

**IN THE UNITED STATES BANKRUPTCY COURT  
FOR THE DISTRICT OF DELAWARE**

In re:	)	Chapter 11
	)	
EBH Topco, LLC, <i>et al.</i> , <sup>1</sup>	)	Case No. 18-11212 (BLS)
	)	
Debtors.	)	Jointly Administered
	)	
	)	

**GLOBAL NOTES, METHODOLOGY, AND SPECIFIC  
DISCLOSURES REGARDING THE DEBTORS' SCHEDULES OF  
ASSETS AND LIABILITIES AND STATEMENTS OF FINANCIAL AFFAIRS**

## Introduction

EBH Topco, LLC and its affiliated debtors and debtors-in-possession (each, a “Debtor”, and collectively, the “Debtors”), with the assistance of their advisors, have filed their respective Schedules of Assets and Liabilities (the “Schedules”) and Statements of Financial Affairs (the “Statements,” and together with the Schedules, the “Schedules and Statements”) with the United States Bankruptcy Court for the District of Delaware (the “Bankruptcy Court”), pursuant to section 521 of title 11 of the United States Code (the “Bankruptcy Code”) and Rule 1007 of the Federal Rules of Bankruptcy Procedure (the “Bankruptcy Rules”).

These Global Notes, Methodology, and Specific Disclosures Regarding the Schedules and Statements (the “Global Notes”) pertain to, are incorporated by reference in, and comprise an integral part of, each Debtor’s Schedules and Statements. The Global Notes should be referred to, considered, and reviewed in connection with any review of the Schedules and Statements.

<sup>1</sup> The Debtors in these chapter 11 cases, along with the last four digits of each Debtor's federal tax identification number, are EBH Topco, LLC (6103), Elements Behavioral Health, Inc. (7176), EBH Holding Company, Inc. (0370), EBH Big Rock, Inc. (1880), SoCal Rehab and Recovery, Inc. (3741), The Sexual Recovery Institute, Inc. (1279), Westside Sober Living Centers, Inc. (5717), Ehrman Subsidiary Corp. (3958), PROMAL2, Inc. (1377), PROMAL4, Inc. (2453), SBAR2, Inc. (9844), Promises Residential Treatment Center VI, Inc. (1112), Assurance Toxicology Services, LLC (9612), Elements Screening Services, Inc. (0055), TRS Behavioral Care, Inc. (6343), Spirit Lodge, LLC (1375), San Cristobal Treatment Center, LLC (1419), EBH Acquisition Subsidiary, Inc. (6132), EBH Services of Florida, Inc. (6802), Outpatient Services FL, Inc. (9596), EBH Northeast Services, Inc. (3551), Intensive Outpatient Services PA, Inc. (5581), Wrightsville Services, LLC (9535), NE Sober Living, Inc. (1955), Northeast Behavioral Services, Inc. (8881), The Ranch on Piney River, Inc. (0195), Outpatient Services TN, Inc. (5584), EBH Southwest Services, Inc. (5202), Elements Medical Group of Utah, Inc. (9820), Southeast Behavioral Health Services, Inc. (1267), Elements Medical Group of Mississippi, Inc. (4545), and Elements Medical Group of Arizona, Inc. (8468). The Debtors' mailing address is 5000 Airport Plaza Dr., Suite 100, Long Beach, California 90815.

The Schedules and Statements do not purport to represent financial statements prepared in accordance with Generally Accepted Accounting Principles in the United States, nor are they intended to be fully reconciled with the financial statements of each Debtor (whether publicly filed or otherwise). Additionally, the Schedules and Statements contain unaudited information that is subject to further review and potential adjustment, and reflect the Debtors' reasonable efforts to report the assets and liabilities of each Debtor on an unconsolidated basis.

In preparing the Schedules and Statements, the Debtors relied upon information derived from their books and records that was available at the time of such preparation. Although the Debtors have made reasonable efforts to ensure the accuracy and completeness of such financial information, inadvertent errors or omissions, as well as the discovery of conflicting, revised, or subsequent information, may cause a material change to the Schedules and Statements.

The Debtors and their officers, employees, agents, attorneys, and financial advisors do not guarantee or warrant the accuracy or completeness of the data that is provided in the Schedules and Statements and shall not be liable for any loss or injury arising out of or caused in whole or in part by any act or omission, whether negligent or otherwise, in procuring, compiling, collecting, interpreting, reporting, communicating, or delivering the information contained in the Schedules and Statements. Except as expressly required by the Bankruptcy Code, the Debtors and their officers, employees, agents, attorneys, and financial advisors expressly do not undertake any obligation to update, modify, revise or re-categorize the information provided in the Schedules and Statements or to notify any third party should the information be updated, modified, revised, or re-categorized.

The Schedules and Statements have been signed by an authorized representative of each Debtor. In reviewing and signing the Schedules and Statements, this representative relied upon the efforts, statements, and representations of the Debtors' other personnel and professionals. The representative has not (and could not have) personally verified the accuracy of each such statement and representation, including, for example, statements and representations concerning amounts owed to creditors and their addresses. **Neither the Schedules and Statements, nor the Global Notes, should be relied upon by any persons for information relating to current or future financial conditions, events, or performance of the Debtors.**

### **Global Notes and Overview of Methodology**

1. **Reservation of Rights.** Reasonable efforts have been made to prepare and file complete and accurate Schedules and Statements; however, inadvertent errors or omissions may exist. The Debtors reserve all rights to amend or supplement the Schedules and Statements from time to time, in all respects, as may be necessary or appropriate (including, without limitation,: (a) the right to amend the Schedules and Statements with respect to a claim ("Claim") description, designation, or Debtor against which the Claim is asserted; (b) dispute or otherwise assert offsets or defenses to any Claim reflected in the Schedules and Statements as to amount, liability, priority, status, or classification; (c) subsequently designate any Claim as "disputed," "contingent," or "unliquidated," and/or (d) object to the extent, validity, enforceability, priority, or avoidability of any Claim). Any failure to designate a Claim in the Schedules and Statements as "disputed," "contingent," or "unliquidated" does not constitute an admission by the Debtors that such Claim or amount is not "disputed," "contingent," or

“unliquidated.” Listing a Claim does not constitute an admission of liability by the Debtor against which the Claim is listed or against any of the Debtors. Furthermore, nothing contained in the Schedules and Statements shall constitute a waiver of rights with respect to the Debtors’ chapter 11 cases, including, without limitation, issues involving Claims, substantive consolidation, defenses, equitable subordination, recharacterization, and/or causes of action arising under the provisions of chapter 5 of the Bankruptcy Code and any other relevant non-bankruptcy laws to recover assets or avoid transfers. Any specific reservation of rights contained elsewhere in the Global Notes does not limit in any respect the general reservation of rights contained in this paragraph. The actual value for any asset or liability may be different than what is reflected in the Debtors’ books and records or the Schedules and Statements, and the Debtors reserve the right to have the Bankruptcy Court determine such value.

2. **Confidential Information.** There may be instances in the Schedules and Statements where the Debtors deemed it necessary and appropriate to redact from the public record information such as names, addresses or amounts. Typically, the Debtors have used this approach because of (a) an agreement between the particular Debtor and a third party, (b) concerns of confidentiality, or (c) concerns for the privacy of an individual. The addresses of current and former employees, including directors and officers, have been removed from entries listed on certain of the Schedules and Statements, where applicable. The Debtors will mail any required notice or other documents to the address listed in their books and records for such parties. In addition, the Debtors may be parties to executory contracts with confidentiality provisions and, where applicable, such confidential information has not been included in the Schedules and Statements.
3. **Description of Cases and “As Of” Information Date.** On May 23, 2018 (the “Petition Date”), each of the Debtors filed a voluntary petition for relief under chapter 11 of the Bankruptcy Code. The Debtors continue to operate their business and manage their properties as debtors-in-possession pursuant to sections 1107(a) and 1108 of the Bankruptcy Code. The Debtors’ chapter 11 cases are being jointly administered pursuant to Bankruptcy Rule 1015(b). The Debtors’ assets and liabilities are reported as of the Petition Date.
4. **Net Book Value of Assets.** It would be prohibitively expensive, unduly burdensome, and an inefficient use of estate assets for the Debtors to obtain current market valuations for each of their assets. Accordingly, unless otherwise indicated, the Schedules and Statements reflect the net book value of the Debtors’ assets as of the Petition Date. Furthermore, as applicable, assets that have fully depreciated or were expensed for accounting purposes may not be reflected in the Schedules and Statements as they have no net book value. The Debtors reserve their right to amend or adjust the value of each asset or liability set forth in the Schedules and Statements.

**Recharacterization.** Notwithstanding the Debtors’ reasonable efforts to properly characterize, classify, categorize, or designate certain Claims, assets, executory contracts, unexpired leases,, postemployment benefits, and other items reported in the Schedules and Statements, the Debtors may, nevertheless, have improperly characterized, classified, categorized, designated, or omitted certain items. Accordingly, the Debtors reserve all of their rights to recharacterize, reclassify, recategorize, re-designate, add, or delete items reported in the Schedules and Statements at a

later time as is necessary or appropriate as additional information becomes available. Specifically, as the Debtors do not maintain their books and records on a legal entity basis, despite efforts to list the applicable asset or liability on the schedules of Debtors Spirit Lodge and San Cristobal, it may ultimately be determined that assets or liabilities of these entities may be listed on the schedules of TRS Behavioral Care, Inc. or vice versa.

5. **Real Property and Personal Property-Leased.** In the ordinary course of their business, the Debtors lease real property, and lease various articles of personal property from certain third-party lessors. The Debtors have made reasonable efforts to list all such leases in the Schedules and Statements. However, nothing in the Schedules or Statements is or shall be construed as an admission or determination as to the legal status of any lease (including whether to assume and assign or reject such lease or whether it is a true lease or a financing arrangement), and the Debtors reserve all of their rights with respect to all such issues.
6. **Excluded Assets and Liabilities.** The Debtors have sought to allocate assets and liabilities between the prepetition and post-petition periods based on the information and research conducted in connection with the preparation of the Schedules and Statements. As additional information becomes available and further research is conducted, the allocation of liabilities between the prepetition and post-petition periods may change.

The liabilities listed on the Schedules do not reflect any analysis of Claims under section 503(b)(9) of the Bankruptcy Code. Accordingly, the Debtors reserve all of their rights to dispute or challenge the validity of any asserted Claims under section 503(b)(9) of the Bankruptcy Code or the characterization of the structure of any such transaction or any document or instrument related to any creditor's Claim.

In certain instances, immaterial assets not included in the Debtors' books and records may have been excluded.

The Bankruptcy Court has authorized the Debtors to pay, in their discretion in the ordinary course of business, certain prepetition Claims on a post-petition basis. These schedules reflect such claims without reduction for post-petition payments on such claims. However, to the extent a claim has already been paid with respect to a pre-petition claim, future disbursements on account of such claim will take into account and will be reduced by any post-petition payments already made with respect to such claim.

7. **Insiders.** The parties identified as "insiders" have been included for informational purposes only. The Debtors do not take any position with respect to: (a) such person's influence over the control of the Debtors; (b) the management responsibilities or functions of such individual; (c) the decision-making or corporate authority of such individual; or (d) whether such individual could successfully argue that he or she is not an "insider" under applicable law, including, without limitation, the federal securities laws or with respect to any theories of liability or for any other purpose. Further, the inclusion of a party as an "insider" is not an acknowledgement or concession that such party is an "insider" for purposes of section 101(31) of the Bankruptcy Code.

8. **Intellectual Property Rights.** The exclusion of any intellectual property shall not be construed as an admission that such intellectual property rights have been abandoned, terminated, assigned, expired by their terms, or otherwise transferred pursuant to a sale, acquisition, or other transaction. Accordingly, the Debtors reserve all of their rights with respect to the legal status of any and all such intellectual property rights.
9. **Executory Contracts and Unexpired Leases.** Although the Debtors have made diligent attempts to attribute executory contracts and unexpired leases to the counterparties to such agreements, in certain instances, the Debtors may have inadvertently failed to do so. Accordingly, the Debtors reserve all of their rights with respect to the legal status of any and all such contracts and leases.
- Moreover, the Debtors have not set forth executory contracts and unexpired leases as assets in the Schedules and Statements, even though these contracts and leases may have some value to the Debtors' estates.
10. **Materialman's/Mechanic's Liens.** The assets listed in the Schedules and Statements are presented without consideration of any materialman's, or mechanic's liens.
11. **Classifications.** Listing a Claim, contract or lease on (a) Schedule D as "secured," (b) Schedule E/F, Part 1 as "priority unsecured," (c) Schedule E/F, Part 2 as "Non-priority unsecured," or (d) Schedule G as "executory" or "unexpired," does not constitute an admission by the Debtors of the legal rights of the claimant, or a waiver of the Debtors' rights to recharacterize or reclassify such Claims or contracts or leases or to setoff against such Claims.
12. **Causes of Action.** Despite their reasonable efforts to identify all known assets, the Debtors may not have listed all of their causes of action or potential causes of action against third parties (collectively, "Causes of Action") as assets in the Schedules and Statements, including, without limitation, causes of action arising under the provisions of chapter 5 of the Bankruptcy Code and any other relevant non-bankruptcy laws to recover assets or avoid transfers. The Debtors reserve all of their rights with respect to any: (a) cause of action (including avoidance actions), (b) controversy, (c) right of setoff, (d) cross-claim, (e) counterclaim, (d) recoupment, and (e) any Claim on contracts or for breaches of duties imposed by law or in equity, demand, right, action, lien, indemnity, guaranty, suit, obligation, liability, damage, judgment, account, defense, power, privilege, license, and franchise of any kind or character whatsoever, known, unknown, fixed or contingent, matured or unmatured, suspected or unsuspected, liquidated or unliquidated, disputed or undisputed, secured or unsecured, assertable directly or derivatively, whether arising before, on, or after the Petition Date, in contract or in tort, in law, or in equity, or pursuant to any other theory of law they may have, and neither these Global Notes nor the Schedules and Statements shall be deemed a waiver of any Claims or Causes of Action or in any way prejudice or impair the assertion of such Claims or Causes of Action.
13. **Intercompany Accounts and Claims.** In the ordinary course of business, the Debtors engage in routine business relationships with non-Debtor affiliates (the "Intercompany Transactions") resulting in intercompany receivables and payables, which are described more

fully in the Debtors' "first-day" cash management motion [*see* Docket No. 16]. Intercompany payables and receivables among the Debtors and its non-Debtor affiliates are reported on a net basis and at book value in Schedule AB77 and Schedule F, as applicable. Intercompany transfers between the Debtors and non-Debtor affiliates are set forth on Statement 4. The listing of any amounts with respect to such receivables and payables is not and shall not be construed as an admission of the characterization of such balances as debt, equity or otherwise. Furthermore, the listing of these amounts is not necessarily indicative of the ultimate recovery, if any, on any intercompany asset account or the impairment or Claim status of any intercompany liability account. Intercompany payables and receivables also may be subject to set off, recoupment, and netting not reflected in the Schedules and Statements. The Debtors reserve all rights to later change the characterization, classification, categorization or designation of intercompany accounts reported in the Schedules and Statements.

**14. Summary of Significant Reporting Policies.** The following is a summary of significant reporting policies:

- a. Undetermined Amounts. The description of an amount as "unknown," "TBD," "undetermined," or similar indication is not intended to reflect upon the materiality of such amount.
- b. Totals. All totals that are included in the Schedules and Statements represent totals of all known amounts. To the extent there are unknown or undetermined amounts, the actual total may be different than the listed total.
- c. Liens. The value of assets listed in the Schedules and Statements are presented without consideration of any liens that may attach (or have attached) to such property and equipment.

**15. Currency.** All amounts are reflected in U.S. dollars.

**16. Net Operating Losses ("NOLs").** The value of the NOLs scheduled by the Debtors is unknown as it depends on the amount and timing of future taxable income against which the NOLs may be applied, on the form any restructuring may take, as well as on the application of various tax rules limiting the use of the NOLs.

**Specific Disclosures with Respect to the Schedules**

**Schedule A/B.**

**Schedule A/B, Part 1, Question 3.** Cash values held in financial accounts are listed on Schedule A/B, Part 1, Question 3, as of the Petition Date.

**Schedule A/B, Part 3, Questions 11a, 11b.** The Debtors have included estimates in their response to question 11a and 11b in certain instances where accounts receivable aging information by legal entity was not readily available.

**Schedule A/B, Part 4, Question 15.** The value of ownership interests in subsidiaries have been listed in Schedule A/B, Part 4, Question 15, as undetermined.

**Schedule A/B, Part 5, Question 22.** The Debtors expense supplies as incurred including the cost of certain books of de minimis value that are sold in the bookstore at its Ranch location.

**Schedule A/B, Part 11, Questions 39, 41.** The Debtors do not separately track furniture from equipment. Therefore furniture, as applicable, is listed in response to Question 41 (equipment).

**Schedule A/B, Part 11, Questions 74-75.** The Debtors' failure to list any contingent and/or unliquidated Claim or Cause of Action held by the Debtors in response to this question shall not constitute a waiver, release, relinquishment, or forfeiture of such Claim or Cause of Action.

**Schedule D.** The Debtors may not have included on Schedule D all parties that may believe their Claims are secured through setoff rights, mechanic's liens, or other lien rights. Filings under the Uniform Commercial Code are reflected on Schedule D.

**Schedule E/F, Part 1.** The listing of any Claim on Schedule E/F does not constitute an admission by the Debtors that such Claim is entitled to priority treatment under section 507 of the Bankruptcy Code. The Debtors reserve their right to dispute the priority status of any Claim on any basis.

**Schedule E/F, Part 2.** In the ordinary course of business, the Debtors receive requests for refunds or return of overpayments. These refunds are not separately listed on the Debtors' schedules but are more fully described in the Motion of Debtors for Entry of an Order Authorizing the Debtors to (i) Maintain, Administer, and Modify Client Refund Programs and Practice, and (ii) Honor Obligations related thereto [Docket No. 82].

**Schedule E/F, Part 2.** The Debtors have used reasonable efforts to report all general unsecured Claims against the Debtors on Schedule E/F, based upon the Debtors' books and records as of the Petition Date.

Although reasonable efforts have been made to identify the date each Claim on Schedule E/F was incurred or arose, the Debtors cannot guarantee the information is entirely inclusive and inadvertent errors or omissions, as well as the discovery of conflicting, revised, or subsequent information, may arise which may uncover claims hereto unscheduled.

**Schedule G.** Although reasonable efforts have been made to ensure the accuracy of each contract or other agreement listed on Schedule G, inadvertent errors may have occurred. Certain

information, such as the contact information of the counterparty, may not be included where such information could not be obtained using the Debtors' reasonable efforts.

Listing a contract or agreement on Schedule G does not constitute an admission that such contract or agreement is an executory contract or unexpired lease that was in effect on the Petition Date or is valid or enforceable. The Debtors hereby reserve all of their rights to dispute the validity, status, or enforceability of any contracts, agreements, or leases set forth on Schedule G and to amend or supplement Schedule G as necessary. Certain of the contracts and leases listed on Schedule G may contain certain renewal options, guarantees of payment, indemnifications, options to purchase, rights of first refusal, and other miscellaneous rights. Such rights, powers, duties, and obligations are not set forth separately on Schedule G. Certain confidentiality and non-disclosure agreements may not be listed on Schedule G. The Debtors reserve all of their rights with respect to such agreements.

Certain of the contracts and other agreements listed on Schedule G may consist of several parts, including purchase orders, amendments, restatements, waivers, letters, and other documents that may not be listed on Schedule G or that may be listed as a single entry. In some cases, the same supplier or provider appears multiple times on Schedule G. This multiple listing may reflect distinct agreements between the applicable Debtor and such supplier or provider, or may reflect a series of related agreements.

The Debtors reserve all of their rights, Claims and Causes of Action with respect to the contracts and other agreements listed on Schedule G, including the right to dispute or challenge the characterization of any transaction or any document or instrument related to a creditor's Claim or its relationship with the Debtors.

Omission of a contract or other agreement from Schedule G does not constitute an admission that such omitted contract or agreement is not an executory contract or unexpired lease. The Debtors' rights under the Bankruptcy Code with respect to any such omitted agreements are not impaired by the omission. Schedule G may be amended at any time to add any omitted contract or other agreement.

The listing of any contract or other agreement on Schedule G does not constitute an admission by the Debtors as to the validity of such contract or agreement or that such agreement is an executory contract or unexpired lease. The Debtors reserve all of their rights to dispute the effectiveness of any such contract or agreement listed on Schedule G or to amend Schedule G at any time to remove any contract or agreement.

The Debtors enter into executory contracts with patients which contracts are not listed on Schedule G for protection of patient confidentiality. These contracts are typically short-term the Debtors expect that most of their pre-petition patient contracts have expired on their own terms.

**Schedule H.** In the ordinary course of their business, the Debtors may be involved in pending or threatened litigation or Claims. These matters may involve multiple plaintiffs, claimants, and defendants, some or all of whom may assert cross-Claims and counter-Claims against other parties, and some of which may be co-obligors with, contributors to, or indemnitors of, the Debtors. Because all such Claims are contingent, disputed, or unliquidated, such Claims have

not been set forth individually on Schedule H. Litigation matters can be found on each Debtor's Schedule A/B, Part 11 and Statement, Part 3, as applicable.

**Specific Disclosures with Respect to the Statements**

**Part 3, Question 7.** The Debtors have used reasonable efforts to report all legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the Debtors were involved in any capacity within one year before the Petition Date.

**Part 6, Question 11.** Payments made on behalf of all Debtors appear in response to Question 11 for EBH Holding Company, Inc.

**Part 12, Questions 22-24.** The Debtors have made best efforts to respond with respect to environmental notices, however, the Debtors do not separately track such notices and therefore responsive notices, in particular those older than 2 years prior to the petition date may have been inadvertently omitted.

**Part 13, Questions 28.** For purposes of this response, the Debtors have included shareholders holding interests in excess of 5%.

**Part 13, Questions 31.** Certain of the Debtors may have been part of a tax consolidation group prior to acquisition by the Debtors.

**Fill in this information to identify the case:**Debtor name EBH Services of Florida, Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of Delaware

Case number (If known): 18-11235 (BLS)☐ Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets****1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B* .....\$ 834,197.75**1b. Total personal property:**Copy line 91A from *Schedule A/B* .....\$ 1,110,927.15  
+ undetermined amounts**1c. Total of all property:**Copy line 92 from *Schedule A/B* .....\$ 1,945,124.90  
+ undetermined amounts**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D* .....\$ 182,191,287.00  
+ undetermined amounts**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F* .....\$ 0.00  
+ undetermined amounts**3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F* .....+ \$ 10,797,088.03  
+ undetermined amounts**4. Total liabilities** .....

Lines 2 + 3a + 3b

\$ 192,988,375.03  
+ undetermined amounts

**Fill in this information to identify the case:**Debtor name EBH Services of Florida, Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of Delaware

Case number (if known): 18-11235 (BLS)☐ Check if this is an amended filing

## Official Form 206A/B

**Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.  
☒ Yes. Fill in the information below.

**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****2. Cash on hand**

\$ 7,500.00

**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.1. See Attached Rider \_\_\_\_\_ \$ 1,694.45

3.2. \_\_\_\_\_ \$ \_\_\_\_\_

**4. Other cash equivalents (Identify all)**4.1. None \$ 0.00

4.2. \_\_\_\_\_ \$ \_\_\_\_\_

**5. Total of Part 1**

\$ 9,194.45

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☐ No. Go to Part 3.  
☒ Yes. Fill in the information below.

**Current value of debtor's interest****7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. See Attached Rider \$ 7,300.00

7.2. \_\_\_\_\_ \$ \_\_\_\_\_



Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
- ☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
23. Total of Part 5				\$ <u>0.00</u>

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

- ☐ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
_____	\$ _____	_____	\$ _____
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
_____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
_____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
_____	\$ _____	_____	\$ _____

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**33. Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ 0.00**34. Is the debtor a member of an agricultural cooperative?**☐ No☐ Yes. Is any of the debtor's property stored at the cooperative?☐ No☐ Yes**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**☐ No☐ Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_**36. Is a depreciation schedule available for any of the property listed in Part 6?**☐ No☐ Yes**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?**☐ No☐ Yes**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**☐ No. Go to Part 8.☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>39. Office furniture</b>			
Furniture	\$ 225,484.87	Net Book Value	\$ 225,484.87
<b>40. Office fixtures</b>			
None	\$		\$ 0.00
<b>41. Office equipment, including all computer equipment and communication systems equipment and software</b>			
See Attached Rider	\$ 57,323.24		\$ 57,323.24
<b>42. Collectibles</b> <i>Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles</i>			
42.1 None	\$		\$ 0.00
42.2	\$		\$
42.3	\$		\$

**43. Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ 282,808.11**44. Is a depreciation schedule available for any of the property listed in Part 7?**☐ No☒ Yes**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?**☒ No☐ Yes

Debtor **EBH Services of Florida, Inc.**  
Name

Case number (if known) 18-11235 (BLS)

**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>			
47.1 None	\$		\$ 0.00
47.2	\$		\$
47.3	\$		\$
47.4	\$		\$
<b>48. Watercraft, trailers, motors, and related accessories</b> Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 None	\$		\$ 0.00
48.2	\$		\$
<b>49. Aircraft and accessories</b>			
49.1 None	\$		\$ 0.00
49.2	\$		\$
<b>50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)</b>			
Medical Equipment	\$ 746.15	Net Book Value	\$ 746.15
<b>51. Total of Part 8.</b> Add lines 47 through 50. Copy the total to line 87.			\$ 746.15

**52. Is a depreciation schedule available for any of the property listed in Part 8?**

- ☐ No
- ☒ Yes

**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No
- ☐ Yes

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 9: Real property****54. Does the debtor own or lease any real property?**☐ No. Go to Part 10.☒ Yes. Fill in the information below.**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 Leasehold Improvements	Leasehold Improvements	\$ 834,197.75	Net book value	\$ 834,197.75
55.2		\$		\$
55.3		\$		\$
55.4		\$		\$
55.5		\$		\$
55.6		\$		\$

**56. Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$ 834,197.75

**57. Is a depreciation schedule available for any of the property listed in Part 9?**☐ No☒ Yes**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?**☒ No☐ Yes**Part 10: Intangibles and intellectual property****59. Does the debtor have any interests in intangibles or intellectual property?**☒ No. Go to Part 11.☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$		\$
61. Internet domain names and websites	\$		\$
62. Licenses, franchises, and royalties	\$		\$
63. Customer lists, mailing lists, or other compilations	\$		\$
64. Other intangibles, or intellectual property	\$		\$
65. Goodwill	\$		\$

**66. Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$ 0.00



Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$ <u>9,194.45</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$ <u>69,752.31</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$ <u>638,717.76</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	\$ <u>0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$ <u>0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$ <u>0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$ <u>282,808.11</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$ <u>746.15</u>	
88. Real property. <i>Copy line 56, Part 9.</i> . . . . . →		\$ <u>834,197.75</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$ <u>0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$ <u>109,708.37</u> + undetermined amounts	
91. Total. Add lines 80 through 90 for each column. . . . . 91a.	\$ <u>1,110,927.15</u> + undetermined amounts	+ 91b. \$ <u>834,197.75</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. . . . .		\$ <u>1,945,124.90</u> + undetermined amounts

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Assets - Real and Personal Property****Part 1, Question 3:** Checking, savings, money market, or financial brokerage accounts

Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number	Current value of debtor's interest
COMERICA INCORPORATED	General Checking	6525	\$14.00
WELLS FARGO & COMPANY	General Checking	4346	\$0.00
WELLS FARGO & COMPANY	General Checking	1166	\$1,680.45
		<b>TOTAL</b>	<b>\$1,694.45</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Assets - Real and Personal Property****Part 2, Question 7:** Deposits, including security deposits and utility deposits

Description	Name of holder of deposit	Current value of debtor's interest
Utility Deposit	Florida Public Utilities	\$500.00
Security Deposit -Property	Pinebrook South LTD-Halajo, LLC	\$6,800.00
	<b>TOTAL</b>	<b>\$7,300.00</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Assets - Real and Personal Property****Part 2, Question 8:** Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description	Name of holder of prepayment	Current value of debtor's interest
License Renewal	Agency For Health Care Admin	\$10,587.94
Alarm System	Tyco Integrated Security LLC	\$168.34
Annual Agreement	Florida Lifts, LLC	\$1,913.72
Contract Labor	Driftwood Recovery SVCS	\$1,277.42
Prepaid Rent	Pinebrook South LTD	\$14,425.66
Flood Insurance	American Banker	\$818.60
Property Insurance	Pinebrook South LTD	\$22,687.55
Property Insurance	Pinebrook South LTD	\$2,780.08
Flood Insurance	American Banker	\$7,793.00
	<b>TOTAL</b>	<b>\$62,452.31</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Assets - Real and Personal Property****Part 7, Question 41:** Office equipment, including all computer equipment and communication systems equipment and software

General description	Basis	Depreciation	Net book value of debtor's interest	Valuation method used for current value	Current value of debtor's interest
Computer Equipment	\$3,995.85	\$1,077.77	\$2,918.08	Net Book Value	\$2,918.08
Software	\$20,000.00	\$5,394.30	\$14,605.70	Net Book Value	\$14,605.70
Equipment	\$179,862.85	\$140,063.39	\$39,799.46	Net Book Value	\$39,799.46
				TOTAL	\$57,323.24

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Assets - Real and Personal Property****Part 11, Question 72:** Tax refunds and unused net operating losses (NOLs)

Description	Tax year	Current value of debtor's interest
Florida state NOL to offset income taxes in future years (estimated at \$1,349,682.00)	2013	Undetermined
Florida state NOL to offset income taxes in future years (estimated at \$3,369,885.00)	2014	Undetermined
Florida state NOL to offset income taxes in future years (estimated at \$1,622,463.00)	2015	Undetermined
Florida state NOL to offset income taxes in future years (estimated at \$2,565,655.00)	2016	Undetermined
Florida state NOL to offset income taxes in future years (estimated at \$1,041,812.12)	2017	Undetermined
	<b>TOTAL</b>	<b>\$0.00</b> <b>+ undetermined amounts</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Assets - Real and Personal Property****Part 11, Question 73:** Interests in insurance policies or annuities

Description	Policy type	Policy number	Current value of debtor's interest
Arch Insurance Group	CA Blanked Accident Policy	11SPR8169606	Undetermined
Philadelphia Indemnity Insurance Policy	General Liability Policy	PHPK1757926	Undetermined
Philadelphia Indemnity Insurance Policy	Automotive Policy	PHPK1757926	Undetermined
Philadelphia Indemnity Insurance Policy	Professional Liability Policy	PHPK1757926	Undetermined
Philadelphia Indemnity Insurance Policy	Umbrella Liability Policy	PHUB613051	Undetermined
Lexington Insurance Company	Property Policy	012116759	Undetermined
Hiscox Insurance Company	Terrorism and Sabotage Policy	UTS2534852.17	Undetermined
Berkshire Hathaway Homestate Ins Co	Workers Compensation Policy	EBWC807623	Undetermined
Berkshire Hathaway Homestate Ins Co	Workers Compensation Policy	EBWC807785	Undetermined
Colony Insurance Co	Excess Property Policy	XP264594	Undetermined
Capitol Specialty Insurance Corporation	Excess Liability \$10M xs \$5M Policy	HS20152220-03	Undetermined
Arch Insurance Group	Excess Liability \$5M xs \$5M Policy	UFE0059346-02	Undetermined
Underwriters at Lloyd's, London	Cyber Liability Policy	501633	Undetermined
National Union Fire Insurance Company of Pittsburgh, PA	Primary Directors & Officers Policy	04-989-56-14	Undetermined
Westchester Fire Insurance Company	Excess Directors & Officers Policy	G27552109 003	Undetermined
Argonaut Insurance Company	Excess Directors & Officers Policy	MLX 7601250-02	Undetermined
Endurance Risk Solutions Assurance Co.	Excess Directors & Officers Policy	DOX10008401601	Undetermined
National Union Fire Insurance Company of Pittsburgh, PA	Employment Practices Liability Policy	04-989-56-14	Undetermined
National Union Fire Insurance Company of Pittsburgh, PA	Fiduciary Liability Policy	04-989-56-14	Undetermined
National Union Fire Insurance Company of Pittsburgh, PA	Crime Coverage Policy	04-989-56-14	Undetermined
Federal Insurance Company	Employed Lawyers Professional Policy	8225-8418	Undetermined
Ohio Bureau of Workers Compensation	Workers Compensation Policy		Undetermined
Washington Dept of Labor & Industries	Workers Compensation Policy		Undetermined
Philadelphia Indemnity Insurance Co	Flood Policy	87053768152017	Undetermined
Philadelphia Indemnity Insurance Co	Flood Policy	87053768172017	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	75057705292016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	75057705272016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	75057705282016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	60102414932016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	60102414972016	Undetermined

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Assets - Real and Personal Property****Part 11, Question 73:** Interests in insurance policies or annuities

Description	Policy type	Policy number	Current value of debtor's interest
American Bankers Insurance CO of Florida	Flood Policy	60102414922016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	60102414802016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	60102414712016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	60102414582016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	60102392642016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	60102392612016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	60102392482016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	60102414352016	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	99057470762017	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	99057470782017	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	99057470772017	Undetermined
American Bankers Insurance CO of Florida	Flood Policy	75057672182017	Undetermined
		<b>TOTAL</b>	<b>\$0.00</b> <b>+ undetermined amounts</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Assets - Real and Personal Property****Part 11, Question 77:** Other property of any kind not already listed

Description	Current value of debtor's interest
Intercompany Receivable - TRS Behavioral Care, Inc.	\$10,000.00
Intercompany Receivable - Southeast Behavioral Health Services, Inc.	\$7,308.00
Intercompany Receivable - Outpatient Services FL, Inc.	\$92,400.37
<b>TOTAL</b>	<b>\$109,708.37</b>

**Fill in this information to identify the case:**

Debtor name EBH Services of Florida, Inc.  
 United States Bankruptcy Court for the: \_\_\_\_\_ District of Delaware  
 Case number (if known): 18-11235 (BLS)

☐ Check if this is an amended filing

**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.**

**Column A**  
**Amount of claim**  
 Do not deduct the value of collateral.

**Column B**  
**Value of collateral that supports this claim**

<b>2.1 Creditor's name</b> CITIBANK, N.A. AS AGENT  <b>Creditor's mailing address</b> 390 GREENWICH ST 7TH FL NEW YORK, NY 10013  <b>Creditor's email address, if known</b>  <b>Date debt was incurred</b> 06/06/2014 <b>Last 4 digits of account number</b> <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority. See Schedule D disclosures.	<b>Describe debtor's property that is subject to a lien</b> As described in UCC File Number 20142217636. See Schedule D disclosures.  <b>Describe the lien</b> All Assets and Proceeds. See Schedule disclosures.  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ <u>Undetermined</u> \$ <u>Undetermined</u>
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<b>2.2 Creditor's name</b> CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT  <b>Creditor's mailing address</b> 225 W. WASHINGTON ST. STE 2100 CHICAGO, IL 60606  <b>Creditor's email address, if known</b>  <b>Date debt was incurred</b> Undetermined <b>Last 4 digits of account number</b> <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input checked="" type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. See Schedule D Disclosures.  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines ____ See Schedule D Disclosures.	<b>Describe debtor's property that is subject to a lien</b> See Schedule D Disclosures.  <b>Describe the lien</b> Guarantor - Second Lien Credit Agreement. See Schedule D Disclosures.  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H).  <b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$ <u>47,512,247.00</u> \$ <u>Undetermined</u>
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**3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.**

\$ 182,191,287.00  
 + undetermined amounts

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 1: Additional Page**Column A  
Amount of claim  
Do not deduct the  
value of collateralColumn B  
Value of collateral  
that supports this  
claim

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.3	<b>Creditor's name</b> PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT  <b>Creditor's mailing address</b> 2 LANDMARK SQUARE, SUITE 207 STAMFORD, CT 06901  <b>Creditor's email address, if known</b>  <b>Date debt was incurred</b> 05/11/2018 <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input checked="" type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. See Schedule D disclosures.  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines	<b>Describe debtor's property that is subject to a lien</b> As described in UCC File Number 2018 3231194. See Schedule D disclosures.  <b>Describe the lien</b> All Assets and Proceeds. See Schedule disclosures.  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition date, the claim is:</b> Check all that apply. <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$ Undetermined	\$ Undetermined
2.4	<b>Creditor's name</b> PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT  <b>Creditor's mailing address</b> 2 LANDMARK SQUARE, SUITE 207 STAMFORD, CT 06901  <b>Creditor's email address, if known</b>  <b>Date debt was incurred</b> Undetermined <b>Last 4 digits of account number</b>  <b>Do multiple creditors have an interest in the same property?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority?  <input checked="" type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. See Schedule D Disclosures.  <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines See Schedule D Disclosures.	<b>Describe debtor's property that is subject to a lien</b> See Schedule D Disclosures.  <b>Describe the lien</b> Guarantor - First Lien Credit Agreement. See Schedule D Disclosures.  <b>Is the creditor an insider or related party?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes  <b>Is anyone else liable on this claim?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  <b>As of the petition date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$134,679,040.00	\$ Undetermined

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no other need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1  
did you enter the  
related creditor?Last 4 digits of  
account number  
for this entity

**Fill in this information to identify the case:**

Debtor EBH Services of Florida, Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of Delaware

Case number 18-11235 (BLS)  
(If known)

☐ Check if this is an amended filing

**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
<b>2.1</b>	<b>Priority creditor's name and mailing address</b> BOARD OF COUNTY COMMISSIONER PALM BEACH COUNTY FINANCE DEPT PO BOX 3977 WEST PALM BEACH, FL 33402  <b>Date or dates debt was incurred</b> Undetermined  <b>Last 4 digits of account number</b> _____  <b>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8 _____)</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Contingent Tax Liability  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Undetermined \$ Undetermined

<b>2.2</b>	<b>Priority creditor's name and mailing address</b> COUNTY OF PALM BEACH ANNE M GANNON-CONSTITUTIONAL TAX COLLECTOR PO BOX 3353 WEST PALM BEACH, FL 33402-3353  <b>Date or dates debt was incurred</b> Undetermined  <b>Last 4 digits of account number</b> _____  <b>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8 _____)</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Contingent Tax Liability  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Undetermined \$ Undetermined
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<b>2.3</b>	<b>Priority creditor's name and mailing address</b> DELAWARE SECRETARY OF STATE DIVISION OF CORPORATIONS PO BOX 898 DOVER, DE 19903  <b>Date or dates debt was incurred</b> Undetermined  <b>Last 4 digits of account number</b> _____  <b>Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8 _____)</b>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> Contingent Tax Liability  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ Undetermined \$ Undetermined
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Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 1. Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

**Total claim****Priority amount****2.4** Priority creditor's name and mailing address\$ Undetermined\$ UndeterminedFLORIDA DEPARTMENT OF REVENUE  
OUT OF STATE COLLECTIONS UNIT  
1401 W US HIGHWAY 90, STE 100  
STE. 100, FL 32055-6123As of the petition filing date, the claim is:  
Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☐ Disputed

Date or dates debt was incurred  
UndeterminedBasis for the claim:  
Contingent Tax Liability

Last 4 digits of account number

Is the claim subject to offset?

Specify code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

**2.5** Priority creditor's name and mailing address\$ Undetermined\$ UndeterminedFLORIDA DEPARTMENT OF STATE, DIVISION OF  
CORPORATIONS  
CLIFTON BUILDING  
2661 EXECUTIVE CENTER CIRCLE  
TALLAHASSEE, FL 32301As of the petition filing date, the claim is:  
Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☐ Disputed

Date or dates debt was incurred  
UndeterminedBasis for the claim:  
Contingent Tax Liability

Last 4 digits of account number

Is the claim subject to offset?

Specify code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

**2.6** Priority creditor's name and mailing address\$ Undetermined\$ UndeterminedFLORIDA DEPT OF REVENUE  
5050 W TENNESSEE STREET  
TALLAHASSEE, FL 32999-0135As of the petition filing date, the claim is:  
Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☐ Disputed

Date or dates debt was incurred  
UndeterminedBasis for the claim:  
Contingent Tax Liability

Last 4 digits of account number

Is the claim subject to offset?

Specify code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

**2.7** Priority creditor's name and mailing address\$ Undetermined\$ UndeterminedTAX COLL, PALM BEACH COUNTY  
PO BOX 3828  
WEST PALM BEACH, FL 33402As of the petition filing date, the claim is:  
Check all that apply.

- ☒ Contingent  
☒ Unliquidated  
☐ Disputed

Date or dates debt was incurred  
UndeterminedBasis for the claim:  
Contingent Tax Liability

Last 4 digits of account number

Is the claim subject to offset?

Specify code subsection of PRIORITY unsecured  
claim: 11 U.S.C. § 507(a) (8)

- ☒ No  
☐ Yes

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 1. Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

**Total claim****Priority amount**2.8 **Priority creditor's name and mailing address** \$ Undetermined \$ UndeterminedTAX COLL., PALM BEACH COUNTY  
PO BOX 3353  
WEST PALM BEACH, FL 33402**As of the petition filing date, the claim is:**  
*Check all that apply.*

- ☒ Contingent  
☒ Unliquidated  
☐ Disputed

**Date or dates debt was incurred**  
Undetermined**Basis for the claim:**  
Contingent Tax Liability**Last 4 digits of account number****Is the claim subject to offset?**

- ☒ No  
☐ Yes

**Specify code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (8)2.9 **Priority creditor's name and mailing address** \$ Undetermined \$ UndeterminedTOWN OF LANTANA-BUSINESS TAX RENEWAL  
4215 S MILITARY TRAIL  
LAKE FOREST, FL 33463**As of the petition filing date, the claim is:**  
*Check all that apply.*

- ☒ Contingent  
☒ Unliquidated  
☐ Disputed

**Date or dates debt was incurred**  
Undetermined**Basis for the claim:**  
Contingent Tax Liability**Last 4 digits of account number****Is the claim subject to offset?**

- ☒ No  
☐ Yes

**Specify code subsection of PRIORITY unsecured claim:** 11 U.S.C. § 507(a) (8)

Debtor EBH Services of Florida, Inc.  
Name

Case number (if known) 18-11235 (BLS)

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
<b>3.1</b>	<b>Nonpriority creditor's name and mailing address</b> A1A CHEM DRY INC 905 N RAILROAD AVE #2 BOYNTON BEACH, FL 33435  Date or dates debt was incurred <u>Undetermined</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor Payable</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>1,803.00</u>
<b>3.2</b>	<b>Nonpriority creditor's name and mailing address</b> ACCELERATED BUSINESS SOLUTIONS 2991 CENTER PORT CIRCLE POMPANO BEACH, FL 33064  Date or dates debt was incurred <u>Undetermined</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor Payable</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>3,109.26</u>
<b>3.3</b>	<b>Nonpriority creditor's name and mailing address</b> AIRMOVERS AIR CONDITIONING INC PO BOX 3575 BOYNTON BEACH, FL 33424  Date or dates debt was incurred <u>Undetermined</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor Payable</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>1,335.00</u>
<b>3.4</b>	<b>Nonpriority creditor's name and mailing address</b> AMERICAN BANKERS INSURANCE CO OF FL PO BOX 731178 DALLAS, TX 75373-1178  Date or dates debt was incurred <u>Undetermined</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor Payable</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>7,793.00</u>
<b>3.5</b>	<b>Nonpriority creditor's name and mailing address</b> APPIA COMMUNICATIONS, INC 1030 HASTINGS, STE. 100 TRAVERSE CITY, MI 49686-3470  Date or dates debt was incurred <u>Undetermined</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor Payable</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>3,654.47</u>
<b>3.6</b>	<b>Nonpriority creditor's name and mailing address</b> ART AFFECTS LLC 140 CARAVELLE DR JUPITER, FL 33458  Date or dates debt was incurred <u>Undetermined</u> Last 4 digits of account number <u>      </u>	<b>As of the petition filing date, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>Vendor Payable</u>  <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes
		\$ <u>1,800.00</u>

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 2: Additional Page**Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.  
If no additional NONPRIORITY creditors exist, do not fill out or submit this page.**Amount of claim**

3.7	<b>Nonpriority creditor's name and mailing address</b>	<b>\$355,163.79</b>
	<p>ASSURANCE TOXICOLOGY SERVICES, LLC 933 N NAKOMA SUITE 120 SAN ANTONIO, TX 78216</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Intercompany Payable - Assurance Toxicology Services, LLC</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>
3.8	<b>Nonpriority creditor's name and mailing address</b>	<b>\$742.14</b>
	<p>ATLANTIC POOL &amp; SPA SVCS INC ATLANTIC POOL MAINTENANCE PO BOX 3727 LANTANA, FL 33462</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.9	<b>Nonpriority creditor's name and mailing address</b>	<b>\$235.40</b>
	<p>BEACH ENVIRONMENTAL PO BOX 10672 RIVIERA BEACH, FL 33419</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.10	<b>Nonpriority creditor's name and mailing address</b>	<b>\$2,123.95</b>
	<p>BEIRA FOOD ENTERPRISES INC EXECUTIVE ONE CATERING 10814 CANYON BAY LANE BOYNTON BEACH, FL 33473</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.11	<b>Nonpriority creditor's name and mailing address</b>	<b>\$306.82</b>
	<p>C2R GLOBAL MANUFACTURING INC 701 BLACKHAWK DR UNIT A BURLINGTON, WI 53105</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 2: Additional Page**Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.  
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3.12	<b>Nonpriority creditor's name and mailing address</b>	<b>\$4,025.00</b>
	<p>CABRERA, HAYDEE A LMHC PA 8571 WINNIPESAUKEE WAY LAKE WORTH, FL 33467</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Subcontractor Liability</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.13	<b>Nonpriority creditor's name and mailing address</b>	<b>\$4,130.47</b>
	<p>CANON FINANCIAL SERVICES, INC 14904 COLLECTIONS CENTER DR CHICAGO, IL 60693-0149</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.14	<b>Nonpriority creditor's name and mailing address</b>	<b>\$2,265.00</b>
	<p>CAR SERVICE OF SOUTH FLORIDA INC 1966 SHARON STREET BOCA RATON, FL 33486</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.15	<b>Nonpriority creditor's name and mailing address</b>	<b>\$15,289.49</b>
	<p>CENTURY CLINICAL LAB 1395 SHOTGUN ROAD SUNRISE, FL 33326</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.16	<b>Nonpriority creditor's name and mailing address</b>	<b>\$364.08</b>
	<p>CHEVRON &amp; TEXACO BUSINESS CARD SVCS PO BOX 70887 CHARLOTTE, NC 28272</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 2: Additional Page**Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.  
If no additional NONPRIORITY creditors exist, do not fill out or submit this page.**Amount of claim**

3.17	<b>Nonpriority creditor's name and mailing address</b>	<b>\$904.54</b>
	<p>CLIENT 2018-648108 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Refund</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.18	<b>Nonpriority creditor's name and mailing address</b>	<b>\$8,820.00</b>
	<p>CLIENT 2018-648223 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Refund</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.19	<b>Nonpriority creditor's name and mailing address</b>	<b>\$264.60</b>
	<p>CLIENT 2018-648453 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Refund</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.20	<b>Nonpriority creditor's name and mailing address</b>	<b>\$1,799.59</b>
	<p>CLIENT 2018-648474 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Refund</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.21	<b>Nonpriority creditor's name and mailing address</b>	<b>\$3,205.97</b>
	<p>CLIENT 2018-648574 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Refund</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 2: Additional Page**

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**Amount of claim**

3.22	<b>Nonpriority creditor's name and mailing address</b>	<b>\$904.54</b>
	<p>CLIENT 2018-648640 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Refund</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.23	<b>Nonpriority creditor's name and mailing address</b>	<b>\$29.40</b>
	<p>CLIENT 2018-648679 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Refund</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.24	<b>Nonpriority creditor's name and mailing address</b>	<b>\$500.00</b>
	<p>CLIENT 2018-648695 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Refund</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.25	<b>Nonpriority creditor's name and mailing address</b>	<b>\$390.00</b>
	<p>CLIENT 2018-648722 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Refund</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.26	<b>Nonpriority creditor's name and mailing address</b>	<b>\$ Undetermined</b>
	<p>CLIENT 2018-652146 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Contingent Liability</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

Debtor EBH Services of Florida, Inc.  
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**Amount of claim**

3.27	<b>Nonpriority creditor's name and mailing address</b>	<b>\$ Undetermined</b>
	<p>CLIENT 2018-652147 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Contingent Liability</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.28	<b>Nonpriority creditor's name and mailing address</b>	<b>\$ Undetermined</b>
	<p>CLIENT 2018-652761 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Contingent Liability</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.29	<b>Nonpriority creditor's name and mailing address</b>	<b>\$ Undetermined</b>
	<p>CLIENT 2018-652773 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Contingent Liability</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.30	<b>Nonpriority creditor's name and mailing address</b>	<b>\$ Undetermined</b>
	<p>CLIENT 2018-652787 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Contingent Liability</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.31	<b>Nonpriority creditor's name and mailing address</b>	<b>\$ Undetermined</b>
	<p>CLIENT 2018-652935 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Contingent Liability</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

Debtor EBH Services of Florida, Inc.  
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**Amount of claim**

3.32	<b>Nonpriority creditor's name and mailing address</b>	<b>\$ Undetermined</b>
	<p>CLIENT 2018-652936 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Contingent Liability</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.33	<b>Nonpriority creditor's name and mailing address</b>	<b>\$ Undetermined</b>
	<p>CLIENT 2018-652937 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Contingent Liability</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.34	<b>Nonpriority creditor's name and mailing address</b>	<b>\$ Undetermined</b>
	<p>CLIENT 2018-652938 ADDRESS ON FILE</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Contingent Liability</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.35	<b>Nonpriority creditor's name and mailing address</b>	<b>\$13,867.63</b>
	<p>COUNTY OF PALM BEACH TAX COLLECTOR, PALM BEACH COUNTY ANNE M GANNON-CONSTITUTIONAL TAX COLLECTOR PO BOX 3353 WEST PALM BEACH, FL 33402-3353</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	
3.36	<b>Nonpriority creditor's name and mailing address</b>	<b>\$16,441.25</b>
	<p>DORAN, WENDY E MD PA 396 SANDALWOOD LANE BOCA RATON, FL 33487</p> <p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Subcontractor Liability</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>	

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 2: Additional Page**

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**Amount of claim**

3.37	<b>Nonpriority creditor's name and mailing address</b>	<b>\$3,562.50</b>
	<p>DRIFTWOOD RECOVERY SERVICES 7148 DAMITA DR LAKE WORTH, FL 33463</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Subcontractor Liability</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.38	<b>Nonpriority creditor's name and mailing address</b>	<b>\$844,378.16</b>
	<p>EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Intercompany Payable - EBH Acquisition Subsidiary, Inc.</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>
3.39	<b>Nonpriority creditor's name and mailing address</b>	<b>\$9,110,708.11</b>
	<p>ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Intercompany Payable - Elements Behavioral Health, Inc.</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>
3.40	<b>Nonpriority creditor's name and mailing address</b>	<b>\$6,695.39</b>
	<p>EXCELLENT CARE HOME CARE INC 1495 FOREST HILL BLVD STE A2 WEST PALM BEACH, FL 33406</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Subcontractor Liability</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.41	<b>Nonpriority creditor's name and mailing address</b>	<b>\$3,103.77</b>
	<p>FARMER &amp; IRWIN CORP 3300 AVENUE K RIVERIA BEACH, FL 33404</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor EBH Services of Florida, Inc.  
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3.42	<b>Nonpriority creditor's name and mailing address</b>	<b>\$107.76</b>
	<p>FEDEX PO BOX 7221 PASADENA, CA 91109-7321</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.43	<b>Nonpriority creditor's name and mailing address</b>	<b>\$2,550.00</b>
	<p>FERGUSON, CAMERON 5930 NE 22ND AVE FT LAUDERDALE, FL 33308</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Subcontractor Liability</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.44	<b>Nonpriority creditor's name and mailing address</b>	<b>\$270.00</b>
	<p>FLORIDA LIFTS LLC PO BOX 740708 BOYNTON BEACH, FL 33474</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.45	<b>Nonpriority creditor's name and mailing address</b>	<b>\$726.65</b>
	<p>FLORIDA PUBLIC UTILITIES PO BOX 2057 SALISBURY, MD 21802-2057</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.46	<b>Nonpriority creditor's name and mailing address</b>	<b>\$ Undetermined</b>
	<p>FORMAN, CHARLENE 1829 NORTH A ST APT 2 LAKE WORTH, FL 33460</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Workers' Compensation</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 2: Additional Page**

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**Amount of claim**

3.47	<b>Nonpriority creditor's name and mailing address</b>	<b>\$184.66</b>
	<p>GRAINGER DEPT. 886483088 PO BOX 419267 KANSAS CITY, MO 64141-6267</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.48	<b>Nonpriority creditor's name and mailing address</b>	<b>\$510.86</b>
	<p>GUARDIAN PO BOX 677458 DALLAS, TX 75267</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.49	<b>Nonpriority creditor's name and mailing address</b>	<b>\$915.00</b>
	<p>JESSICA ROBERTSON LLC 1820 NEW PALM WAY #207 BOYNTOWN BEACH, FL 33435</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Subcontractor Liability</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.50	<b>Nonpriority creditor's name and mailing address</b>	<b>\$5,810.00</b>
	<p>KIPU SYSTEMS LLC 444 BRICKELL AVE SUITE 850 MIAMI, FL 33131</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.51	<b>Nonpriority creditor's name and mailing address</b>	<b>\$1,822.90</b>
	<p>LANTANA ACE HARDWARE 1212 LANTANA ROAD LANTANA, FL 33462</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor EBH Services of Florida, Inc.  
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3.52	<b>Nonpriority creditor's name and mailing address</b>	<b>\$4,868.50</b>
	<p>LOMBARDO, MONICA 111 YACHT CLUB WAY APT 307 HYPOLUXO, FL 33462</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Subcontractor Liability</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.53	<b>Nonpriority creditor's name and mailing address</b>	<b>\$2,600.00</b>
	<p>LUPYS CLEANING INC 201 NW 53 COURT FT LAUDERDALE, FL 33309</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.54	<b>Nonpriority creditor's name and mailing address</b>	<b>\$110.00</b>
	<p>MEDSAFE WASTE LLC 204 LOUISE AVE SUITE A HENDERSONVILLE, TN 37075</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.55	<b>Nonpriority creditor's name and mailing address</b>	<b>\$1,140.00</b>
	<p>PSYCHODRAMA INSTITUTE OF S FL 2645 N FEDERAL HIGHWAY SUITE 210 DELRAY BEACH, FL 33483</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.56	<b>Nonpriority creditor's name and mailing address</b>	<b>\$747.46</b>
	<p>RCB ELECTRIC COMPANY INC 1865 SW 4TH AVE D-5-2 DELRAY BEACH, FL 33444</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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NameCase number (if known) 18-11235 (BLS)**Part 2: Additional Page**

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**Amount of claim**

3.57	<b>Nonpriority creditor's name and mailing address</b>	<b>\$145.25</b>
	<p>READY REFRESH BY NESTLE PO BOX 856680 LOUISVILLE, KY 40285-6680</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.58	<b>Nonpriority creditor's name and mailing address</b>	<b>\$296.53</b>
	<p>REPUBLIC SERVICES PO BOX 9001099 LOUISVILLE, KY 40290</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.59	<b>Nonpriority creditor's name and mailing address</b>	<b>\$2,613.23</b>
	<p>RUTHERFORD'S LAWN AND LANDSCAPE INC 1003 WEST DREW ST LANTANA, FL 33462</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.60	<b>Nonpriority creditor's name and mailing address</b>	<b>\$207.16</b>
	<p>SCHEIN, HENRY PO BOX 371952 PITTSBURGH, PA 15250</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.61	<b>Nonpriority creditor's name and mailing address</b>	<b>\$961.11</b>
	<p>SHRED-IT USA LLC 28883 NETWORK PLACE CHICAGO, IL 60673</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b></p> <p><input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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3.62	<b>Nonpriority creditor's name and mailing address</b>	<b>\$650.00</b>
	<p>SOBER ESCORTS INC 1187 SE 65TH CIRCLE OCALA, FL 34472</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.63	<b>Nonpriority creditor's name and mailing address</b>	<b>\$6,071.34</b>
	<p>STAPLES ADVANTAGE DEPT LA PO BOX 83689 CHICAGO, IL 60696-3689</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.64	<b>Nonpriority creditor's name and mailing address</b>	<b>\$316.10</b>
	<p>TAX COLLECTOR, PALM BEACH COUNTY (PBC) PO BOX 3828 WEST PALM BEACH, FL 33402</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.65	<b>Nonpriority creditor's name and mailing address</b>	<b>\$179,452.23</b>
	<p>THE RANCH ON THE PINEY RIVER, INC. 6107 PINWOOD ROAD NUNNELLY, TN 37137</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Intercompany Payable - The Ranch on the Piney River, Inc.</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>
3.66	<b>Nonpriority creditor's name and mailing address</b>	<b>\$500.00</b>
	<p>TRETOLA, TROY 3809 S OLIVE AVE WEST PALM BEACH, FL 33405</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Subcontractor Liability</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>

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3.67	<b>Nonpriority creditor's name and mailing address</b>	<b>\$1,739.41</b>
	<p>TYCO INTEGRATED SECURITY LLC PO BOX 371967 PITTSBURGH, PA 15250-7967</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.68	<b>Nonpriority creditor's name and mailing address</b>	<b>\$9,355.91</b>
	<p>US FOODS INC PO BOX 281838 ATLANTA, GA 30384</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.69	<b>Nonpriority creditor's name and mailing address</b>	<b>\$143,303.86</b>
	<p>WESTSIDE SOBER LIVING CENTERS, INC. 20725 ROCKCROFT DRIVE MALIBU, CA 90265</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Intercompany Payable - Westside Sober Living Centers, Inc.</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>
3.70	<b>Nonpriority creditor's name and mailing address</b>	<b>\$1,320.38</b>
	<p>WILSON-ROWAN LOCKSMITH CO 1304 CLARE AVENUE WEST PALM BEACH, FL 33401</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.71	<b>Nonpriority creditor's name and mailing address</b>	<b>\$5,246.91</b>
	<p>WINDSTREAM PO BOX 9001950 LOUISVILLE, KY 40290</p> <p><b>Date or dates debt was incurred</b> Undetermined</p> <p><b>Last 4 digits of account number</b></p>	<p><b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p><b>Basis for the claim:</b> Vendor Payable</p> <p><b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes</p>

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.  
If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

**Amount of claim**

3.72 Nonpriority creditor's name and mailing address \$203.50

WRIGHTSVILLE SERVICES, LLC  
1166 HILTS ROAD  
WRIGHTSVILLE, PA 17368

As of the petition filing date, the claim is:  
*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Intercompany Payable - Wrightsville Services, LLC

Date or dates debt was incurred Undetermined

Is the claim subject to offset?

- ☐ No  
☒ Yes

Last 4 digits of account number

3.73 Nonpriority creditor's name and mailing address \$2,625.00

YOUNGS, PATRICIA  
PATH TO HEALING LLC  
2200 N FEDERAL HIGHWAY #219  
BOCA RATON, FL 33496

As of the petition filing date, the claim is:  
*Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: Subcontractor Liability

Date or dates debt was incurred Undetermined

Is the claim subject to offset?

- ☐ No  
☐ Yes

Last 4 digits of account number

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
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Debtor

EBH Services of Florida, Inc.  
Name

Case number (if known) 18-11235 (BLS)

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

**Total of claim amounts**

5a. Total claims from Part 1

5a. \$ 0.00  
+ undetermined amounts

5b. Total claims from Part 2

5b. + \$ 10,797,088.03  
+ undetermined amounts

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

5c. \$ 10,797,088.03  
+ undetermined amounts

**Fill in this information to identify the case:**Debtor name EBH Services of Florida, Inc.United States Bankruptcy Court for the: \_\_\_\_\_ District of DelawareCase number (if known): 18-11235 (BLS) Chapter 11☐ Check if this is an amended filing

## Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

**1. Does the debtor have any executory contracts or unexpired leases?**☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1	State what the contract or lease is for and the nature of the debtor's interest	Sales Order Agreement Dated 10/01/2013	ACCELERATED BUSINESS SOLUTIONS 2991 CENTER PORT CIRCLE POMPANO BEACH, FL 33065
	State the term remaining List the contract number of any government contract	Undetermined	
2.2	State what the contract or lease is for and the nature of the debtor's interest	Participating Provider Agreement Dated 08/01/2015	APCN 2831 ST. ROSE PARKWAY SUITE 200-309 HENDERSON, NV 89052
	State the term remaining List the contract number of any government contract	Undetermined	
2.3	State what the contract or lease is for and the nature of the debtor's interest	Service Agreement	APPIA COMMUNICATIONS, INC. ATTN: VICTOR VON SCHLEGEL, PRESIDENT 1030 HASTINGS ST., SUITE 2100 TRAVERSE CITY, MI 49686
	State the term remaining List the contract number of any government contract	Undetermined	
2.4	State what the contract or lease is for and the nature of the debtor's interest	Independent Contractor Services Agreement	ART AFFECTS, LLC 140 CARAVELLE DR. JUPITER, FL 33458
	State the term remaining List the contract number of any government contract	Undetermined	
2.5	State what the contract or lease is for and the nature of the debtor's interest	Independent Contractor Services Agreement Dated 03/22/2018	BAEZ, DAISY CONSULTING MANAGEMENT SOLUTIONS, INC. P.O. BOX 145255 CORAL GABLES, FL 33114
	State the term remaining List the contract number of any government contract	Undetermined	

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.6	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Independent Contractor Services Agreement Dated 05/20/2014</p>	BROOKS, LARRY PHD 3810 HOLLYWOOD BLVD SUITE 2 HOLLYWOOD, FL 33021
	<p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	
2.7	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Independent Contractor Services Agreement Dated 04/30/2018</p>	CABRERA, HAYDEE 8571 WINNIPESAUKEE WAY LAKE WORTH, FL 33467
	<p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	
2.8	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Canon Faxable Lease Agreement Dated 10/15/2013</p>	CANON FINACIAL SERVICES, INC. 14904 COLLECTION CENTER DR. CHICAGO, IL 60693
	<p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	
2.9	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Facility Agreement Dated 11/16/2017</p>	CAROLINA BEHAVIORAL HEALTH 2150 COUNTRY CLUB RD #210 WINSTON-SALEM, NC 27104
	<p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	
2.10	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Facility Participation Agreement Dated 12/28/2017</p>	CENTPATICO/SUNSHINE ATTN: NETWORK CORRESPONDENCE 12515-8 RESEARCH BLVD. SUITE 400 AUSTIN, TX 78759
	<p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	
2.11	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Service Agreement</p>	CHEVRON & TEXACO BUSINESS CARDS PO BOX 70887 CHARLOTTE, NC 28272-0887
	<p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	
2.12	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Service Agreement</p>	COMCAST BUSINESS CLASS VP/ENTERPRISES SALES ONE COMCAST CENTER 1701 JFK BLVD. PHILADELPHIA, PA 19103
	<p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.13	State what the contract or lease is for and the nature of the debtor's interest	Independent Contractor Services Agreement Dated 10/01/2017	DORAN, WENDY 7698 W COUNTRY CLUB BOULEVARD BOCA RATON, FL 33487
	State the term remaining List the contract number of any government contract	Undetermined	
2.14	State what the contract or lease is for and the nature of the debtor's interest	Supplemental Staffing Agreement Dated 03/01/2018	EXPICARE NURSING AGENCY, INC. 7200 S. FEDERAL HIGHWAY HYPOLUXO, FL 33462
	State the term remaining List the contract number of any government contract	Undetermined	
2.15	State what the contract or lease is for and the nature of the debtor's interest	Supplemental Staffing Agreement entered into as of March 1, 2018	EXPICARE NURSING AGENCY, INC. 7200 S. FEDERAL HIGHWAY LANTANA, FL 33462
	State the term remaining List the contract number of any government contract	Undetermined	
2.16	State what the contract or lease is for and the nature of the debtor's interest	Independent Contractor Services Agreement Dated 06/26/2014	GOFFMAN, PAMELA 2220 S. OCEAN BOULEVARD, APT 602 DELRAY BEACH, FL 33483
	State the term remaining List the contract number of any government contract	Undetermined	
2.17	State what the contract or lease is for and the nature of the debtor's interest	Pharmaceutical Products and Services Agreement	GUARDINA PHARMACY SE FLORIDA, LLC 354 S.W. 12TH AVENUE BUILDING 7 DEERFIELD BEACH, FL 33442
	State the term remaining List the contract number of any government contract	Undetermined	
2.18	State what the contract or lease is for and the nature of the debtor's interest	Lease Agreement	HALAJO LLC-RONALD Y. SCHRAM
	State the term remaining List the contract number of any government contract	Undetermined	
2.19	State what the contract or lease is for and the nature of the debtor's interest	Lease Agreement	HALAJO LLC-RONALD Y. SCHRAM
	State the term remaining List the contract number of any government contract	Undetermined	

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.20	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Participation Agreement Dated 05/01/2014</p> <p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	JIPA
2.21	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Software Agreement</p> <p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	KIPU SYSTEMS LLC ATTN: LEGAL DEPARTMENT 444 BRICKELL AVE SUITE 850 MIAMI, FL 33131
2.22	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Services Agreement</p> <p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	KIPU SYSTEMS 44 BRICKELL AVENUE SUITE 850 MIAMI, FL 33131
2.23	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Lease Agreement</p> <p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	LAS OLAS INTERIORS LLC 850 NE 3RD STREET, STE 114 DANIA, FL 33004
2.24	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Independent Contractor Services Agreement Dated 04/13/2017</p> <p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	LOMBARDO, MONICA 111 YACHT CLUB WAY #307 HYPOLUXO, FL 33462
2.25	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Facility Participation Agreement Dated 09/14/2017</p> <p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	MAGELLAN MAGELLAN HEALTH SERVICES OF CA, INC., ATTN: CEO 3131 CAMNIO DEL RIO NORTH SUITE 400 SAN DIEGO, CA 92108-5701
2.26	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>Supplemental Staffing Agreement Dated 09/17/2016</p> <p>State the term remaining</p> <p>Undetermined</p> <p>List the contract number of any government contract</p>	MEDWORKFORCES AKA EXCELLENT CARE HOME CARE 1495 FOREST HILLS BLVD, SUITE A WEST PALM BEACH, FL 33406

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

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**List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.27	<b>State what the contract or lease is for and the nature of the debtor's interest</b> Supplemental Staffing Service Agreement for Long Term Care Facilities entered into as of September 14, 2016	MEDWORKFORCES AKA EXCELLENT CARE HOME CARE 1495 FOREST HILLS BLVD. SUITE A WEST PALM BEACH, FL 33406
	<b>State the term remaining</b> Undetermined <b>List the contract number of any government contract</b>	
2.28	<b>State what the contract or lease is for and the nature of the debtor's interest</b> Facility Agreement Dated 12/01/2017	MULTIPLAN/PHCS ATTN: MARK TABAK PRESIDENT AND CEO 115 FIFTH AVENUE NEW YORK, NY 10003-1004
	<b>State the term remaining</b> Undetermined <b>List the contract number of any government contract</b>	
2.29	<b>State what the contract or lease is for and the nature of the debtor's interest</b> Service Agreement	NETWORKX PO BOX 9444 FT LAUDERDALE, FL 33310
	<b>State the term remaining</b> Undetermined <b>List the contract number of any government contract</b>	
2.30	<b>State what the contract or lease is for and the nature of the debtor's interest</b> Repricing Agreement Dated 04/09/2015	PHX
	<b>State the term remaining</b> Undetermined <b>List the contract number of any government contract</b>	
2.31	<b>State what the contract or lease is for and the nature of the debtor's interest</b> Order Form Dated 01/11/2014	PITNEY BOWES GLOBAL FINANCIAL SERVICES LLC PO BOX 371887 PITTSBURGH, PA 15250-7887
	<b>State the term remaining</b> Undetermined <b>List the contract number of any government contract</b>	
2.32	<b>State what the contract or lease is for and the nature of the debtor's interest</b> Letter of Agreement Dated 04/26/2015	PMCS
	<b>State the term remaining</b> Undetermined <b>List the contract number of any government contract</b>	
2.33	<b>State what the contract or lease is for and the nature of the debtor's interest</b> Independent Contractor Services Agreement	ROBERTO, TIM DRIFTWOOD RECOVERY SERVICES, LLC 7148 DAMITA DRIVE LAKE WORTH, FL 33463
	<b>State the term remaining</b> Undetermined <b>List the contract number of any government contract</b>	

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases			State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.34	State what the contract or lease is for and the nature of the debtor's interest	Independent Contractor Services Agreement	ROBERTSON, JESSICA JESSICA ROBERTSON LLC 1820 NEW PALM WAY #207 BOYNTOWN BEACH, FL 33435
	State the term remaining List the contract number of any government contract	Undetermined	
2.35	State what the contract or lease is for and the nature of the debtor's interest	Independent Contractor Services Agreement	THE PATH TO HEALING LLC 2200 N. FEDERAL HIGHWAY SUITE 219 BOCA RATON, FL 33431
	State the term remaining List the contract number of any government contract	Undetermined	
2.36	State what the contract or lease is for and the nature of the debtor's interest	Independent Contractor Services Agreement Dated 01/25/2018	TRETOLA, TROY 3809 S. OLIVE AVENUE WEST PALM BEACH, FL 33405
	State the term remaining List the contract number of any government contract	Undetermined	
2.37	State what the contract or lease is for and the nature of the debtor's interest	Provider Agreement Dated 04/01/2015	TRPN ATTN: ROBERT MALONE, PRESIDENT CEO 910 HALE PLACE SUITE 101 CHULA VISTA, CA 91914
	State the term remaining List the contract number of any government contract	Undetermined	
2.38	State what the contract or lease is for and the nature of the debtor's interest	Provider Agreement Dated 06/01/2017	TRPN ATTN: ROBERT MALONE, PRESIDENT CEO 910 HALE PLACE SUITE 101 CHULA VISTA, CA 91914
	State the term remaining List the contract number of any government contract	Undetermined	
2.39	State what the contract or lease is for and the nature of the debtor's interest	Independent Contractor Services Agreement Dated 02/26/2018	UNITED CLINICAL LABORATORY 2257 VISTA PARKWAY, SUITE 2 WEST PALM BEACH, FL 33411
	State the term remaining List the contract number of any government contract	Undetermined	
2.40	State what the contract or lease is for and the nature of the debtor's interest	Service Agreement	WINDSTREAM PO BOX 9001950 LOUISVILLE, KY 40290
	State the term remaining List the contract number of any government contract	Undetermined	

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

**List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.41	<b>State what the contract or lease is for and the nature of the debtor's interest</b> Independent Contractor Services Agreement Dated 03/20/2017	YOUNGS, PATRICIA 2200 N. FEDERAL HIGHWAY, SUITE 219 BOCA RATON, FL 33431
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	<b>State the term remaining</b> Undetermined <b>List the contract number of any government contract</b>	
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2.42	<b>State what the contract or lease is for and the nature of the debtor's interest</b> Independent Contractor Services Agreement Dated 10/06/2014	ZEBEL, LESLIE 7401 SOUTH OLIVE AVENUE WEST PALM BEACH, FL 33405
------	--	---

	<b>State the term remaining</b> Undetermined <b>List the contract number of any government contract</b>	
--	---	--

**Fill in this information to identify the case:**Debtor name EBH Services of Florida, Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of Delaware

Case number (If known): 18-11235 (BLS)☐ Check if this is an amended filing**Official Form 206H****Schedule H: Codebtors****12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Does the debtor have any codebtors?**

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1 Assurance Toxicology Services, LLC	933 N Nakoma Suite 120 San Antonio, 78216	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 EBH Acquisition Subsidiary, Inc.	3100 E Commercial Blvd Suite 100 Fort Lauderdale, 33308	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 EBH Big Rock, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 EBH Holding Company, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5 EBH Northeast Services, Inc.	544 Iron Ridge Road Hanover, 17331	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6 EBH Southwest Services, Inc.	8072 S. Highland Drive Salt Lake City, 84121	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Codebtors****Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.7 Spirit Lodge, LLC	840 County Road 420 Spicewood, 78669	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.8 The Ranch on the Piney River, Inc.	6107 Pinewood Road Nunnally, 37137	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.9 The Sexual Recovery Institute, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.10 TRS Behavioral Care, Inc.	440 Fischer Store Road Wimberley, TX 78676	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.11 Westside Sober Living Centers, Inc.	20725 Rockcroft Drive Malibu, 90265	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.12 Wrightsville Services, LLC	1166 Hilts Road Wrightsville, 17368	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.13 PROMAL4, Inc.	20729 Rockcroft Drive Malibu, 90265	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.14 Promises Residential Treatment Center VI, Inc.	20713 Rockcroft Drive Malibu, 90265	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.15 San Cristobal Treatment Center, LLC	176 Camino del Medio San Cristobal, 87564	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.16 SBAR2, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.17 SoCal Rehab and Recovery, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Codebtors****Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.18 Southeast Behavioral Health Services, Inc.	3949 Highway 43 North Brandon, 39047	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.19 Intensive Outpatient Services PA, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.20 NE Sober Living, Inc.	6143 Mill Road Egg Harbor Township, 08234	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.21 Northeast Behavioral Services, Inc.	421 Bethel Road Somers Point, 08244	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.22 Outpatient Services FL, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.23 Outpatient Services TN, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.24 PROMAL2, Inc.	20723 Rockcroft Drive Malibu, 90265	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.25 Ehrman Subsidiary Corp.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.26 Elements Behavioral Health, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.27 Elements Medical Group of Arizona, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.28 Elements Medical Group of Mississippi, Inc.	3949 Highway 43 North Brandon, 39047	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Codebtors****Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.29 Elements Medical Group of Utah, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.30 Elements Screening Services, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	CORTLAND CAPITAL MARKET SERVICES LLC AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.31 Assurance Toxicology Services, LLC	933 N Nakoma Suite 120 San Antonio, 78216	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.32 EBH Acquisition Subsidiary, Inc.	3100 E Commercial Blvd Suite 100 Fort Lauderdale, 33308	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.33 EBH Big Rock, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.34 EBH Holding Company, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.35 EBH Northeast Services, Inc.	544 Iron Ridge Road Hanover, 17331	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.36 EBH Southwest Services, Inc.	8072 S. Highland Drive Salt Lake City, 84121	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.37 Spirit Lodge, LLC	840 County Road 420 Spicewood, 78669	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.38 The Ranch on the Piney River, Inc.	6107 Pinewood Road Nunnely, 37137	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.39 The Sexual Recovery Institute, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Codebtors****Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.40 TRS Behavioral Care, Inc.	440 Fischer Store Road Wimberley, TX 78676	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.41 Westside Sober Living Centers, Inc.	20725 Rockcroft Drive Malibu, 90265	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.42 Wrightsville Services, LLC	1166 Hillts Road Wrightsville, 17368	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.43 PROMAL4, Inc.	20729 Rockcroft Drive Malibu, 90265	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.44 Promises Residential Treatment Center VI, Inc.	20713 Rockcroft Drive Malibu, 90265	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.45 San Cristobal Treatment Center, LLC	176 Camino del Medio San Cristobal, 87564	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.46 SBAR2, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.47 SoCal Rehab and Recovery, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.48 Southeast Behavioral Health Services, Inc.	3949 Highway 43 North Brandon, 39047	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.49 Intensive Outpatient Services PA, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.50 NE Sober Living, Inc.	6143 Mill Road Egg Harbor Township, 08234	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Additional Page if Debtor Has More Codebtors****Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.**

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.51 Northeast Behavioral Services, Inc.	421 Bethel Road Somers Point, 08244	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.52 Outpatient Services FL, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.53 Outpatient Services TN, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.54 PROMAL2, Inc.	20723 Rockcroft Drive Malibu, 90265	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.55 Ehrman Subsidiary Corp.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.56 Elements Behavioral Health, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.57 Elements Medical Group of Arizona, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.58 Elements Medical Group of Mississippi, Inc.	3949 Highway 43 North Brandon, 39047	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.59 Elements Medical Group of Utah, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.60 Elements Screening Services, Inc.	5000 Airport Plaza Drive Suite 100 Long Beach, 90815	PROJECT BUILD BEHAVIORAL HEALTH, LLC, AS AGENT	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

**Fill in this information to identify the case and this filing:**Debtor Name EBH Services of Florida, Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of Delaware

Case number (if known): 18-11235 (BLS)**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

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

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

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

Executed on 06/24/2018  
MM / DD / YYYY

**X**/s/ Martin McGahan

Signature of individual signing on behalf of debtor

Martin McGahan  
Printed name

Chief Restructuring Officer  
Position or relationship to debtor

**Fill in this information to identify the case:**Debtor name EBH Services of Florida, Inc.

United States Bankruptcy Court for the: \_\_\_\_\_ District of Delaware

Case number (if known): 18-11235 (BLS)☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy 04/16**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that applyGross revenue  
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**From 01/01/2018 to Filing date  
MM / DD / YYYY☒ Operating a business  
☐ Other \_\_\_\_\_\$ 2,074,497.00**For prior year:**From 01/01/2017 to 12/31/2017  
MM / DD / YYYY☒ Operating a business  
☐ Other \_\_\_\_\_\$ 5,236,898.00**For the year before that:**From 01/01/2016 to 12/31/2016  
MM / DD / YYYY☒ Operating a business  
☐ Other \_\_\_\_\_\$ 4,505,283.00**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Description of sources of revenue

Gross revenue from each source  
(before deductions and exclusions)**From the beginning of the fiscal year to filing date:**From \_\_\_\_\_ to Filing date  
MM / DD / YYYY

\$ \_\_\_\_\_

**For prior year:**From \_\_\_\_\_ to \_\_\_\_\_  
MM / DD / YYYY

\$ \_\_\_\_\_

**For the year before that:**From \_\_\_\_\_ to \_\_\_\_\_  
MM / DD / YYYY

\$ \_\_\_\_\_

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See Attached Rider Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. See Attached Rider Insider's name _____ Street _____ City _____ State _____ ZIP Code _____  Relationship to debtor _____	_____	\$ _____	_____
4.2. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____  Relationship to debtor _____	_____	\$ _____	_____

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

	Creditor's name and address	Description of the property	Date	Value of property
5.1.	Creditor's name Street City State ZIP Code			\$
5.2.	Creditor's name Street City State ZIP Code			\$

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name Street City State ZIP Code			\$
Last 4 digits of account number: XXXX- _ _ _ _			

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None

	Case title	Nature of case	Court or agency's name and address	Status of case
7.1.	Case number		Name Street City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2.	Case number		Name Street City State ZIP Code	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Custodian's name and address	Description of the property	Value
Custodian's name		\$
Street	Case title	Court name and address
City State ZIP Code	Case number	Name
		Street
	Date of order or assignment	City State ZIP Code

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1. Recipient's name			\$
Street			
City State ZIP Code			
Recipient's relationship to debtor			
9.2. Recipient's name			\$
Street			
City State ZIP Code			
Recipient's relationship to debtor			

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).	Date of loss	Value of property lost
			\$

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1. See response to Statements question 11 for Elements Behavioral Health, Inc.			
Address			\$
Street			
City State ZIP Code			
Email or website address			
Who made the payment, if not debtor?			

Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.			
Address			\$
Street			
City State ZIP Code			
Email or website address			
Who made the payment, if not debtor?			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.  
Do not include transfers already listed on this statement.

☒ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
			\$
Trustee			

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1. _____	_____	_____	\$ _____
<b>Address</b>			
Street _____			
City _____ State _____ ZIP Code _____			
<b>Relationship to debtor</b>			
_____			
13.2. _____	_____	_____	\$ _____
<b>Address</b>			
Street _____			
City _____ State _____ ZIP Code _____			
<b>Relationship to debtor</b>			
_____			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Address	Dates of occupancy
14.1. _____	From _____ To _____
Street _____	
City _____ State _____ ZIP Code _____	
14.2. _____	From _____ To _____
Street _____	
City _____ State _____ ZIP Code _____	

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or  
— providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.  
☒ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.1. See Attached Rider

Facility name

Street

City

State

ZIP Code

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- ☐ Electronically  
☐ Paper

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

15.2.

Facility name

Street

City

State

ZIP Code

Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.

How are records kept?

Check all that apply:

- ☐ Electronically  
☐ Paper

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No. Patient Names, Addresses, Birth Dates, Phone Numbers, Social Security Numbers, Payment Information, Medical and Treatment Records  
☒ Yes. State the nature of the information collected and retained.

Does the debtor have a privacy policy about that information?

- ☐ No  
☒ Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☐ No. Go to Part 10.  
Yes. Does the debtor serve as plan administrator?

- ☒ No. Go to Part 10.  
☐ Yes. Fill in below:

Name of plan

Employer identification number of the plan

EIN: \_\_\_\_\_

Has the plan been terminated?

- ☐ No  
☐ Yes

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☐ None

	Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1.	See Attached Rider Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-____-____-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2.	_____ Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-____-____-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____ Address _____ _____ _____	_____ _____ _____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____ Address _____ _____ _____	_____ _____ _____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name			\$
Street			
City State ZIP Code			

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

☒ No

☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name		<input type="checkbox"/> Pending
	Street		<input type="checkbox"/> On appeal
	City State ZIP Code		<input type="checkbox"/> Concluded

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

☒ No

☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	_____
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1.	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	EIN: _____ Dates business existed _____ From _____ To _____
25.2.	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	EIN: _____ Dates business existed _____ From _____ To _____
25.3.	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	EIN: _____ Dates business existed _____ From _____ To _____

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address

Dates of service

26a.1. See Attached Rider

From \_\_\_\_\_ To \_\_\_\_\_

Name and address

Dates of service

26a.2.

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address

Dates of service

26b.1. BDO SEIDMAN, LLP  
PO BOX 31001-0860  
PASADENA, CA 91110-0860

From 2008 To Present

Name and address

Dates of service

26b.2.

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address

If any books of account and records are  
unavailable, explain why

26c.1. See Attached Rider

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Name and address****If any books of account and records are unavailable, explain why**

26c.2.

Name

Street

City

State

ZIP Code

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None
**Name and address**

26d.1.

See Attached Rider

**Name and address**

26d.2.

Name

Street

City

State

ZIP Code

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No

☐ Yes. Give the details about the two most recent inventories.
**Name of the person who supervised the taking of the inventory****Date of inventory****The dollar amount and basis (cost, market, or other basis) of each inventory**

\$ \_\_\_\_\_

**Name and address of the person who has possession of inventory records**

27.1.

Name

Street

City

State

ZIP Code

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)

Name of the person who supervised the taking of the inventory

Date of  
inventoryThe dollar amount and basis (cost, market, or  
other basis) of each inventory

\$ \_\_\_\_\_

Name and address of the person who has possession of inventory records

27.2.

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name

Address

Position and nature of any  
interest

% of interest, if any

See Attached Rider

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☐ No☒ Yes. Identify below.

Name

Address

Position and nature of  
any interestPeriod during which  
position or interest was  
held

See Attached Rider

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No☒ Yes. Identify below.

Name and address of recipient

Amount of money or  
description and value of  
property

Dates

Reason for  
providing the value

30.1. See Attached Rider

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

Relationship to debtor \_\_\_\_\_

Debtor EBH Services of Florida, Inc.  
NameCase number (if known) 18-11235 (BLS)**Name and address of recipient**

30.2

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**Relationship to debtor**

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☐ No☒ Yes. Identify below.**Name of the parent corporation****Employer identification number of the parent corporation**EBH Holding Company, Inc.EIN: 90-0770370

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No☐ Yes. Identify below.**Name of the pension fund****Employer identification number of the pension fund**

EIN: \_\_\_\_\_ - \_\_\_\_\_

**Part 14: Signature and Declaration**

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

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

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

Executed on 06/24/2018  
MM / DD / YYYY

**X**/s/ Martin McGahanPrinted name Martin McGahan

Signature of individual signing on behalf of the debtor

Position or relationship to debtor Chief Restructuring Officer**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?**☐ No☒ Yes

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 3:** Certain payments or transfers to creditors within 90 days before filing this case

Creditor Name & Address	Check or Wire Number	Payment Date	Reason For Payment	Amount Paid
AIRMOVERS AIR CONDITIONING INC PO BOX 3575 BOYNTON BEACH, FL 33424	005490	03/28/2018	Services	\$430.00
<b>SUBTOTAL</b>				<b>\$430.00</b>
APPIA COMMUNICATIONS, INC 1030 HASTINGS, STE. 100 TRAVERSE CITY, MI 49686-3470	005441	02/28/2018	Services	\$1,830.27
	005491	03/28/2018	Services	\$1,830.33
<b>SUBTOTAL</b>				<b>\$3,660.60</b>
ART AFFECTS LLC 140 CARAVELLE DR JUPITER, FL 33458	005442	02/28/2018	Services	\$1,200.00
	005458	03/08/2018	Services	\$300.00
	005492	03/28/2018	Services	\$1,200.00
	005517	04/05/2018	Services	\$300.00
	005544	04/19/2018	Services	\$300.00
	005563	04/26/2018	Services	\$300.00
	005581	05/03/2018	Services	\$300.00
<b>SUBTOTAL</b>				<b>\$3,900.00</b>
ATLANTIC POOL & SPA SVCS INC PO BOX 3727 LANTANA, FL 33462	005493	03/28/2018	Services	\$602.22
	005582	05/03/2018	Services	\$1,369.60
<b>SUBTOTAL</b>				<b>\$1,971.82</b>
BEACH ENVIRONMENTAL PO BOX 10672 RIVIERA BEACH, FL 33419	005443	02/28/2018	Services	\$941.60
	005459	03/08/2018	Services	\$941.60
	005546	04/19/2018	Services	\$941.60
<b>SUBTOTAL</b>				<b>\$2,824.80</b>
BURGLAR ALARM TECHNICIANS, INC 4826 N.E. 10TH AVE FT LAUDERDALE, FL 33334	005545	04/19/2018	Services	\$144.45
<b>SUBTOTAL</b>				<b>\$144.45</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 3:** Certain payments or transfers to creditors within 90 days before filing this case

Creditor Name & Address	Check or Wire Number	Payment Date	Reason For Payment	Amount Paid
CABRERA, HAYDEE A 8571 WINNIPESAUKEE WAY LAKE WORTH, FL 33467	005500	03/28/2018	Services	\$7,200.00
	005525	04/05/2018	Services	\$23,200.00
	005539	04/12/2018	Services	\$1,175.00
	005554	04/19/2018	Services	\$1,575.00
	005573	04/26/2018	Services	\$5,650.00
	005593	05/03/2018	Services	\$1,450.00
	005617	05/10/2018	Services	\$4,800.00
<b>SUBTOTAL</b>				<b>\$45,050.00</b>
CERTIFIED COFFEE SERVICE INC PO BOX 23805 FORT LAUDERDALE, FL 33307	005460	03/08/2018	Suppliers or vendors	\$773.00
<b>SUBTOTAL</b>				<b>\$773.00</b>
CHEVRON & TEXACO BUSINESS CARD SVCS PO BOX 70887 CHARLOTTE, NC 28272	005494	03/28/2018	Suppliers or vendors	\$221.03
	005583	05/03/2018	Suppliers or vendors	\$336.17
<b>SUBTOTAL</b>				<b>\$557.20</b>
CLIENT 2018-649104 ADDRESS ON FILE	CCREFUND-20180327	03/27/2018	Other - Refund	\$2,000.00
<b>SUBTOTAL</b>				<b>\$2,000.00</b>
CLIENT 2018-649113 ADDRESS ON FILE	CCREFUND-20180514	05/14/2018	Other - Refund	\$500.00
<b>SUBTOTAL</b>				<b>\$500.00</b>
CLIENT 2018-649215 ADDRESS ON FILE	005474	03/15/2018	Other - Refund	\$500.00
<b>SUBTOTAL</b>				<b>\$500.00</b>
CLIENT 2018-649224 ADDRESS ON FILE	WIRE20180312	03/12/2018	Other - Refund	\$14,954.00
<b>SUBTOTAL</b>				<b>\$14,954.00</b>
CLIENT 2018-649442 ADDRESS ON FILE	005440	02/28/2018	Other - Refund	\$24,500.00
<b>SUBTOTAL</b>				<b>\$24,500.00</b>
CLIENT 2018-649800 ADDRESS ON FILE	005477	03/21/2018	Other - Refund	\$10,235.56
<b>SUBTOTAL</b>				<b>\$10,235.56</b>
CLIENT 2018-649850 ADDRESS ON FILE	005476	03/21/2018	Other - Refund	\$13,707.00
<b>SUBTOTAL</b>				<b>\$13,707.00</b>
COMCAST PO BOX 530098 ATLANTA, GA 30353-0098	005444	02/28/2018	Services	\$209.60

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 3:** Certain payments or transfers to creditors within 90 days before filing this case

Creditor Name & Address	Check or Wire Number	Payment Date	Reason For Payment	Amount Paid
COMCAST PO BOX 530098 ATLANTA, GA 30353-0098	005478	03/21/2018	Services	\$729.64
	005495	03/28/2018	Services	\$858.40
	005516	03/30/2018	Services	\$17,173.08
	005518	04/05/2018	Services	\$11,343.36
	005547	04/19/2018	Services	\$160.90
	005565	04/26/2018	Services	\$193.92
	005584	05/03/2018	Services	\$15,196.23
<b>SUBTOTAL</b>				<b>\$45,865.13</b>
CONSULTING MANAGEMENT SOLUTIONS INC PO BOX 145255 CORAL GABLES, FL 33114	005496	03/28/2018	Services	\$835.50
	005566	04/26/2018	Services	\$4,863.00
	005585	05/03/2018	Services	\$2,328.71
<b>SUBTOTAL</b>				<b>\$8,027.21</b>
DELAWARE SECRETARY OF STATE DIVISION OF CORPORATIONS PO BOX 898 DOVER, DE 19903	WIRE20180302	03/02/2018	Other - Governmental	\$225.00
<b>SUBTOTAL</b>				<b>\$225.00</b>
DORAN, WENDY ELLEN 7698 W COUNTRY CLUB BLVD BOCA RATON, FL 33487	005445	02/28/2018	Services	\$2,887.50
	005461	03/08/2018	Services	\$12,477.50
	005479	03/21/2018	Services	\$2,966.25
	005497	03/28/2018	Services	\$3,473.75
	005548	04/19/2018	Services	\$2,913.75
	005567	04/26/2018	Services	\$2,975.00
	005586	05/03/2018	Services	\$3,150.00
	005610	05/10/2018	Services	\$4,025.00
<b>SUBTOTAL</b>				<b>\$34,868.75</b>
DRIFTWOOD RECOVERY SVCS 7148 DAMITA DR LAKE WORTH, FL 33463	005446	02/28/2018	Services	\$2,850.00
	005462	03/08/2018	Services	\$487.50
	005480	03/21/2018	Services	\$1,237.50
	005498	03/28/2018	Services	\$2,850.00
	005519	04/05/2018	Services	\$393.75
	005549	04/19/2018	Services	\$393.75
	005568	04/26/2018	Services	\$393.75
	005587	05/03/2018	Services	\$600.00
<b>SUBTOTAL</b>				<b>\$9,206.25</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 3:** Certain payments or transfers to creditors within 90 days before filing this case

Creditor Name & Address	Check or Wire Number	Payment Date	Reason For Payment	Amount Paid
EXCELLENT CARE HOME CARE INC 1495 FOREST HILL BLVD STE A2 WEST PALM BEACH, FL 33406	005447	02/28/2018	Services	\$1,638.51
	005463	03/08/2018	Services	\$1,392.02
	005588	05/03/2018	Services	\$4,056.39
<b>SUBTOTAL</b>				<b>\$7,086.92</b>
FEDEX PO BOX 7221 PASADENA, CA 91109-7321	005481	03/21/2018	Services	\$14.57
	005520	04/05/2018	Services	\$9.76
	005537	04/12/2018	Services	\$143.26
	005605	05/03/2018	Services	\$286.74
<b>SUBTOTAL</b>				<b>\$454.33</b>
FERGUSON, CAMERON 5930 NE 22ND AVE FT LAUDERDALE, FL 33308	005521	04/05/2018	Services	\$9,500.00
	005570	04/26/2018	Services	\$2,500.00
	005590	05/03/2018	Services	\$2,850.00
<b>SUBTOTAL</b>				<b>\$14,850.00</b>
FLORIDA LIFTS LLC PO BOX 740708 BOYNTON BEACH, FL 33474	005448	02/28/2018	Services	\$3,150.00
	005571	04/26/2018	Services	\$1,057.50
<b>SUBTOTAL</b>				<b>\$4,207.50</b>
FLORIDA POWER & LIGHT FPL GENERAL MAIL FACILITY MIAMI, FL 33188-0001	005464	03/08/2018	Other - Utilities	\$67,698.40
	005523	04/05/2018	Other - Utilities	\$49,790.80
	005615	05/10/2018	Other - Utilities	\$73,456.53
<b>SUBTOTAL</b>				<b>\$190,945.73</b>
FLORIDA PUBLIC UTILITIES PO BOX 2057 SALISBURY, MD 21802-2057	005473	03/15/2018	Other - Utilities	\$7,226.19
	005522	04/05/2018	Other - Utilities	\$765.00
	005552	04/19/2018	Other - Utilities	\$8,882.64
	005613	05/10/2018	Other - Utilities	\$57.00
<b>SUBTOTAL</b>				<b>\$16,930.83</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 3:** Certain payments or transfers to creditors within 90 days before filing this case

Creditor Name & Address	Check or Wire Number	Payment Date	Reason For Payment	Amount Paid
GODBY SAFE & LOCK 1048 HYPOLUXO ROAD LANTANA, FL 33462	005499	03/28/2018	Services	\$165.00
	005538	04/12/2018	Services	\$120.00
	005553	04/19/2018	Services	\$195.00
	005572	04/26/2018	Services	\$203.30
	005591	05/03/2018	Services	\$110.00
<b>SUBTOTAL</b>				<b>\$793.30</b>
GRAINGER DEPT. 886483088 PO BOX 419267 KANSAS CITY, MO 64141-6267	005449	02/28/2018	Suppliers or vendors	\$607.36
	005592	05/03/2018	Suppliers or vendors	\$115.37
<b>SUBTOTAL</b>				<b>\$722.73</b>
GUARDIAN PO BOX 677458 DALLAS, TX 75267	005488	03/22/2018	Other - Employee-related	\$869.76
	005524	04/05/2018	Other - Employee-related	\$1,023.34
	005616	05/10/2018	Other - Employee-related	\$698.38
<b>SUBTOTAL</b>				<b>\$2,591.48</b>
JESSICA ROBERTSON LLC 1820 NEW PALM WAY #207 BOYNTOWN BEACH, FL 33435	005450	02/28/2018	Services	\$11,120.00
	005465	03/08/2018	Services	\$3,420.00
	005482	03/21/2018	Services	\$2,280.00
	005501	03/28/2018	Services	\$1,335.00
	005526	04/05/2018	Services	\$540.00
	005540	04/12/2018	Services	\$540.00
	005555	04/19/2018	Services	\$700.00
	005574	04/26/2018	Services	\$175.00
	005595	05/03/2018	Services	\$175.00
	005619	05/10/2018	Services	\$175.00
<b>SUBTOTAL</b>				<b>\$20,460.00</b>
JFB CONSTRUCTION & DEVELOPMENT INC 555 HYPOLUXO RD SUITE B LANTANA, FL 33462	005556	04/19/2018	Services	\$840.00
<b>SUBTOTAL</b>				<b>\$840.00</b>
KRAFT, BONNIE 333 PELICAN WAY DELRAY BEACH, FL 33483	005466	03/08/2018	Other - Employee-related	\$95.28
	005502	03/28/2018	Other - Employee-related	\$68.97
<b>SUBTOTAL</b>				<b>\$164.25</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 3:** Certain payments or transfers to creditors within 90 days before filing this case

Creditor Name & Address	Check or Wire Number	Payment Date	Reason For Payment	Amount Paid
LANTANA ACE HARDWARE 1212 LANTANA ROAD LANTANA, FL 33462	005503	03/28/2018	Suppliers or vendors	\$2,242.65
	005528	04/05/2018	Suppliers or vendors	\$29.94
	005558	04/19/2018	Suppliers or vendors	\$577.71
<b>SUBTOTAL</b>				\$2,850.30
LOMBARDO, MONICA 111 YACHT CLUB WAY APT 307 HYPOLUXO, FL 33462	005451	02/28/2018	Services	\$6,297.90
	005467	03/08/2018	Services	\$5,966.10
	005483	03/21/2018	Services	\$1,166.20
	005504	03/28/2018	Services	\$3,126.20
	005529	04/05/2018	Services	\$1,400.00
	005541	04/12/2018	Services	\$1,382.50
	005576	04/26/2018	Services	\$4,690.00
	005597	05/03/2018	Services	\$787.50
	005621	05/10/2018	Services	\$1,032.50
<b>SUBTOTAL</b>				\$25,848.90
LUPYS CLEANING INC 201 NW 53 COURT FT LAUDERDALE, FL 33309	005530	04/05/2018	Services	\$2,600.00
<b>SUBTOTAL</b>				\$2,600.00
MEDSAFE WASTE LLC 204 LOUISE AVE SUITE A HENDERSONVILLE, TN 37075	005468	03/08/2018	Services	\$55.00
	005506	03/28/2018	Services	\$55.00
<b>SUBTOTAL</b>				\$110.00
MEDWORKFORCES LLC 1495 FOREST HILL BLVD STE A WEST PALM BEACH, FL 33406-6073	005469	03/08/2018	Services	\$1,650.00
<b>SUBTOTAL</b>				\$1,650.00
MILLER, ROBIN 700 CRESTWOOD CT SOUTH UNIT 711 ROYAL PALM BEACH, FL 33411	005455	03/05/2018	Other - Employee-related	\$918.68
<b>SUBTOTAL</b>				\$918.68
MISKIEWICZ, BETH ANN 622 SOUTH ROAD BOYNTON BEACH, FL 33435	005533	04/05/2018	Other - Employee-related	\$507.32
	005630	05/17/2018	Other - Employee-related	\$117.81
<b>SUBTOTAL</b>				\$625.13

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 3:** Certain payments or transfers to creditors within 90 days before filing this case

Creditor Name & Address	Check or Wire Number	Payment Date	Reason For Payment	Amount Paid
PAINTERS OF BOYNTON BEACH INC 6586 HYPOLUXO RD #287 LAKE WORTH, FL 33467	005598	05/03/2018	Services	\$1,556.00
<b>SUBTOTAL</b>				<b>\$1,556.00</b>
PINEBROOK SOUTH LTD 1420 N OCEAN BLVD PALM BEACH, FL 33480	005439	02/26/2018	Other - Rent	\$48,856.01
	005489	03/28/2018	Other - Rent	\$97,712.02
	005579	04/30/2018	Other - Rent	\$99,376.72
<b>SUBTOTAL</b>				<b>\$245,944.75</b>
RANDAL LYONS 6231 WINDLASS CIRCLE BOYNTON BEACH, FL 33472	005452	02/28/2018	Services	\$700.00
	005505	03/28/2018	Services	\$1,400.00
	005531	04/05/2018	Services	\$700.00
<b>SUBTOTAL</b>				<b>\$2,800.00</b>
RCB ELECTRIC COMPANY INC 1865 SW 4TH AVE D-5-2 DELRAY BEACH, FL 33444	005507	03/28/2018	Services	\$106.00
<b>SUBTOTAL</b>				<b>\$106.00</b>
READY REFRESH BY NESTLE PO BOX 856680 LOUISVILLE, KY 40285-6680	005508	03/28/2018	Suppliers or vendors	\$445.20
	005599	05/03/2018	Suppliers or vendors	\$108.32
<b>SUBTOTAL</b>				<b>\$553.52</b>
REPUBLIC SERVICES PO BOX 9001099 LOUISVILLE, KY 40290	005509	03/28/2018	Services	\$165.89
	005559	04/19/2018	Services	\$1,282.65
<b>SUBTOTAL</b>				<b>\$1,448.54</b>
RUTHERFORD'S LAWN AND LANDSCAPE INC 1003 WEST DREW ST LANTANA, FL 33462	005510	03/28/2018	Services	\$860.00
<b>SUBTOTAL</b>				<b>\$860.00</b>
SCHEIN, HENRY PO BOX 371952 PITTSBURGH, PA 15250	005594	05/03/2018	Suppliers or vendors	\$240.14
<b>SUBTOTAL</b>				<b>\$240.14</b>
SOBER TRANSITIONS INC PO BOX 741893 BOYNTON BEACH, FL 33474-1893	005534	04/05/2018	Services	\$280.00
<b>SUBTOTAL</b>				<b>\$280.00</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 3:** Certain payments or transfers to creditors within 90 days before filing this case

Creditor Name & Address	Check or Wire Number	Payment Date	Reason For Payment	Amount Paid
STAPLES ADVANTAGE DEPT LA PO BOX 83689 CHICAGO, IL 60696-3689	005470	03/08/2018	Suppliers or vendors	\$1,772.22
	005512	03/28/2018	Suppliers or vendors	\$1,456.42
	005535	04/05/2018	Suppliers or vendors	\$706.12
	005560	04/19/2018	Suppliers or vendors	\$123.35
<b>SUBTOTAL</b>				<b>\$4,058.11</b>
TOWN OF LANTANA, FLORIDA 500 GREYNOLDS CIR LANTANA, FL 33462	005475	03/15/2018	Other - Utilities	\$21,145.88
	005513	03/28/2018	Other - Utilities	\$300.00
	005542	04/12/2018	Other - Utilities	\$19,336.59
	005625	05/10/2018	Other - Utilities	\$20,384.00
<b>SUBTOTAL</b>				<b>\$61,166.47</b>
TRETOLA, TROY 3809 S OLIVE AVE WEST PALM BEACH, FL 33405	005453	02/28/2018	Services	\$1,250.00
	005514	03/28/2018	Services	\$3,500.00
	005577	04/26/2018	Services	\$750.00
<b>SUBTOTAL</b>				<b>\$5,500.00</b>
US FOODS INC PO BOX 281838 ATLANTA, GA 30384	005454	02/28/2018	Suppliers or vendors	\$5,903.80
	005456	03/06/2018	Suppliers or vendors	\$1,259.35
	005471	03/08/2018	Suppliers or vendors	\$6,535.20
	005487	03/21/2018	Suppliers or vendors	\$1,470.11
	005515	03/28/2018	Suppliers or vendors	\$9,970.76
	005543	04/12/2018	Suppliers or vendors	\$2,922.82
	005561	04/19/2018	Suppliers or vendors	\$2,290.06
	005578	04/26/2018	Suppliers or vendors	\$3,743.50
	005602	05/03/2018	Suppliers or vendors	\$2,744.20
	005626	05/10/2018	Suppliers or vendors	\$4,440.70
	005631	05/17/2018	Suppliers or vendors	\$3,575.94
<b>SUBTOTAL</b>				<b>\$44,856.44</b>
WALKER, MARLENE 33 E CAMINO REAL #114 BOCA RATON, FL 33432	005532	04/05/2018	Other - Employee-related	\$240.30
<b>SUBTOTAL</b>				<b>\$240.30</b>
WILSON-ROWAN LOCKSMITH CO 1304 CLARE AVENUE WEST PALM BEACH, FL 33401	005603	05/03/2018	Services	\$1,915.30
<b>SUBTOTAL</b>				<b>\$1,915.30</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 3:** Certain payments or transfers to creditors within 90 days before filing this case

Creditor Name & Address	Check or Wire Number	Payment Date	Reason For Payment	Amount Paid
WINDSTREAM PO BOX 9001950 LOUISVILLE, KY 40290	005486	03/21/2018	Services	\$10,517.64
	005536	04/05/2018	Services	\$2,573.80
	005604	05/03/2018	Services	\$1,768.25
<b>SUBTOTAL</b>				<b>\$14,859.69</b>
<b>GRAND TOTAL</b>				<b>\$904,936.11</b>

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ASSURANCE TOXICOLOGY SERVICES, LLC 933 N NAKOMA SUITE 120 SAN ANTONIO, TX 78216	Debtor Affiliate	\$115.16	08/28/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$800.00	09/17/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$1,750.00	09/30/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$1,100.00	10/15/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$1,700.00	10/31/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$2,500.00	11/15/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$1,450.00	11/30/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$4,350.00	01/16/2018	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$2,850.00	02/19/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$576.70	05/27/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$58,774.60	05/28/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$900.00	05/30/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$187,300.16	05/31/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$3,122.13	06/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$349.53	06/02/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$214.90	06/04/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$425.00	06/07/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$63,396.55	06/11/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$975.93	06/13/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$400.89	06/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$68,821.81	06/25/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$182,815.20	06/30/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$576.70	07/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,375.03	07/02/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,090.27	07/06/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$67,104.76	07/09/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,287.91	07/12/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$14.37	07/14/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$425.00	07/17/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$333.74	07/19/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$3,343.89	07/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$65,703.43	07/23/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$54.08	07/27/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$14,094.12	07/30/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$164,535.01	07/31/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,001.70	08/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$62,562.34	08/06/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,601.89	08/07/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$43.14	08/11/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$344.11	08/15/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$64,282.00	08/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$8,204.99	08/22/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$3,851.15	08/30/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$181,806.95	08/31/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$4,936.39	09/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$73,379.65	09/03/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$55.91	09/08/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$50.41	09/13/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$23.97	09/15/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$87,505.14	09/17/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$172.59	09/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$4,334.50	09/24/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$220.00	09/26/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$91.85	09/29/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$204,306.40	09/30/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$73,655.04	10/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$312.60	10/02/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$83.70	10/06/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$3,274.50	10/08/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$5,446.16	10/13/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$74,321.90	10/15/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$627.50	10/16/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$7,725.00	10/17/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$115.25	10/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$4,118.79	10/26/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$79,000.24	10/29/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$227,042.84	10/31/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,001.70	11/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$10.50	11/10/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$74,493.76	11/12/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$75.00	11/13/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$58.91	11/15/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$6,098.47	11/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$80,654.87	11/26/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,125.00	11/28/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$4,295.55	11/29/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$178,168.33	11/30/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,018.73	12/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$425.00	12/04/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$70,977.46	12/10/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$695.62	12/15/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,753.00	12/19/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$90,115.16	12/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,597.45	12/21/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$77,703.86	12/24/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,838.64	12/27/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,000.00	12/28/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$10,000.00	12/29/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$189,501.41	12/31/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$576.70	01/01/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$425.00	01/04/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$74,611.44	01/07/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$813.74	01/09/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,157.45	01/10/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$78.21	01/12/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$4.25	01/15/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,875.24	01/16/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$111.36	01/20/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$78,076.53	01/21/2018	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,899.04	01/26/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$906.36	01/27/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$112.50	01/29/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$322,287.08	01/31/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$967.80	02/01/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$75,686.89	02/04/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$5,168.93	02/07/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$23.14	02/09/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$9,181.20	02/11/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$805.39	02/13/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$76,075.58	02/18/2018	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$115.28	02/20/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$906.36	02/27/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$194,122.68	02/28/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$605.84	03/01/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$71,883.93	03/04/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$425.00	03/09/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$148.90	03/14/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$75,514.10	03/18/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$115.28	03/20/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$17,210.16	03/21/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$231.49	03/22/2018	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$950.48	03/27/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,996.96	03/29/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$190,222.99	03/31/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$80,053.20	04/01/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$115.04	04/10/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$930.34	04/13/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$68,172.26	04/15/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$10,638.84	04/20/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$7,804.76	04/25/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,854.86	04/26/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$906.36	04/27/2018	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$68,750.65	04/29/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$191,771.41	04/30/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,023.93	05/01/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$75,907.66	05/13/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$5,681.59	05/15/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$120.20	05/20/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$148,174.92	05/22/2018	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	05/31/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	06/30/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	07/31/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$6,430.58	08/31/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	09/30/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 2, Question 4:** Payments or other transfers of property made within 1 year before filing this case that benefited any insider

Insider's name and address	Relationship to debtor	Total amount or value	Dates	Reasons for payment or transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	10/31/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	11/30/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	12/31/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$25.00	01/01/2018	Intercompany Transfer
WESTSIDE SOBER LIVING CENTERS, INC. 20725 ROCKCROFT DRIVE MALIBU, CA 90265	Debtor Affiliate	\$686.00	06/09/2017	Intercompany Transfer
WESTSIDE SOBER LIVING CENTERS, INC. 20725 ROCKCROFT DRIVE MALIBU, CA 90265	Debtor Affiliate	\$9,161.00	09/20/2017	Intercompany Transfer
WESTSIDE SOBER LIVING CENTERS, INC. 20725 ROCKCROFT DRIVE MALIBU, CA 90265	Debtor Affiliate	\$25,000.00	01/29/2018	Intercompany Transfer
WRIGHTSVILLE SERVICES, LLC 1166 HILTS ROAD WRIGHTSVILLE, PA 17368	Debtor Affiliate	\$25.00	12/26/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 8, Question 15:** Health Care bankruptcies

<b>Creditor1 Name and Address</b>	<b>Nature of the business operation including type of services the debtor provides</b>	<b>Location where patient records are maintained (if different from facility address)</b>	<b>If debtor provides meals and housing number of patients in debtor's care</b>	<b>How Are Records Kept?</b>
LUCIDA 116 N. DIXIE HIGHWAY LANTANA, FL 33462-3260	Day or Night Treatment with Community Housing, Intensive Outpatient Treatment		0	Electronically
LUCIDA 112 N. OAK STREET LANTANA, FL 33462-3260	Day or Night Treatment with Community Housing, Intensive Outpatient Treatment, Outpatient Treatment		0	Electronically
LUCIDA 118 N OAK STREET UNIT 101 LANTANA, FL 33462	Residential Treatment Level 5		0	Electronically
LUCIDA 118 N OAK STREET UNIT 102 LANTANA, FL	Residential Treatment Level 5		0	Electronically
LUCIDA 118 N OAK STREET UNIT 103 LANTANA, FL	Residential Treatment Level 5		0	Electronically
LUCIDA 118 N OAK STREET UNIT 104 LANTANA, FL	Residential Treatment Level 5		0	Electronically
LUCIDA 118 N OAK STREET UNIT 109 LANTANA, FL	Residential Treatment Level 5		0	Electronically
LUCIDA 112 N OAK STREET TOWNHOUSE 101 LANTANA, FL	Residential Treatment Facility (Level IA)		4	Electronically
LUCIDA 112 N OAK STREET TOWNHOUSE 102 LANTANA, FL	Residential Treatment Facility (Level IA)		5	Electronically
LUCIDA 112 N OAK STREET TOWNHOUSE 103 LANTANA, FL	Residential Treatment Facility (Level IA)		0	Electronically
LUCIDA 112 N OAK STREET TOWNHOUSE 104 LANTANA, FL	Residential Treatment Facility (Level IA)		5	Electronically
LUCIDA 112 N OAK STREET TOWNHOUSE 105 LANTANA, FL	Residential Treatment Facility (Level IA)		5	Electronically
LUCIDA 112 N OAK STREET TOWNHOUSE 106 LANTANA, FL	Residential Treatment Facility (Level IA)		5	Electronically

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 8, Question 15:** Health Care bankruptcies

<b>Creditor1 Name and Address</b>	<b>Nature of the business operation including type of services the debtor provides</b>	<b>Location where patient records are maintained (if different from facility address)</b>	<b>If debtor provides meals and housing number of patients in debtor's care</b>	<b>How Are Records Kept?</b>
LUCIDA 112 N OAK STREET TOWNHOUSE 107 LANTANA, FL	Residential Treatment Facility (Level IA)		0	Electronically
LUCIDA 112 N OAK STREET TOWNHOUSE 108 LANTANA, FL	Residential Treatment Facility (Level IA)		0	Electronically
LUCIDA 112 N OAK STREET TOWNHOUSE 109 LANTANA, FL	Residential Treatment Facility (Level IA)		0	Electronically

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 10, Question 18:** Closed financial accounts

<b>Creditor's Name and Address</b>	<b>Creditor's Last 4 digits of account number</b>	<b>Type of account</b>	<b>Date account was closed sold moved or transferred</b>	<b>Last balance before closing or transfer</b>	<b>Other type of account description</b>
COMERICA BANK NA 226 AIRPORT PKWY SAN JOSE, CA 95110-4348	2557	Checking	08/31/2017	\$0.00	

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 26a:** List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

Name & Address	Dates of service From	Dates of service To
BURKETT, KATHLEEN 5000 AIRPORT PLAZA DR, STE 100 LONG BEACH, CA 90815	11/02/2015	Present
POAN, NICHOLAS 5000 AIRPORT PLAZA DR, STE 100 LONG BEACH, CA 90815	10/05/2015	06/08/2018

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 26c:** Firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

Name and Address	If any books of account and records are unavailable explain why
BURKETT, KATHLEEN 5000 AIRPORT PLAZA DR, STE 100 LONG BEACH, CA 90815	
POAN, NICHOLAS 5000 AIRPORT PLAZA DR, STE 100 LONG BEACH, CA 90815	

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

**Part 13, Question 26d:** List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

**Name & Address**

During the period immediately preceding these cases, the Debtors entered into the Second Amended and Restated First Lien Credit Agreement as is more fully described in the Declaration of Martin McGahan [Docket No. 16]. As part of this process the Debtors provided financial statements and related financial information. In addition, the Debtors may have provided certain parties, such as banks, auditors, vendors and financial advisors financial statements that may not be part of a public filing. The Debtors does not maintain complete lists to track such disclosures. As such, the Debtors have not provided lists of these parties in response to Statement 26d.

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

**Part 13, Question 28:** Debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name and Address	Position and nature of any interest	% of interest if any
BAUER, EDITH 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Secretary	
BURKETT, KATHLEEN 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Chief Accounting Officer/Assistant Secretary	
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Shareholder	100
PEGG, DAVID 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Director	
POAN, NICHOLAS 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Chief Financial Officer/Treasurer	
RAGLAND, RUSSELL 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Director	
SACK, DAVID 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	President	
YOUNG, JOHN 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Director	

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

**Part 13, Question 29:** Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

Name and address	Position and nature of any interest	Period during which position or interest was held From	Period during which position or interest was held To
LOCH, CASSANDRA 5000 AIRPORT PLAZA DRIVE, SUITE 100 LONG BEACH, CA 90815	President	12/16/2015	06/30/2017
SACK, DAVID 5000 AIRPORT PLAZA DRIVE, SUITE 100 LONG BEACH, CA 90815	Director	08/01/2012	05/22/2018
SACK, DAVID 5000 AIRPORT PLAZA DRIVE, SUITE 100 LONG BEACH, CA 90815	Chief Medical Officer	08/13/2015	05/22/2018

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ASSURANCE TOXICOLOGY SERVICES, LLC 933 N NAKOMA SUITE 120 SAN ANTONIO, TX 78216	Debtor Affiliate	\$115.16	08/28/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$800.00	09/17/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$1,750.00	09/30/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$1,100.00	10/15/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$1,700.00	10/31/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$2,500.00	11/15/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$1,450.00	11/30/2017	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$4,350.00	01/16/2018	Intercompany Transfer
EBH ACQUISITION SUBSIDIARY, INC. 3100 E COMMERCIAL BLVD SUITE 100 FORT LAUDERDALE, FL 33308	Debtor Affiliate	\$2,850.00	02/19/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$576.70	05/27/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$58,774.60	05/28/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$900.00	05/30/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$187,300.16	05/31/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$3,122.13	06/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$349.53	06/02/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$214.90	06/04/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$425.00	06/07/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$63,396.55	06/11/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$975.93	06/13/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$400.89	06/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$68,821.81	06/25/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$182,815.20	06/30/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$576.70	07/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,375.03	07/02/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,090.27	07/06/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$67,104.76	07/09/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,287.91	07/12/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$14.37	07/14/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$425.00	07/17/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$333.74	07/19/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$3,343.89	07/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$65,703.43	07/23/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$54.08	07/27/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$14,094.12	07/30/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$164,535.01	07/31/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,001.70	08/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$62,562.34	08/06/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,601.89	08/07/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$43.14	08/11/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$344.11	08/15/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$64,282.00	08/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$8,204.99	08/22/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$3,851.15	08/30/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$181,806.95	08/31/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$4,936.39	09/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$73,379.65	09/03/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$55.91	09/08/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$50.41	09/13/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$23.97	09/15/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$87,505.14	09/17/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$172.59	09/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$4,334.50	09/24/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$220.00	09/26/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$91.85	09/29/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$204,306.40	09/30/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$73,655.04	10/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$312.60	10/02/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$83.70	10/06/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$3,274.50	10/08/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$5,446.16	10/13/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$74,321.90	10/15/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$627.50	10/16/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$7,725.00	10/17/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$115.25	10/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$4,118.79	10/26/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$79,000.24	10/29/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$227,042.84	10/31/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,001.70	11/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$10.50	11/10/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$74,493.76	11/12/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$75.00	11/13/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$58.91	11/15/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$6,098.47	11/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$80,654.87	11/26/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,125.00	11/28/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$4,295.55	11/29/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$178,168.33	11/30/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,018.73	12/01/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$425.00	12/04/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$70,977.46	12/10/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$695.62	12/15/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,753.00	12/19/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$90,115.16	12/20/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,597.45	12/21/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$77,703.86	12/24/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,838.64	12/27/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,000.00	12/28/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$10,000.00	12/29/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$189,501.41	12/31/2017	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$576.70	01/01/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$425.00	01/04/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$74,611.44	01/07/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$813.74	01/09/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,157.45	01/10/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$78.21	01/12/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$4.25	01/15/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,875.24	01/16/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$111.36	01/20/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$78,076.53	01/21/2018	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,899.04	01/26/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$906.36	01/27/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$112.50	01/29/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$322,287.08	01/31/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$967.80	02/01/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$75,686.89	02/04/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$5,168.93	02/07/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$23.14	02/09/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$9,181.20	02/11/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$805.39	02/13/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$76,075.58	02/18/2018	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$115.28	02/20/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$906.36	02/27/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$194,122.68	02/28/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$605.84	03/01/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$71,883.93	03/04/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$425.00	03/09/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$148.90	03/14/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$75,514.10	03/18/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$115.28	03/20/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$17,210.16	03/21/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$231.49	03/22/2018	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$950.48	03/27/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,996.96	03/29/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$190,222.99	03/31/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$80,053.20	04/01/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$115.04	04/10/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$930.34	04/13/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$68,172.26	04/15/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$10,638.84	04/20/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$7,804.76	04/25/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$2,854.86	04/26/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$906.36	04/27/2018	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$68,750.65	04/29/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$191,771.41	04/30/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$1,023.93	05/01/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$75,907.66	05/13/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$5,681.59	05/15/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$120.20	05/20/2018	Intercompany Transfer
ELEMENTS BEHAVIORAL HEALTH, INC. 5000 AIRPORT PLAZA DRIVE SUITE 100 LONG BEACH, CA 90815	Debtor Affiliate	\$148,174.92	05/22/2018	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	05/31/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	06/30/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	07/31/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$6,430.58	08/31/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	09/30/2017	Intercompany Transfer

Debtor Name: EBH Services of Florida, Inc.

Case Number: 18-11235 (BLS)

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****Part 13, Question 30:** Payments, distributions, or withdrawals credited or given to insiders

Name and address of recipient	Relationship to debtor	Amount of money or description and value of property	Dates	Reason for providing the value
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	10/31/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	11/30/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$4,525.00	12/31/2017	Intercompany Transfer
THE RANCH ON THE PINEY RIVER, INC. 6107 PINEWOOD ROAD NUNNELLY, TN 37137	Debtor Affiliate	\$25.00	01/01/2018	Intercompany Transfer
WESTSIDE SOBER LIVING CENTERS, INC. 20725 ROCKCROFT DRIVE MALIBU, CA 90265	Debtor Affiliate	\$686.00	06/09/2017	Intercompany Transfer
WESTSIDE SOBER LIVING CENTERS, INC. 20725 ROCKCROFT DRIVE MALIBU, CA 90265	Debtor Affiliate	\$9,161.00	09/20/2017	Intercompany Transfer
WESTSIDE SOBER LIVING CENTERS, INC. 20725 ROCKCROFT DRIVE MALIBU, CA 90265	Debtor Affiliate	\$25,000.00	01/29/2018	Intercompany Transfer
WRIGHTSVILLE SERVICES, LLC 1166 HILTS ROAD WRIGHTSVILLE, PA 17368	Debtor Affiliate	\$25.00	12/26/2017	Intercompany Transfer