESSION CH 11 CASE #16-14743(EPA) 8332C BUSTLETON AVE PHILADELPHIA PA 19152-1909

Questions?

Available by phone 24 hours a day, 7 days a week: Telecommunications Relay Services calls accepted 1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833 En español: 1-877-337-7454

Online: wellsfargo.com/biz

Write: Wells Fargo Bank, N.A. (345)

P.O. Box 6995

Portland, OR 97228-6995

Your Business and Wells Fargo

Cash flow is a key indicator of the financial health of your business. Find tips and strategies for effective cash flow management at wellsfargoworks.com.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking	
Online Statements	∇
Business Bill Pay	V
Business Spending Report	7
Overdraft Protection	一

Activity summary

 Beginning balance on 11/1
 \$7,067.62

 Deposits/Credits
 176,388.23

 Withdrawals/Debits
 - 140,416.41

 Ending balance on 11/30
 \$43,039.44

 Average ledger balance this period
 \$11,995.70

Account number: 8017
PATELKA DENTAL LLC
DEBTOR IN POSSESSION

CH 11 CASE #16-14743(EPA)

Pennsylvania account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): 031000503

For Wire Transfers use

Routing Number (RTN): 121000248

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

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Account number: **8017** ■ November 1, 2017 - November 30, 2017 ■ Page 2 of 12



Transaction history

Date	Check Number	Description	Deposits/ Credits	Withdrawals/ Debits	Ending daily balance
11/1		Ameritas Life Grp Claims Nov 0000656992 Dnt Patelka Dental	99.00	20010	
11/1		Met Life Ins. CO Hcclaimpmt 1MI009052914 Trn*1*007990009052914*1135581829~	179.20		
11/1		Deltadentalny6Y Hcclaimpmt 240625101002	560.00		
		Trn*1*201710290085954*1111980218*11198~	300.00		
11/1		Deltadntlins 3C Hcclaimpmt 240625101002	738.80		
		Trn*1*201710290034483*1942761537*94276~	730.00		
11/1		Mobile Deposit : Ref Number :218010374785	1,200.00		
11/1		Avesis Avesis 112718Bu Patelka Dental Managem	4,448.00		
11/1		Purchase authorized on 10/31 Dentsply Endodonti 800-877-0020	4,440.00	50.60	
		PA S307303651310657 Card 8701			
11/1		Purchase authorized on 10/31 Tradent Supply 347-2817836 TX S587304197859391 Card 8701		69.40	
11/1		Purchase authorized on 10/31 Nea 800-782-5150 GA S467304560435866 Card 8701		34.00	
11/1		Purchase authorized on 10/31 Amazon Mktplace Pm		E4.00	
1 1/ 1		· ·		54.89	
11/1		Amzn.Com/Bill WA S387304678020533 Card 8701 11/01Bankcard Deposit -0425162301		0.070.05	
11/1		T-Mobile PCS Svc 171031 0780624 Patelka Dental Managem		2,079.85	
11/1	2092	Check		395.38	
11/1				1,986.84	
11/2	2105	Check		400.00	9,221.6
11/2		Met Life Ins. CO Hoclaimpmt 1MI009095853	176.00		
11/2		Trn*1*007990009095853*1135581829~	100 70		
11/2		Met Life Ins. CO Hcclaimpmt 1MI009113776	489.70		
1/2	***************************************	Trn*1*007990009113776*1135581829~			
1/2		Cigna Hcclaimpmt 103117 1386815785	558.90		
1410		Trn*1*77232368*1591031071\			
11/2		11/02Bankcard Deposit -0425162301	1,780.20		
11/2	***************************************	Deposit	1,131.20	***************************************	
11/2		Deposit Made In A Branch/Store	3,850.00	****	***************************************
11/2		Purchase authorized on 11/01 Amazon Mktplace Pm Amzn.Com/Bill WA S587304667921412 Card 8701		50.98	
11/2		Recurring Payment authorized on 11/01 Carriage Trade Cle 215-3573400 PA S387305413564443 Card 8701		408.75	
11/2		Purchase authorized on 11/01 Paypal *Veport 402-935-7733 CA	······································	12.72	······································
11/2		S467305568438968 Card 8701			
		Purchase authorized on 11/01 Paypal *Weifang123 402-935-7733 CA S587305568486650 Card 8701		148.99	
11/2		Purchase authorized on 11/01 Amazon.Com Amzn.Com/Bill WA S467305586368975 Card 8701		126.14	
11/2		Purchase authorized on 11/01 Amazon.Com Amzn.CO		126.14	
	·····	Amzn.Com/Bill WA S587305586411746 Card 8701			
11/2		Purchase authorized on 11/01 Paypal *Henanbaist 402-935-7733 CA S587305589393814 Card 8701		60.77	
11/2	2103	Deposited OR Cashed Check		2,000.00	
11/2		Wells Fargo Busi Tax Col Payroll Philadelphia,		2,035.64	
11/2	2099			271.00	11,966,5
11/3	***************************************	Unitedhealthcare Payment 171103 64231 Patelka Dental LLC	30.00		
11/3		Unitedhealthcare Hcclaimpmt xxxxx7266	46.75		***************************************
		Trn*1*1309785936*1412014834*000052133\			
11/3	***************************************	Cigna Hcclaimpmt 110117 1386815785	122.00	·	
14/5		Trn*1*77366739*1591031071\			
11/3		Unitedhealthcare Payment 171103 64231 Patelka Dental LLC	155.00		
11/3		Aetna AS01 Hcclaimpmt xxxxx7266 Trn*1*817304520006112*1066033492\	176.40		
11/3		Met Life Ins. CO Hcclaimpmt 1MI009134428	275.00		
, •		Trn*1*007990009134428*1135581829~	210.00		
11/3	***************************************	1776 Hw Operatin Capitation Patelka Dental LLC	364.00	······	
		Dental Benefit P Hcclaimpmt xxxxx7266	591.00		
11/3					

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	Check		Deposits/	Withdrawals/	Ending da
Date	Number	Description	Credits	Debits	balar
11/3		Deltadentalpa6P Hcclaimpmt 240625101002 Trn*1*201710310030476*1231667011*23166~	1,486.20		
11/3		Synchrony Bank Btot Dep 171102 534812028493552 Patelka Dental LLC	2,013.74		······································
11/3		11/03Bankcard Deposit -0425162301	568.00		
11/3		Deposit	684.56	······································	
11/3	2106	Cashed Check		1,446.00	
11/3		Patelka Dental L WF Payroll 171106 7188521 Payroll Invoice	····	73.30	
11/3		Wells Fargo Busi Tax Col Payroll Philadelphia,	****	1,921.16	
11/3		Patelka Dental L WF Payroll 171106 3137053 Payroll DD		5,262.01	
11/3	2093	Check		2,000.00	
11/3	2098	Check		770.00	***************************************
11/3	2101	Check	****	1,600.00	5,406.
11/6		Met Life Ins. CO Hcclaimpmt 1MI009176859 Trn*1*007990009176859*1135581829~	223.80	· · · · · · · · · · · · · · · · · · ·	
11/6		11/06Bankcard Deposit -0425162301	408.85		***************************************
11/6		11/06Bankcard Deposit -0425162301	1,425.40		
11/6		Mobile Deposit : Ref Number :212050185800	321.00		
11/6		Deposit	365.40		
11/6		Deposit Made In A Branch/Store	1,450.00		
11/6		Purchase authorized on 11/03 Dental Prodx 901-347-3104 TN S587307602425418 Card 8701		197.45	9,403.
11/7		Ameritas Life Grp Claims Nov 0000659398 Dnt Patelka Dental	63.20		
11/7	***************************************	United Healthcar Hcclaimpmt xxxxx7266 Trn*1*1310245954*1412014834*000052133\	162.00		
11/7		11/07Bankcard Deposit -0425162301	1,992.50	····	····
11/7		Deposit	509.50	······································	
11/7		Purchase authorized on 11/06 Uniform Advantage 800-283-8708 FL S387307566579806 Card 8701	000.00	50.92	
11/7		Withdrawal Made In A Branch/Store		3,125.00	
11/7	2109	Check		225.00	······································
11/7	<	Business to Business ACH Debit - Insurelinx Inc. Ins Prem Effdat 00000001212674 Patelka Dental LLC		30.85	
11/7	2107	Check		500.00	
11/7		Check	***************************************	4,609.98	3,589.
11/8		Ameritas Life Grp Claims Nov 0000660052 Dnt Patelka Dental	248.80	.,000.00	0,000.
11/8		Deltadntlins 3C Hcclaimpmt 240625101002 Trn*1*201711030030914*1942761537*94276~	306.00		
11/8		Met Life Ins. CO Hcclaimpmt 1MI009257356 Trn*1*007990009257356*1135581829~	374.00		
11/8		Unitedhealthcare Hcclaimpmt xxxxx7266 Trn*1*1310694901*1412014834*000052133\	520.00		
11/8		Synchrony Bank Btot Dep 171107 534812028493552 Patelka Dental LLC	1,243.06		***************************************
11/8		Deposit	2,076.36		
11/8		Avesis Avesis 112718Bu Patelka Dental Managem	3,335.00		
11/8		Online Dep Detail & Images - Bob	,	3.00	
11/8		Quickbooks Banking		14.95	
11/8		Purchase authorized on 11/08 Amazon Mktplace Pm Amzn.Com/Bill WA S307310614663886 Card 8701		67.99	
11/8		Purchase authorized on 11/06 H&R Dental Inc. 215-735-6929 PA S467310788387044 Card 8701		194.94	
11/8		Purchase authorized on 11/07 Shish Kabob Palace Philadelphia PA S467311003638913 Card 8701		183.80	***************************************
11/8		Bill Pay Verizon Bustleto on-Line Xxxxxxxxxx8765Y on 11-08		562.02	
11/8		Check		400.00	10,265.
11/9		Met Life Ins. CO Hcclaimpmt 1MI009315343 Trn*1*007990009315343*1135581829~	26.00	-700.00	10,200.
11/9		Dental Benefit P Hcclaimpmt xxxxx7266 Trn*1*1310942747*1412014834*000052133\	90.00		
11/9		Deltadentalca2C Hcclaimpmt 240625101002	907.50	***************************************	
/ 0		Trn*1*201711050035659*1941461312*77777~	907.30		

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Transaction history (continued) Check Deposits/ Withdrawals/ Ending daily Date Number Description Credits Debits balance 11/9 Deltadentalpa6P Hcclaimpmt 240625101002 1,180.20 Trn*1*201711060025806*1231667011*23166~ 11/9 Cigna Hcclaimpmt 110717 1386815785 1,250.40 Trn*1*77534303*1591031071\ 11/9 11/09Bankcard Deposit -0425162301 7,230.40 11/9 200.00 11/9 Deposit 677.80 Deposit Made In A Branch/Store 11/9 5,600.00 11/9 Purchase authorized on 11/08 Amazon Mktplace Pm 16.39 Amzn.Com/Bill WA S467310628832986 Card 8701 11/9 Purchase authorized on 11/07 Future Pharmac0555 Philadelphia 358.23 PA S387311590474977 Card 8701 11/9 Purchase authorized on 11/07 Future Pharmac0555 Philadelphia 20.00 PA S587311593665068 Card 8701 11/9 Purchase authorized on 11/07 Anaheim Dental Sup Anaheim CA 64.75 S307311750457855 Card 8701 11/9 Purchase authorized on 11/08 IN *Bio Haz Soluti 570-6452180 PA 42.00 S587312665695506 Card 8701 11/9 2125 Cashed Check 2,000.00 11/9 2100 Deposited OR Cashed Check 2,800.00 11/9 2124 Deposited OR Cashed Check 250.00 11/9 2128 Deposited OR Cashed Check 1,000.00 11/9 2112 Check 149.00 20,727.61 11/10 Aetna AS01 Hcclaimpmt xxxxx7266 268.00 Trn*1*817311510005741*1066033492\ 11/10 Synchrony Bank Btot Dep 171109 534812028493552 Patelka 282.30 Dental LLC 11/10 Keystone First Payment 171110 7184 Patelka Dental LLC 311.20 11/10 Keystone First Payment 171110 54 Patelka Dental LLC 1,747.30 11/10 Keystone First Payment 171110 64231 Patelka Dental LLC 3,188.30 11/10 11/10Bankcard Deposit -0425162301 358.80 11/10 Deposit 650.50 11/10 Deposit 6,101.52 11/10 Bill Pay Wells Fargo Credit Card on-Line Xxxxxxxxxxxx0025 on 300.00 11-10 11/10 Cashed Check 1,545.00 11/10 Patelka Dental L WF Payroll 171113 7188521 Payroll Invoice 73.30 11/10 Patelka Dental L WF Payroll 171113 3172195 Payroll DD 5.113.15 11/10 2115 Deposited OR Cashed Check 400.00 11/10 2114 Deposited OR Cashed Check 1,000.00 11/10 Bill Pay Pitney Bowes Pur on-Line Xxxxxxxxxx72105 on 11-10 108.99 11/10 2104 Check 2,000.00 11/10 2134 Check 2,500.00 11/10 2111 Check 272.00 11/10 2120 Check 291.00 11/10 2110 Check 770.00 11/10 2132 Check 124.20 19,137.89 11/13 Met Life Ins. CO Hcclaimpmt 1MI009339715 109.00 Trn*1*007990009339715*1135581829~ 11/13 Dental Benefit P Hcclaimpmt xxxxx7266 446.25 Trn*1*1311625804*1412014834*000052133\ 11/13 11/13Bankcard Deposit -0425162301 1,842.00 11/13 11/13Bankcard Deposit -0425162301 1,787.85 11/13 Synchrony Bank Btot Dep 171112 534812028493552 Patelka 636.12 Dental LLC 11/13 Deposit 3,001.68 11/13 Purchase authorized on 11/10 Glove World 610-4616100 PA 367.50 S387313634633462 Card 8701 11/13 Purchase authorized on 11/09 Future Pharmac0555 Philadelphia 211.73 PA S467313673752269 Card 8701 11/13 Purchase authorized on 11/11 Uniform Advantage 800-283-8708 76.97

FL S467313707211471 Card 8701

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	Check		Deposits/	Withdrawals/	Ending dail
Date	Number	Description	Credits	Debits	baland
11/13		Purchase authorized on 11/10 Amazon Mktplace Pm Amzn.Com/Bill WA S387313724228178 Card 8701		18.99	
11/13		Purchase authorized on 11/11 Amazon Mktplace Pm		58.23	
11/13		Amzn.Com/Bill WA S387313724262739 Card 8701 Purchase authorized on 11/11 Mag*Renew Yoga Jou		15.97	
11/13		800-929-2691 TN S467314286300338 Card 8701 Purchase authorized on 11/10 Henry Schein Techn 866-739-7695		204.58	****
11/13	***************************************	UT S387314652527138 Card 8701 Purchase authorized on 11/12 Mag*Renew Woman's		7.99	
11/13		800-929-2691 TN S387315287002332 Card 8701 Purchase Intl authorized on 11/12 Jsc Wengeorgia Tbilisi Geo		3.11	
44/46		S387316704525426 Card 8701		***************************************	
11/13		International Purchase Transaction Fee		0.09	
11/13		Wells Fargo Busi Tax Col Payroll Philadelphia,		1,876.27	
11/13		Deposited OR Cashed Check		250.00	
11/13	2139	Deposited OR Cashed Check		2,800.00	
11/13		Withdrawal Made In A Branch/Store		243.00	
11/13	·····	Withdrawal Made In A Branch/Store		988.79	
11/13		Withdrawal Made In A Branch/Store		1,293.59	
11/13		Withdrawal Made In A Branch/Store		5,518.85	***************************************
11/13	2127	Check	***************************************	500.00	***************************************
11/13	2108	Check		570.00	
11/13	2140	Check		2,500.00	9,455.1
11/14	2110	Humana Ins CO Efpayment 171114 377756	257.00	2,300.00	9,400.1
11/14		Trn*1*019420034685526*1391263473\			
		Met Life Ins. CO Hcclaimpmt 1MI009401829 Trn*1*007990009401829*1135581829~	273.00		
11/14		11/14Bankcard Deposit -0425162301	1,079.90		
11/14		Deposit	1,574.00		
11/14		Purchase authorized on 11/14 Amazon Mktplace Pm Amzn.Com/Bill WA S307317683463956 Card 8701		37.99	***************************************
11/14		Bill Pay Waste Management on-Line xxxxxxxxx24484 on 11-14		371.77	
11/14	<	Business to Business ACH Debit - Insurelinx Inc. Ins Prem Effdat 00000001218988 Patelka Dental LLC		29.99	
11/14		IRS Usataxpymt 111417 222771823421093 Igor Kutovoy		1 000 00	
11/14	2125	Check		1,000.00	
				259.00	
11/14	2133			337.50	10,602.7
11/15		Deltadntlins 3C Hcclaimpmt 240625101002 Trn*1*201711120034339*1942761537*94276~	43.00		
11/15		Met Life Ins. CO Hcclaimpmt 1MI009431073 Trn*1*007990009431073*1135581829~	372.80		
11/15		Avesis Avesis 112718Bu Patelka Dental Managem	4,049.00		
11/15		Purchase authorized on 11/13 H&R Dental Inc. 215-735-6929 PA S387317684761667 Card 8701		73.44	
11/15		Purchase authorized on 11/14 Amazon Mktplace Pm Amzn.Com/Bill WA S587317825807254 Card 8701		24.99	
11/15		Purchase authorized on 11/14 Paypal *A1Handpiec 402-935-7733 CA S467318695077634 Card 8701		258.20	
11/15		Purchase authorized on 11/14 Paypal *Lijinrong 402-935-7733 CA S587318695104168 Card 8701		4.99	
11/15		Purchase authorized on 11/14 Paypal *Wenqingfan		8.41	
11/15		402-935-7733 CA S587318695148115 Card 8701 Purchase authorized on 11/14 Paypal *Cloudenter 402-935-7733		10.75	
11/15		CA S307318695166537 Card 8701 Purchase authorized on 11/15 Amazon Mktplace Pm		7.28	
11/15		Amzn.Com/Bill WA S307318697704419 Card 8701 Purchase authorized on 11/14 Amazon.Com Amzn.CO		21.72	
11/15		Amzn.Com/Bill WA S307318715357575 Card 8701 Purchase authorized on 11/14 Lares Research 530-345-1767 CA		220.32	
		S587318767133941 Card 8701			
11/15		Business to Business ACH Debit - Synchrony Bank Btot Dep		1,133.90	

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	Check		Deposits/	Withdrawals/	Ending d
Date	Number	Description	Credits	Debits	bala
11/15	2143	Check		400.00	12,903
11/16		Cigna Hcclaimpmt 111417 1386815785	816.20		
11/16		Trn*1*77841367*1591031071\ Met Life Ins. CO Hcclaimpmt 1MI009473778	1,086.10		
		Trn*1*007990009473778*1135581829~	1,000.10		
11/16		11/16Bankcard Deposit -0425162301	1,317.49		
11/16		Deposit	1,577.60		
11/16		Deposit Made In A Branch/Store	5,000.00		
11/16		Purchase authorized on 11/15 Hsps Eservices 1-800-7345561 UT S587319575452390 Card 8701		358.66	
11/16		Purchase authorized on 11/15 Paypal *Lijian 402-935-7733 CA S467319609633738 Card 8701		33.80	
11/16		Purchase authorized on 11/15 Paypal *Chinaskyse 402-935-7733 CA S307319609679534 Card 8701		30.76	
11/16		Purchase authorized on 11/15 Paypal *Dentalwork 402-935-7733		169.00	w
		CA S467319626614127 Card 8701			
11/16		Patelka Dental L WF Payroll 171117 7188521 Payroll Invoice		73.30	
11/16		Wells Fargo Busi Tax Col Payroll Philadelphia,		1,942.45	
11/16		Patelka Dental L WF Payroll 171117 3210489 Payroll DD		5,261,84	
11/16	2138	Deposited OR Cashed Check		1,400.00	
11/16	~~~~~	Check		1,000.00	
11/16	2144			250.00	12,181
11/17		Unitedhealthcare Hcclaimpmt xxxxx7266	17.00	230.00	12,101
		Trn*1*1312791724*1412014834*000052133\	17.00		
11/17		Aetna A04 Hcclaimpmt xxxxx7266	56.00		
		Trn*1*817318550004311*1066033492\	55.50		
11/17		Aetna AS01 Hcclaimpmt xxxxx7266	137.00		·
		Trn*1*817318540004561*1066033492\	107.00		
11/17		Unitedhealthcare Payment 171117 64231 Patelka Dental LLC	243.00		
11/17		Ameritas Life Grp Claims Nov 0000664490 Dnt Patelka Dental	249.60		
11/17		Met Life Ins. CO Hcclaimpmt 1MI009515508	480.00		
		Trn*1*007990009515508*1135581829~	400.00		
11/17		Met Life Ins. CO Hcclaimpmt 1MI009534433	680.50	······································	
		Trn*1*007990009534433*1135581829~	000.50		
11/17		Deltadentalpa6P Hcclaimpmt 240625101002	1,152.80		
		Tm*1*201711140033448*1231667011*23166~	1,152.00		
11/17		Pay Plus Hcclaimpmt 171117 xxxxx7266	1,235.80		
		Tm*1*32934192*1133155962\	1,233.00		
11/17	····	11/17Bankcard Deposit -0425162301	1.006.00		······································
11/17		Purchase authorized on 11/16 Paypal *Home Depot	1,096.00	157.63	
,		402-935-7733 GA S587319641026952 Card 8701		157.63	
11/17		Purchase authorized on 11/16 Hey Dental 866-221-8397 OH		200.00	
1 17 1 2		S307319704593464 Card 8701		330.60	
11/17		Purchase authorized on 11/16 Amazon, Com Amzn, CO		454.00	
1 1/17		Amzn.Com/Bill WA S307320124189309 Card 8701		151.36	
11/17				07.00	
1 1/ 1 /		Purchase authorized on 11/17 Amazon.Com Amzn.CO		87.89	
11/17		Amzn.Com/Bill WA S387320700228354 Card 8701			
11/1/		Purchase authorized on 11/16 Hsps Eservices 1-800-7345561 UT S587320774572480 Card 8701		32.35	
11/17	2145			/ 700 00	
11/17	2145	Cashed Check Withdrawal Made In A Branch/Store		1,720.00	
11/17				1,000.00	
		Withdrawal Made In A Branch/Store		3,125.00	
11/17	<	Business to Business ACH Debit - Pay Plus Achtrans 171117 xxxxx9291 Zp Account 5		23.48	
11/17	2121	Check		2,000.00	
11/17		Check			
11/17		Check		770.00	7 00-
11/20	∠ 140	Met Life Ins. CO Hcclaimpmt 1MI009600158	145.00	500.00	7,630
11/20		·	145.00		
11/20		Trn*1*007990009600158*1135581829~	407.00		
11/20		Met Life Ins. CO Hcclaimpmt 1MI009618965 Trn*1*007990009618965*1135581829~	187.00		

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	Check		Deposits/	Withdrawals/	Endin
Date	Number	Description	Credits	Debits	t
11/20		Unitedhealthcare Hcclaimpmt xxxxx7266 Trn*1*1313101466*1412014834*000052133\	311.50	·	***************************************
11/20		Met Life Ins. CO Hcclaimpmt 1MI009556972 Trn*1*007990009556972*1135581829~	2,060.20		
11/20		11/20Bankcard Deposit -0425162301	250.00		
11/20		11/20Bankcard Deposit -0425162301	947.82	***************************************	
11/20		Deposit	128.40		
11/20		Deposit	1,786.60		
11/20		Deposit Made In A Branch/Store			
11/20			1,130.00	***************************************	
***************************************		Avesis Avesis 112718Bu Patelka Dental Managem	1,328.00		
11/20		Purchase authorized on 11/17 Staples Direct 800-3333330 MA S387320709321603 Card 8701		101.11	
11/20		Purchase authorized on 11/16 Dyna Flex 800-4894020 MO S307320826320011 Card 8701		235.14	
11/20		Purchase authorized on 11/16 Anaheim Dental Sup Anaheim CA S387320856457380 Card 8701		143.75	
11/20		Purchase authorized on 11/17 Amazon.Com Amzn.CO		137.69	******
11/20		Amzn.Com/Bill WA S587321562358282 Card 8701			
		Purchase authorized on 11/17 Paypal *Tomikkh 402-935-7733 CA S467321592353817 Card 8701		28.34	
11/20		Purchase authorized on 11/17 Paypal *Moveit 402-935-7733 CA S307321593355733 Card 8701		29.00	
11/20		Purchase authorized on 11/18 Orbitz*73103618540 Orbitz.Com WA S467322555087516 Card 8701		35.00	
11/20		Non-WF ATM Withdrawal authorized on 11/19 ATM Asb Fairmont Hotel Baku Aze 00387323756003793 ATM ID ATM00504 Card 8701		474.21	
11/20		Non-Wells Fargo ATM Transaction Fee		E 00	
11/20	2130			5.00	
11/21	2130	Pay Plus Hcclaimpmt 171121 xxxxx7266	40.00	215.00	14,
11/21			43.00		
11/21		Trn*1*33152534*1363884439\		***************************************	
		Ameritas Life Grp Claims Nov 0000665746 Dnt Patelka Dental	64.00		
11/21		11/21Bankcard Deposit -0425162301	1,250.00		
11/21		Purchase authorized on 11/20 Nespresso USA 888-637-7737 NY S387324692974462 Card 8701		117.00	
11/21		Bill Pay Philadelphia Gas on-Line xxxxx27177 on 11-21		1.00	
11/21		Bill Pay Silverscript Ins Recurringxxxx69320 on 11-21		28.50	
11/21	<	Business to Business ACH Debit - Pay Plus Achtrans 171121 xxxxx9291 Zp Account 5		0.82	
11/21		Business to Business ACH Debit - Insurelinx Inc. Ins Prem Effdat		20.00	
11/21	•	00000001225205 Patelka Dental LLC		30.90	
11/21	<	Business to Business ACH Debit - Synchrony Bank Mtot Dep		31.99	15,6
		171120 534812028493552 Patelka Dental LLC		01.00	10,0
11/22		Deltadntlins 3C Hoclaimpmt 240625101002	420,40		
		Trn*1*201711170033119*1942761537*94276~	720.40		
11/22		Deltadentalpa6P Hcclaimpmt 240625101002	3 344 60		
11/44		·	3,244.60		
11/22	***************************************	Trn*1*201711200025501*1231667011*23166~		12.10	
		Purchase authorized on 11/18 Azerbaijan A771707 Diegem Brusse Bel S857326000886213 Card 8701		451.16	
11/22		Purchase authorized on 11/21 Align Technology San Jose CA S307324660719426 Card 8701		250.00	
11/22		Purchase authorized on 11/21 Dental Diamond Sup 818-8374472 CA S587325711921912 Card 8701		23.88	
11/22		Purchase authorized on 11/21 Boston Market 0370 Abington PA S307325841667371 Card 8701		82.36	
11/22		Withdrawal Made In A Branch/Store		3,000.00	
11/22	2152	Cashed Check		1,640.00	
11/22		Check			40.0
11/24	∠140	Met Life Ins. CO Hcclaimpmt 1MI009742791	45.00	3,804.00	10,0
1 1/24		·	45.00		
11/24		Trn*1*007990009742791*1135581829~	005.00		•
11/24		Cigna Hcclaimpmt 112117 1386815785	995.20		

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D-4-	Check	2	Deposits/	Withdrawals/	Ending da
Date	Number	Description	Credits	Debits	balar
11/24		Deposit	1,175.60		
11/24		Deposit Made In A Branch/Store	7,500.00		
11/24		Purchase authorized on 11/23 Amazon Mktplace Pm		55.19	
11/24		Amzn.Com/Bill WA S467325600321571 Card 8701			
11/24		Purchase authorized on 11/22 Amazon Mktplace Pm		70.24	
11/24		Amzn.Com/Bill WA S387325603667770 Card 8701			
11/24		Purchase authorized on 11/23 Mag*Renew House Be		15.00	
11/24		800-929-2691 TN S587326294545861 Card 8701		····	
11/24		Purchase authorized on 11/23 Mag*Renew Martha S		28.00	
11/24		800-929-2691 TN S387326294587915 Card 8701			
11/24		Purchase authorized on 11/23 Mag*Renew Every DA		24.00	
11/24		800-929-2691 TN S587326294608124 Card 8701			
11/24		Purchase authorized on 11/22 McDonald Avenue PA Brooklyn NY		130.92	
11/04		S467326682126851 Card 8701			
11/24		Purchase authorized on 11/22 Arnold Dental Supp 425-712-8786		19.65	
11/24		WA S587326684103057 Card 8701			
11/24		Purchase authorized on 11/22 International Dent 305-817-2800		31.48	
		FL S307326748408188 Card 8701			
11/24	2151	Deposited OR Cashed Check		2,000.00	
11/24		Patelka Dental L WF Payroll 171127 7188521 Payroll Invoice		73.30	
11/24		Wells Fargo Busi Tax Col Payroll Philadelphia,		1,978.37	
11/24		Patelka Dental L WF Payroll 171127 3254010 Payroll DD		5,376.96	
11/24		Check		2,000.00	
11/24		Check		280.00	
11/24	2150	Check		770.00	6,923.
11/27		Humana Hmp PA Hcclaimpmt 171127 377756 Trn*1*015600099982496*1274460531\	148.00		
11/27		Ameritas Life Grp Claims Nov 0000667707 Dnt Patelka Dental	150.40		
11/27		Met Life Ins. CO Hcclaimpmt 1MI009765077 Trn*1*007990009765077*1135581829~	227.50		
11/27		11/27Bankcard Deposit -0425162301	57.60		
11/27		11/27Bankcard Deposit -0425162301	2,230.45	***************************************	
11/27	***************************************	Keystone First Payment 171124 64231 Patelka Dental LLC	415.00		
11/27		Keystone First Payment 171124 54 Patelka Dental LLC	3,480.80		
11/27		Deposit	1,681.40		*****
11/27		Purchase authorized on 11/26 Apl* Itunes.Com/Bi 866-712-7753	1,001.40	9.99	
		CA S387330382068463 Card 8701		5.55	.,~ '*-,
11/27	·····	Purchase authorized on 11/26 Wawa 8047 Philadelphia PA		35.67	
,		P00307330600509136 Card 8701		35.67	
11/27	2156	Cashed Check		200.00	
11/27		Deposited OR Cashed Check		300.00	
11/27	2147	Bill Pay Comcast on-Line xxxxxxxxx07012 on 11-27		2,800.00	
11/27	2121	Check		129.34	***************************************
				1,000.00	
11/27	2155	Check		500.00	10,540.0
11/28		Met Life Ins. CO Hcclaimpmt 1MI009809431	454.00		
44100		Trn*1*007990009809431*1135581829~			
11/28		Met Life Ins. CO Hcclaimpmt 1MI009831386	1,056.80		
		Trn*1*007990009831386*1135581829~			
11/28		11/28Bankcard Deposit -0425162301	7,508.33		
11/28		Purchase authorized on 11/27 Zest Anchors 760-743-7744 CA		405.50	
		S467331669208704 Card 8701			
11/28		Purchase authorized on 11/27 Abington Emergency 2154815673 PA S627332546900769 Card 8701		350.00	
11/28		Bill Pay Independence Blu on-Line xxxxxxxx03000 on 11-28		1,675.98	
11/28		Bill Pay Penn National IN on-Line xxxxx64748 on 11-28		2,659.64	
11/28	<	Business to Business ACH Debit - Insurelinx Inc. Ins Prem Effdat		31.55	···
		00000001229853 Patelka Dental LLC		01.00	
11/28		Erie Ins Group Eriexpspay Q122809330 Igor Kutovoy		317.99	14,118.
11/29		Deltadentalny6Y Hcclaimpmt 240625101002	69.00	311.55	14,116.
		Trn*1*201711260062619*1111980218*11198~	05.00		
11/29		Met Life Ins. CO Hcclaimpmt 1Mi009872624	157.00		
		MOLETO DIS. VV INCIGHBUHL HVIUUZO1/D/4	157.00		

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43,039.44

	Check		Deposits/	Withdrawals/	Ending dai
Date	Number	Description	Credits	Debits	baland
11/29		Avesis Avesis 112718Bu Patelka Dental Managem	5,086.00		
11/29		Purchase authorized on 11/28 Align Technology San Jose CA	0,000.00	250.00	
		S387331604279540 Card 8701		200.00	
11/29		Purchase authorized on 11/29 Amazon Mktplace Pm		224,29	***************************************
		Amzn.Com/Bill WA S307331787532687 Card 8701		LL-1.L0	
11/29		Purchase authorized on 11/27 Dyna Flex 800-4894020 MO		18.53	
		S387331796661602 Card 8701			
11/29		Purchase authorized on 11/28 Amazon.Com Amzn.Com/Bill WA		51.00	
		S467331841304255 Card 8701		0 7	
11/29		Recurring Payment authorized on 11/28 Dentsply Ih		1,918.25	
		781-890-6800 MA S587332472241207 Card 8701		1,010120	
11/29		Recurring Payment authorized on 11/28 Dentsply Ih		1,803,45	
		781-890-6800 MA S387332487699261 Card 8701		,,	
11/29		Purchase authorized on 11/28 Tmobile*Postpaid I 800-937-8997		221.05	
		WA S387332492066574 Card 8701			
11/29		Purchase authorized on 11/28 Sq *LA Vie Marketi New York NY		216.50	
		S467332680753172 Card 8701			
11/29		Purchase authorized on 11/28 P&G*Crest Oralb 800-543-2577 OH		112.87	W. M
		S587325551742320 Card 8701		,	
11/29		Check		400.00	14,214.5
11/30		Ameritas Life Grp Claims Nov 0000669652 Dnt Patelka Dental	249.60		
11/30		Cigna Hcclaimpmt 112817 1386815785	1,043.20		
		Trn*1*78386305*1591031071\			
11/30		11/30Bankcard Deposit -0425162301	4,441.40		
11/30		Deposit	2,484.00		
11/30		Deposit Made In A Branch/Store	25,000.00	***************************************	
11/30		Purchase authorized on 11/28 Starbucks 4NJ54 Milltown NJ		44.03	
		S387332532215172 Card 8701			
11/30		Purchase authorized on 11/28 Saks NY Rest 601 New York NY		588.48	
		S387332795383774 Card 8701			
11/30		Recurring Payment authorized on 11/29 Carriage Trade Cle		456.15	****
		215-3573400 PA S467333446076293 Card 8701			
11/30		Purchase authorized on 11/29 Compass Network Gr 717-2992383		500.00	
		PA S307333568025184 Card 8701			
11/30		Purchase authorized on 11/29 Pennwell Continuin 918-831-9720		59.00	· · · · · · · · · · · · · · · · · · ·
***************************************		OK S307333575191645 Card 8701			
11/30		Purchase authorized on 11/29 Henry Schein* 800-472-4346 NY	***	662.19	
		S307333612203913 Card 8701			
11/30		Deposited OR Cashed Check		1,400.00	
11/30		Bill Pay Lexus Financial Recurringxxxxxxtl427 on 11-30		460.00	***************************************
11/30	2161	Check		150.00	***************************************
11/30		Transactions Fee		22.50	
11/30		Cash Deposited Fee		51.00	43,039.44

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

\$176,388.23

\$140,416.41

Summary of checks written (checks listed are also displayed in the preceding Transaction history)

Number	Date	Amount	Number	Date	Amount	Number	Date	Amount
2092	11/1	1,986.84	2100	11/9	2,800.00	2105	11/1	400.00
2093	11/3	2,000.00	2101	11/3	1,600.00	2106	11/3	1,446.00
2098 *	11/3	770.00	2103 *	11/2	2,000.00	2107	11/7	500.00
2099	11/2	271.00	2104	11/10	2,000.00	2108	11/13	570.00

Ending balance on 11/30

Totals

< Business to Business ACH: If this is a business account, this transaction has a return time frame of one business day from post date. This time frame does not apply to consumer accounts.

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Account number: 8017

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Number	Date	Amount	Number	Date	Amount	Number	Date	Amoun
2109	11/7	225.00	2127	11/13	500.00	2144	11/16	250.0
2110	11/10	770.00	2128	11/9	1,000.00	2145	11/17	1,720.00
2111	11/10	272.00	2129	11/13	250.00	2146	11/17	500.00
2112	11/9	149.00	2130	11/20	215.00	2147	11/27	2,800.00
2113	11/7	4,609.98	2131	11/27	1,000.00	2148	11/22	3,804.00
2114	11/10	1,000.00	2132	11/10	124.20	2149	11/24	280.00
2115	11/10	400.00	2133	11/14	337.50	2150	11/24	770.00
2116	11/16	1,000.00	2134	11/10	2,500.00	2151	11/24	2,000.00
2120 *	11/10	291.00	2135	11/14	259.00	2152	11/22	1,640.00
2121	11/17	2,000.00	2138 *	11/16	1,400.00	2155 *	11/27	500.00
2122	11/17	770.00	2139	11/13	2,800.00	2156	11/27	300.00
2123	11/8	400.00	2140	11/13	2,500.00	2158 *	11/30	1,400.00
2124	11/9	250.00	2141	11/24	2,000.00	2161 *	11/30	150.00
2125	11/9	2,000.00	2143 *	11/15	400.00	2162	11/29	400.00
2126	11/10	1,545.00						

^{*} Gap in check sequence.

Monthly service fee summary

For a complete list of fees and detailed account information, see the Wells Fargo Account Fee and Information Schedule and Account Agreement applicable to your account (EasyPay Card Terms and Conditions for prepaid cards) or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 11/01/2017 - 11/30/2017	Standard monthly service fee \$14.00	You paid \$0.00
How to avoid the monthly service fee	Minimum required	This fee period
Have any ONE of the following account requirements	·	•
· Average ledger balance	\$7,500.00	\$11,996.00
· Qualifying transaction from a linked Wells Fargo Business Payroll Services ac	count 1	13 🗹
· Qualifying transaction from a linked Wells Fargo Merchant Services account	1	20 🗹
 Total number of posted Wells Fargo Debit Card purchases and/or payments 	10	88 🗹
- Enrollment in a linked Direct Pay service through Wells Fargo Business Online	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	0 🗆
· Combined balances in linked accounts, which may include	\$10,000,00	
- Average ledger balances in business checking, savings, and time accounts		
- Most recent statement balance in eligible Wells Fargo business credit cards		
lines of credit, and combined average daily balances from the previous mon	th	
in eligible Wells Fargo business and commercial loans and lines of credit		
 For complete details on how you can avoid the monthly service fee based or 		
your combined balances please refer to page 7 of the Business Account Fer	e and	
Information Schedule at www.wellsfargo.com/biz/fee-information		
WX/WX		

Account transaction fees summary

		Units	Excess	Service charge per	Total service
Service charge description	Units used	included	units	excess units (\$)	charge (\$)
Cash Deposited (\$)	24,500	7,500	17,000	0.0030	51.00
Transactions	245	200	45	0.50	22.50
Total service charges					\$73.50

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M IMPORTANT ACCOUNT INFORMATION

Periodically, it is necessary to update selected sections of the disclosures you received when you opened your business account. These updates provide you with the most up to date account information and are very important; so please review this information carefully and feel free to contact us with any questions or concerns.

Effective Feb 15, 2018:

If a business debit card or business ATM card purchase amount exceeds the current available balance* in the primary linked checking or savings account when you are making a purchase, you may be able to use your available balance to pay for a portion of the total purchase. The transaction will be subject to a partial authorization daily purchase limit set by the bank and your card's daily dollar limit.

We will first try to approve the full amount of the purchase with available funds in your checking account, account(s) linked for Overdraft Protection, and, if you are enrolled, using debit card overdraft service.

If this cannot result in an approval of the full amount of the purchase, the bank may approve a portion of the purchase using the remaining available funds in your checking account. This is called a "partial authorization." Here are some important details about partial authorizations:

- The remaining amount of the purchase total would need to be covered by another form of payment, such as cash or another card.
- If you are unable/unwilling to provide an additional form of payment, the partial authorization will be reversed by the merchant.
- Not all merchants are able to accept partial authorizations or process transactions using multiple forms of payment,

Thank you for being a Wells Fargo business customer. As a valued Wells Fargo customer we hope you find this information helpful. Again, if you have questions or concerns about these changes, please contact your local banker or call the number listed on your statement.

*This balance may not reflect all of your transactions, such as checks you have written or debit card transactions that have been approved but not yet submitted for payment by the merchan

Reminder about effect of pending debit card transactions on your account

For each debit card transaction, we place an authorization hold and track the "pending" transaction until the merchant sends the final payment instruction to the bank. We receive final payment instructions for most transactions within one to two business days, but we generally must release the authorization hold after three business days. While pending, these transactions reduce your available balance. If transactions are presented for payment when your account has an insufficient available balance, you may be charged overdraft and/or insufficient fund (NSF) fees on those transactions. The bank will assess no more than eight (8) \$35 overdraft and/or NSF fees per day.

New limits on Fees

Effective November 6, 2017, we will waive overdraft or returned item (Non-Sufficient Fund/NSF) fees on any transactions that are \$5 or less, regardless of your ending account balance. We will continue to waive overdraft fees on all posted transactions if both your ending daily account balance and your available balance are overdrawn by \$5 or less and there are no items returned for non-sufficient funds after all transactions have posted.

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Account number:

8017

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General statement policies for Wells Fargo Bank

■ Notice: Wells Fargo Bank, N.A. may furnish information about accounts belonging to individuals, including sole proprietorships, to consumer reporting agencies. If this applies to you, you have the right to dispute the accuracy of information that we have reported by writing to us at: Overdraft Collections and Recovery, P.O. Box 5058, Portland, OR 97208-5058.

You must describe the specific information that is inaccurate or in dispute and the basis for any dispute with supporting documentation. In the case of information that relates to an identity theft, you will need to provide us with an identity theft report.

Account Balance Calculation Worksheet	Number	Items Outstanding	Amount
Use the following worksheet to calculate your overall account balance.			
2. Go through your register and mark each check, withdrawal, ATM			
transaction, payment, deposit or other credit listed on your statement.			
Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn			
from your account during this statement period.			
Use the chart to the right to list any deposits, transfers to your account,			
outstanding checks, ATM withdrawals, ATM payments or any other			
withdrawals (including any from previous months) which are listed in			
your register but not shown on your statement.			
PAITED			
ENTER A. The ending balance			
shown on your statement			
ADD			
B. Any deposits listed in your \$			
register or transfers into \$			
your account which are not \$			
shown on your statement. + \$	_		
	-		
CALCULATE THE SUBTOTAL			
(Add Parts A and B)	***************************************		
SUBTRACT			
C. The total outstanding checks and	***************************************		
withdrawals from the chart above	_		
CALCULATE THE ENDING BALANCE			
(Part A + Part B - Part C)			
This amount should be the same			
as the current balance shown in	1		
your check register			
	-		
	L	Total amount ¢	

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Wells Fargo Business Choice Checking

Account number: 1199 November 1, 2017 - November 30, 2017 Page 1 of 4



PATELKA DENTAL LLC 8332C BUSTLETON AVE PHILADELPHIA PA 19152-1909

Questions?

Available by phone 24 hours a day, 7 days a week: Telecommunications Relay Services calls accepted 1-800-CALL-WELLS (1-800-225-5935)

TTY: 1-800-877-4833 En español: 1-877-337-7454

Online: wellsfargo.com/biz

Write: Wells Fargo Bank, N.A. (345)

P.O. Box 6995

Portland, OR 97228-6995

Your Business and Wells Fargo

Cash flow is a key indicator of the financial health of your business. Find tips and strategies for effective cash flow management at wellsfargoworks.com.

Account options

A check mark in the box indicates you have these convenient services with your account(s). Go to wellsfargo.com/biz or call the number above if you have questions or if you would like to add new services.

Business Online Banking	1
Online Statements	$\overline{\mathcal{Q}}$
Business Bill Pay	1
Business Spending Report	1
Overdraft Protection	\sqcap

Activity summary

Average ledger balance this period	\$1,832.29
Ending balance on 11/30	\$4,935.34
Withdrawals/Debits	- 24,544.00
Deposits/Credits	28,783.85
Beginning balance on 11/1	\$695.49

Account number: 1199

PATELKA DENTAL LLC

Pennsylvania account terms and conditions apply

For Direct Deposit use

Routing Number (RTN): 031000503

For Wire Transfers use

Routing Number (RTN): 121000248

Overdraft Protection

This account is not currently covered by Overdraft Protection. If you would like more information regarding Overdraft Protection and eligibility requirements please call the number listed on your statement or visit your Wells Fargo store.

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Account number:

1199

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Transaction history

Ending bal	ance on 11/30				4,935.34
11/30		Monthly Service Fee	***************************************	14.00	4,935.34
11/20		Trn*1*71007521005578*1236003113\	3,010.03		4,949.34
11/29		Trn*1*0902358247*1251687586\ Comm of PA Promise MA 171129 AP031683889	3,610.85		4,949.34
11/27		United Concordia Hcclaimpmt xxxxx6538	1,023.25		1,338.49
14/07		Trn*1*0902363122*1231661402\			
11/27		United Concordia Hcclaimpmt 1386815785	292.27		
11/24		Withdrawal Made In A Branch/Store		7,500.00	22.97
		Tm*1*71007520005603*1236003113\			
11/22		Comm of PA Promise MA 171122 AP031605503	4,638.52		7,522.97
		Trn*1*0902349038*1231661402\			
11/21		United Concordia Hcclaimpmt xxxxx6538	1,692.06		2,884.45
		Trn*1*0902343602*1251687586\			
11/21		United Concordia Hcclaimpmt 1386815785	1,135.81		
		Trn*1*0902341314*1231294723\			
11/21		Fep Dental Blue Hcclaimpmt 1386815785	49.00		
11/20		Withdrawal Made In A Branch/Store		1,130.00	7.58
11/17		Dentaquest USA, Payment 2506641205 Patelka Dental LLC	660.60	***************************************	1,137.58
11/17		Dentaquest USA, Payment 1816639736 Patelka Dental LLC	248.00		
11/17		Dentaquest USA, Payment 2506641387 Patelka Dental LLC	220.50		
11/16		Withdrawal Made In A Branch/Store	***************************************	5,000.00	8.48
		Trn*1*71007519005603*1236003113\	-,		5,550.70
11/15	**************************************	Comm of PA Promise MA 171115 AP031506792	3,768.80		5,008.48
		Trn*1*0902328266*1251687586\			.,250.00
11/14		United Concordia Hcclaimpmt 1386815785	660.30		1,239.68
		Trn*1*0902333981*1231661402\			
11/14	······································	United Concordia Hcclaimpmt 1386815785	553.88	0,000.00	20.00
11/9		Withdrawal Made In A Branch/Store	***	5,600,00	25.50
		Trn*1*71007518005645*1236003113\	1,002.10		0,020.00
11/8		Comm of PA Promise MA 171108 AP031443195	4,982.10		5,625.50
, .		Trn*1*0902314445*1251687586\	302.10		043.40
11/7		United Concordia Hcclaimpmt 1386815785	302.10		643.40
, .		Trn*1*0902319355*1231661402\	200.51		
11/7		United Concordia Hcclaimpmt 1386815785	268.51		
1 1//		Trn*1*0902321681*1232184623\	68.05		
11/7		Qccppobluebrand Hcclaimpmt 1386815785	60.05	1,450.00	4.74
11/6	·	Withdrawal Made In A Branch/Store	862.20	4 450 00	1,454.74
11/3		Dentaquest USA, Payment 2506624605 Patelka Dental LLC Dentaquest USA, Payment 2506624604 Patelka Dental LLC	541.80		4 (51.7)
11/3			F14.00	3,850.00	50.74
11/2	······	Trn*1*71007517005632*1236003113\ Withdrawal Made In A Branch/Store		0.050.00	
3 17 1		Comm of PA Promise MA 171101 AP031346144	3,205.25		3,900.74
Date 11/1	Number	Description	Credits	Debits	balance
Data	Check		Deposits/	Withdrawals/	Ending daily

The Ending Daily Balance does not reflect any pending withdrawals or holds on deposited funds that may have been outstanding on your account when your transactions posted. If you had insufficient available funds when a transaction posted, fees may have been assessed.

Monthly service fee summary

For a complete list of fees and detailed account information, see the Wells Fargo Account Fee and Information Schedule and Account Agreement applicable to your account (EasyPay Card Terms and Conditions for prepaid cards) or talk to a banker. Go to wellsfargo.com/feefaq for a link to these documents, and answers to common monthly service fee questions.

Fee period 11/01/2017 - 11/30/2017	Standard monthly service fee \$14.00	You paid \$14.00
How to avoid the monthly service fee	Minimum required	This fee period
Have any ONE of the following account requirements		·

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Account number:

1199

November 1, 2017 - November 30, 2017



\$0.00

Monthly service fee summary (continued	1)				
How to avoid the monthly service fee Average ledger balance Qualifying transaction from a linked Wells Fargo Business Payroll Services account Qualifying transaction from a linked Wells Fargo Merchant Services account Total number of posted Wells Fargo Debit Card purchases and/or payments Enrollment in a linked Direct Pay service through Wells Fargo Business Online Combined balances in linked accounts, which may include Average ledger balances in business checking, savings, and time accounts Most recent statement balance in eligible Wells Fargo business credit cards and lines of credit, and combined average daily balances from the previous month in eligible Wells Fargo business and commercial loans and lines of credit For complete details on how you can avoid the monthly service fee based on your combined balances please refer to page 7 of the Business Account Fee and Information Schedule at www.wellsfargo.com/biz/fee-information WXWX Account transaction fees summary Units Service charge description Units used included Cash Deposited (\$) 0 7,500 Transactions			m required \$7,500.00 1 1 10 1 \$10,000.00	This fee period \$1,832.00	
Account transaction fees summ	ary				
		Units	Excess	Service charge per	Total service
***************************************			units	excess units (\$)	charge (\$)
the second secon	en de la companya de	and the state of t	0	0.0030	0.00
Transactions	20	200	0	0.50	0.00

IMPORTANT ACCOUNT INFORMATION

Reminder about effect of pending debit card transactions on your account

For each debit card transaction, we place an authorization hold and track the "pending" transaction until the merchant sends the final payment instruction to the bank. We receive final payment instructions for most transactions within one to two business days, but we generally must release the authorization hold after three business days. While pending, these transactions reduce your available balance. If transactions are presented for payment when your account has an insufficient available balance, you may be charged overdraft and/or insufficient fund (NSF) fees on those transactions. The bank will assess no more than eight (8) \$35 overdraft and/or NSF fees per day.

New limits on Fees

Total service charges

Effective November 6, 2017, we will waive overdraft or returned item (Non-Sufficient Fund/NSF) fees on any transactions that are \$5 or less, regardless of your ending account balance. We will continue to waive overdraft fees on all posted transactions if both your ending daily account balance and your available balance are overdrawn by \$5 or less and there are no items returned for non-sufficient funds after all transactions have posted.

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General statement policies for Wells Fargo Bank

■ Notice: Wells Fargo Bank, N.A. may furnish information about accounts belonging to individuals, including sole proprietorships, to consumer reporting agencies. If this applies to you, you have the right to dispute the accuracy of information that we have reported by writing to us at: Overdraft Collections and Recovery, P.O. Box 5058, Portland, OR 97208-5058.

You must describe the specific information that is inaccurate or in dispute and the basis for any dispute with supporting documentation. In the case of information that relates to an identity theft, you will need to provide us with an identity theft report.

Account Balance Calculation Worksheet	Number	Items Outstanding	Amount
Use the following worksheet to calculate your overall account balance.			
2. Go through your register and mark each check, withdrawal, ATM			
transaction, payment, deposit or other credit listed on your statement.			
Be sure that your register shows any interest paid into your account and any service charges, automatic payments or ATM transactions withdrawn			-
from your account during this statement period.			
Use the chart to the right to list any deposits, transfers to your account,			
outstanding checks, ATM withdrawals, ATM payments or any other			
withdrawals (including any from previous months) which are listed in			<u> </u>
your register but not shown on your statement.			
ENTER			
A. The ending balance			
shown on your statement			
ADD			
B. Any deposits listed in your \$			
register or transfers into			
your account which are not \$			
shown on your statement.			
CALCULATE THE SUBTOTAL			
(Add Parts A and B)			
SUBTRACT			
C. The total outstanding checks and			
withdrawals from the chart above			
CALCULATE THE ENDING BALANCE			
(Part A + Part B - Part C)			
This amount should be the same			
as the current balance shown in			
your check register			
	L		
		Total amount \$	

EXHIBIT E - LIQUIDATION ANALYSIS

Debtor's Estimated Liquidation Value of Assets

A	Cash On Hand		\$4,885 ³
E		4	\$222,920
Č			\$0
Γ	•		\$18,900
Ē			\$23,400
F	J 1 1		\$10,000
			\$0
H	\mathcal{E}		\$0
I	Investment Property		\$0
J	Ā V		\$0
K			\$0
	TOTAL ASSETS AT LIQUIDATION VALUE		\$280,105
Less:	-	\$ 642,097.80	ŕ
Secureo	creditors (Bank of America) recoveries		
Less:		\$ 25,000	
Chapter	7 trustee fees and expenses (including costs of sale)		
Less:		\$ 61,000	
WARN	Notices and payroll for WARN period		
Less:		$165,000^6$	
Chapte	11 administrative expenses		
Less:		\$ 19,760.17 ⁷	
Priority	claims, excluding administrative expense claims		
1.)	Balance for unsecured claims	\$ 0	
2.)	Total dollar amount of unsecured claims	\$ 599,225.99 ⁸	
Percentage that Unsecured Creditors Would Receive Or Retain in a Chapter 7 Liquidation:		0 %	
Est. An	t. Unsecured Creditors Will Receive under the Plan:	\$ 100,000°; 16.67%)

³ As of July 31, 2017.

⁴ Approximately \$20,0000 of the accounts receivable are outstanding more than 90 days.

Due to healthcare reimbursement limitations, this unit has remained in storage since 2014. Debtor's attempts to sell the mobile unit have been unsuccessful as there is not a market for this asset under the present healthcare legislation.

Approximate amount owed through September 29, 2017 to all retained professionals.

Debtor's audit was recently completed and Debtor will be working with the taxing authorities to determine total amount to be paid for tax obligations.

Amount excludes claims in Classes 3 through 6, which are separately classified, in order to show the true distribution to Class 7.

Does not include amounts being paid to Classes 3 through 6 under the Plan. Assumes gross revenues of \$2,500,000 in each of calendar years 2018 and 2019.

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EXHIBIT F - CASH ON HAND ON EFFECTIVE DATE OF PLAN:

Cash on hand on effective date of the Plan:	\$ 112,869
Less -	
Amount of administrative expenses payable on effective date of the Plan	\$325
Amount of statutory costs and charges	\$4,875
Amount of cure payments for executory contracts	\$25,000
Other Plan Payments due on effective date of the Plan	\$30,260.17
Balance after paying these amounts	\$52,408.83

The sources of the cash Debtor will have on hand by the effective date of the Plan are estimated as follows:

Cash in Debtor's bank account now \$4,885

Net earnings between now and effective date of the Plan

Borrowing

Capital Infusion

Other

Total \$112,869

Includes receipt of initial EB-5 or other Investment in the amount of \$100,000.

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EXHIBIT G – PROJECTIONS OF CASH FLOW AND EARNINGS FOR POST-CONFIRMATION PERIOD

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Statement of Projected Monthly Cash Flows
October 1,2017 through October 31, 2017
November 1, 2017 through November 30, 2017
December 1, 2017 through December 31, 2017
January 1, 2018 through January 31, 2018

Г	T		<u> </u>	
Cash Bal - Beg	9,545	72,369	75,693	54,017
Cash Receipts:				
Revenue	174,133	174,133	174,133	174,133
Invested Funds	100,000	0	0	0
	, i			
Total mo cash receipts	274,133	174,133	174,133	174,133
Cash Disbursements:				
Advert & promo	550	550	550	550
Automobile	750	750	750	750
Bank charges	50	50	50	50
Bank merchant fees	925	925	925	925
Dental lab expenses	11,500	11,500	11,500	11,500
Dental supplies	22,500	22,500	22,500	22,500
Draw - Svetlana	6,250	6,250	6,250	6,250
Dues & subscriptions	35	35	35	35
Entertainment & meals	250	250	250	250
Insurance	2,417	2,417	2,417	2,417
Regular Debt Service	12,500	12,500	12,500	12,500
BOA pymt, as agreed	5,000	0	0	0
HighSpeed/CAN/EBF, as agreed	10,500	0	0	0
License & registration	250	250	250	250
Office expenses	2,000	2,000	2,000	2,000
Outside services	65,000	65,000	65,000	65,000
Payroll expenses	32,083	32,083	32,083	32,083
Postage	250	250	250	250
Professional fees	1,367	1,367	1,367	1,367
Refunds	900	900	900	900
Rent	6,042	6,042	6,042	6,042
Rent-back rent, as agreed	25,000	0	25,000	100
Repairs & maintenance	408	408	408	408
Security Taxes-other	107 83	107 83	107 83	107 83
Telephone	100	100	100	100
Trash removal	292	292	292	292
Travel	750	750	750	750
Uniforms & laundry	750	750	750	750
Utilities	2,700	2,700	2,700	2,700
Cantoo	_,,,,,,	2,700	2,700	_,, 00
Total cash requirements	211,309	170,809	195,809	170,809
Cash Excess (Shortage)	62,824	3,324	(21,676)	3,324
			,	
Cash Balance - Ending	72,369	75,693	54,017	57,341