Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

****CLAIM NUMBER VOIDED BY AGENT**** Claim Number: 103 Claim Date: / / Debtor: DEBTOR NOT FOUND Comments: EXPUNGED **TOTAL** Claimed: \$0.00 ****CLAIM NUMBER VOIDED BY AGENT**** Claim Number: 104 Claim Date: / / Debtor: DEBTOR NOT FOUND Comments: EXPUNGED **TOTAL** Claimed: \$0.00 ****CLAIM NUMBER VOIDED BY AGENT**** Claim Number: 105 Claim Date: / / Debtor: DEBTOR NOT FOUND Comments: EXPUNGED \$0.00 **TOTAL** Claimed: ****CLAIM NUMBER VOIDED BY AGENT**** Claim Number: 106 Claim Date: / / Debtor: DEBTOR NOT FOUND Comments: EXPUNGED TOTAL Claimed: \$0.00 18307 BOYS RANCH ROAD OWNER LLC Claim Number: 10029 C/O HAYNES AND BOONE LLP Claim Date: 03/10/2023 ATTN REBECCA LANDAU Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC 30 ROCKEFELLER PLAZA, 26TH FL Comments: ALLOWED NEW YORK, NY 10112 DOCKET: 513 (04/28/2023) UNSECURED Claimed: Scheduled: \$458,904.24 DISP Allowed: \$2,068,000.00 \$16,544,245.43 UNLIQ

Date: 08/01/2023

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

18307 BOYS RANCH ROAC/O HAYNES AND BOON ATTN REBECCA LANDAU 30 ROCKEFELLER PLAZA NEW YORK, NY 10112	IE LLP	Claim Number: 10030 Claim Date: 03/10/2023 Debtor: DELPHI INTERMEDIATE Comments: ALLOWED DOCKET: 513 (04/28/2023)	E HEALTHCO, LLC			
UNSECURED	Claimed:	\$16,544,245.43 UNLIQ	Scheduled:	\$458,904.24 DISP	Allowed:	\$2,068,000.00
18307 BOYS RANCH ROA C/O HAYNES AND BOON ATTN REBECCA LANDAU 30 ROCKEFELLER PLAZA NEW YORK, NY 10112	IE LLP	Claim Number: 10031 Claim Date: 03/10/2023 Debtor: DR PARENT, LLC Comments: ALLOWED DOCKET: 513 (04/28/2023)				
UNSECURED	Claimed:	\$16,544,245.43 UNLIQ	Scheduled:	\$458,904.24 DISP	Allowed:	\$2,068,000.00
18307 BOYS RANCH ROA C/O HAYNES AND BOON ATTN REBECCA LANDAU 30 ROCKEFELLER PLAZA NEW YORK, NY 10112	IE LLP I	Claim Number: 10032 Claim Date: 03/10/2023 Debtor: DR SUB, LLC Comments: ALLOWED DOCKET: 513 (04/28/2023)				
UNSECURED	Claimed:	\$16,544,245.43 UNLIQ	Scheduled:	\$458,904.24 DISP	Allowed:	\$2,068,000.00
18307 BOYS RANCH ROAC/O HAYNES AND BOON ATTN REBECCA LANDAU 30 ROCKEFELLER PLAZA NEW YORK, NY 10112	IE LLP	Claim Number: 10033 Claim Date: 03/10/2023 Debtor: PALM BEACH RECOVER Comments: ALLOWED DOCKET: 513 (04/28/2023)	Y, LLC			
UNSECURED	Claimed:	\$16,544,245.43 UNLIQ	Scheduled:	\$458,904.24 DISP	Allowed:	\$2,068,000.00
3030 HARBOR LLC C/O KOZYAK TROPIN & ATTN BERNICE LEE, ESC 2525 PONCE DE LEON B MIAMI, FL 33134	ζ	Claim Number: 10066 Claim Date: 04/13/2023 Debtor: DEFINING MOMENT RE Comments: ALLOWED DOCKET: 849 (07/26/2023)	COVERY COMMUNITY, LLC			
UNSECURED	Claimed:	\$1,749,860.38	Scheduled:	\$117,362.72 UNLIQ	Allowed:	\$1,385,575.00

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

314 10TH STREET LP C/O SEESE PA ATTN MICHAEL D SEESE, ESQ 101 NE 3RD AVE, STE 1500 FORT LAUDERDALE, FL 33301	Claim Number: 10002 Claim Date: 02/16/2023 Debtor: PALM BEACH RECOVERY, LLC Comments: ALLOWED DOCKET: 381 (04/14/2023)			
UNSECURED Claimed:	\$142,831.21		Allowed:	\$142,831.21
35 ELM STREET ASSOCIATES LLC ATTN AVI LIPSKER 35 ELM ST NEW HAVEN, CT 06510	Claim Number: 10035 Claim Date: 03/14/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LL Comments: ALLOWED DOCKET: 397 (04/18/2023)	С		
ADMINISTRATIVE Claimed:	\$1,500.00			
UNSECURED Claimed:	\$1,500.00 Scheduled:	\$1,500.00	Allowed:	\$2,250.00
44 COURT STREET LLC C/O JEFFREY KLARSFELD, ESQ 10 E 40TH ST, 46TH FL NEW YORK, NY 10016	Claim Number: 10003 Claim Date: 02/17/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LL	С		
UNSECURED Claimed:	\$35,408.26 Scheduled:	\$15,504.84		
588 E SAN LORENZO OWNER LLC C/O HAYNES AND BOONE LLP ATTN REBECCA LANDAU 30 ROCKEFELLER PLAZA, 26TH FL NEW YORK, NY 10112	Claim Number: 10025 Claim Date: 03/10/2023 Debtor: DELPHI INTERMEDIATE HEALTHCO, LLC Comments: ALLOWED DOCKET: 514 (04/28/2023)			
UNSECURED Claimed:	\$18,948,507.63 UNLIQ Scheduled:	\$42,811.78 DISP	Allowed:	\$2,086,000.00
588 E SAN LORENZO OWNER LLC C/O HAYNES AND BOONE LLP ATTN REBECCA LANDAU 30 ROCKEFELLER PLAZA, 26TH FL NEW YORK, NY 10112	Claim Number: 10026 Claim Date: 03/10/2023 Debtor: DELPHI HEALTH GROUP, LLC Comments: ALLOWED DOCKET: 514 (04/28/2023)			
UNSECURED Claimed:	\$18,948,507.63 UNLIQ		Allowed:	\$2,086,000.00

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

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588 E SAN LORENZO O C/O HAYNES AND BOO ATTN REBECCA LANDA 30 ROCKEFELLER PLAZ NEW YORK, NY 10112	ONE LLP AU ZA, 26TH FL	Claim Number: 10027 Claim Date: 03/10/2023 Debtor: DR PARENT, LLC Comments: ALLOWED DOCKET: 514 (04/28/2023)				
UNSECURED	Claimed:	\$18,948,507.63 UNLIQ	Scheduled:	\$42,811.78 DISP	Allowed:	\$2,086,000.00
588 E SAN LORENZO (C/O HAYNES AND BOO ATTN REBECCA LAND) 30 ROCKEFELLER PLA NEW YORK, NY 10112	ONE LLP AU ZA, 26TH FL	Claim Number: 10028 Claim Date: 03/10/2023 Debtor: DR SUB, LLC Comments: ALLOWED DOCKET: 514 (04/28/2023)				
UNSECURED	Claimed:	\$18,948,507.63 UNLIQ	Scheduled:	\$42,811.78 DISP	Allowed:	\$2,086,000.00
CLIENT ID 4 ADDRESS REDACTED		Claim Number: 1 Claim Date: 02/21/2023 Debtor: SUMMIT BEHAVIORA Comments: ALLOWED DOCKET: 403 (04/19/2023)	L HEALTH LIMITED LIABI	LI LIABILITY COMPANY		
UNSECURED	Claimed:	\$15,000.00			Allowed:	\$5,500.00
ADTAXI C/O SZABO ASSOCIAT 3355 LENOX RD NE, S ATLANTA, GA 30326		Claim Number: 10001 Claim Date: 02/13/2023 Debtor: DELPHI HEALTH GRC	OUP, LLC			
UNSECURED	Claimed:	\$22,500.00				
AGL WELDING SUPPLY D/B/A INHALATION TH 600 RTE 46 W CLIFTON, NJ 07015	•	Claim Number: 24 Claim Date: 03/20/2023 Debtor: DELPHI BEHAVIORAL	. HEALTH GROUP, LLC			
UNSECURED	Claimed:	\$380.02	Scheduled:	\$380.02		

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

CLIENT ID 9 Claim Number: 25 ADDRESS REDACTED Claim Date: 03/21/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 675 (05/26/2023) **UNSECURED** Claimed: \$950.00 Claim Number: 10034 AMEX TRS CO INC C/O BECKET AND LEE LLP Claim Date: 03/14/2023 PO BOX 3001 Debtor: PALM BEACH RECOVERY, LLC MALVERN, PA 19355-0701 **UNSECURED** Claimed: \$535.45 Claim Number: 10134 ANNE ARUNDEL COUNTY, MARYLAND C/O OFFICE OF FINANCE Claim Date: 07/11/2023 ATTN BANKRUPTCY ADMINISTRATOR Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC PO BOX 2700, MS 1103 ANNAPOLIS, MD 21404 **SECURED** Claimed: \$268.14 BANK DIRECT CAPITAL FINANCE Claim Number: 17 150 N FIELD DR, STE 190 Claim Date: 03/03/2023 LAKE FOREST, IL 60045 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: ALLOWED DOCKET: 497 (04/24/2023) **SECURED** Claimed: \$1,172,110.36 **UNSECURED** Claimed: \$21,576.82 Allowed: \$852,633.70 BANNING REAL ESTATE LLC Claim Number: 10042 C/O KOZYAK TROPIN & THROCKMORTON LLP Claim Date: 03/27/2023 ATTN BERNICE LEE, ESQ Debtor: CALIFORNIA ADDICTION TREATMENT CENTER LL LLC 2525 PONCE DE LEON BLVD, 9TH FL MIAMI, FL 33134 Scheduled: **UNSECURED** Claimed: \$261,386.00 \$9,386.37 DISP

Date: 08/01/2023

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

CLIENT ID 1 ADDRESS REDACTED		Claim Number: 10005 Claim Date: 02/18/2023 Debtor: MARYLAND HOUSE DET Comments: EXPUNGED DOCKET: 680 (05/26/2023)	ΓΟΧ, LLC			
UNSECURED	Claimed:	\$150.00				
BOLIVE LLC C/O AKERMAN LLP ATTN D BRETT MARKS, E 201 E LAS OLAS BLVD, S' FORT LAUDERDALE, FL 3	ΓΕ 1800	Claim Number: 10013 Claim Date: 03/02/2023 Debtor: PALM BEACH RECOVER Comments: ALLOWED DOCKET: 380 (04/14/2023)	Y, LLC			
UNSECURED	Claimed:	\$299,014.52	Scheduled:	\$18,340.65	Allowed:	\$274,096.64
BOSTON GAS COMPANY D/B/A NATIONAL GRID 300 ERIE BLVD W SYRACUSE, NY 13202		Claim Number: 10090 Claim Date: 04/18/2023 Debtor: SBH HAVERHILL, LLC Comments: EXPUNGED DOCKET: 712 (06/07/2023)				
UNSECURED	Claimed:	\$4,765.04				
CLIENT ID 14 ADDRESS ON FILE		Claim Number: 40 Claim Date: 04/11/2023 Debtor: DELPHI BEHAVIORAL H Comments: EXPUNGED DOCKET: 700 (06/06/2023)	EALTH GROUP, LLC			
UNSECURED	Claimed:	\$0.00 UNDET				
BROWARD COUNTY C/O RECORDS TAXES & TREASURY ATTN BANKRUPTCY SECTION 115 S ANDREWS AVE, A-100 FORT LAUDERDALE, FL 33301		Claim Number: 10014 Claim Date: 03/03/2023 Debtor: DELPHI BEHAVIORAL H Comments: WITHDRAWN DOCKET: 843 (07/25/2023)	EALTH GROUP, LLC			
SECURED	Claimed:	\$3,451.42				

\$795.00

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Claimed:

UNSECURED

\$796.98

Name of proof of claims where to

CLIENT ID 21 Claim Number: 92 ADDRESS ON FILE Claim Date: 05/22/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: DOCKET: 748 (06/22/2023) **PRIORITY** Claimed: \$1,000.00 UNLIQ Claim Number: 10012 CLIENT ID 6 ADDRESS REDACTED Claim Date: 03/01/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 638 (05/19/2023) **PRIORITY** Claimed: \$1,250.00 Claim Number: 10069 CAMP MEADE INVESTMENTS I LLC C/O BAKER DONELSON BEARMAN CALDWELL BER Claim Date: 04/13/2023 ATTN MELISSA A CAMPBELL, ESQ Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC PO BOX 1549 Comments: EXPUNGED ORLANDO, FL 32802-1549 DOCKET: 587 (05/12/2023) **UNSECURED** Claimed: \$961,235.80 CAMP MEADE INVESTMENTS I LLC Claim Number: 10092 C/O BAKER DONELSON BEARMAN, ET AL Claim Date: 04/21/2023 ATTN MELISSA A CAMPBELL, ESQ Debtor: MARYLAND HOUSE DETOX, LLC PO BOX 1549 Comments: ALLOWED ORLANDO, FL 32802-1549 DOCKET: 587 (05/12/2023) UNSECURED Claimed: \$961,235.80 Scheduled: \$19,982.73 Allowed: \$195,761.90 CAPITAL CITY SEWER SERVICE INC Claim Number: 4 256 PERTCH RD Claim Date: 02/27/2023 SEVERNA PARK, MD 21146-1330 Debtor: MARYLAND HOUSE DETOX, LLC Comments: DOCKET: 398 (04/18/2023)

Epiq Bankruptcy Solutions, LLC Page: 7

Scheduled:

\$780.00

Allowed:

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

CAPITAL LANDSCAPING LLC Claim Number: 10004 PO BOX 1015 Claim Date: 02/17/2023

GLEN BURNIE, MD 21060 Debtor: MARYLAND HOUSE DETOX, LLC

UNSECURED Claimed: \$2,825.00 Scheduled: \$2,825.00

CLIENT ID 12 Claim Number: 10052 ADDRESS ON FILE Claim Date: 04/01/2023

Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC

Comments: EXPUNGED DOCKET: 709 (06/07/2023)

UNSECURED Claimed: \$8,000.00

CELLCO PARTNERSHIP Claim Number: 10084
D/B/A VERIZON WIRELESS Claim Date: 04/17/2023

ATTN WILLIAM M VERMETTE Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC 22001 LOUDOUN COUNTY PKWY

ASHBURN, VA 20147

Name of proof of claims where to

UNSECURED Claimed: \$11,595.20

CIGNA HEALTH & LIFE INSURANCE COMPANY Claim Number: 31
ATTN MARYLOU RICE, LEGAL COMPLIANCE Claim Date: 03/29/2023

900 COTTAGE GROVE RD, B6LPA Debtor: UNION FRESH START LLC HARTFORD, CT 06152 Comments: ALLOWED

Comments: ALLOWED DOCKET: 503 (04/26/2023)

<u>UNSECURED</u> Claimed: \$211,950.50 Scheduled: \$0.00 UNLIQ Allowed: \$129,252.09

CIGNA HEALTH & LIFE INSURANCE COMPANY
ATTN MARYLOU RICE, LEGAL COMPLIANCE
900 COTTAGE GROVE RD, B6LPA
HARTFORD, CT 06152

Claim Number: 32
Claim Date: 03/29/2023
Debtor: SBH HAVERHILL, LLC
Comments: ALLOWED

Comments: ALLOWED DOCKET: 503 (04/26/2023)

<u>UNSECURED</u> Claimed: \$41,581.73 Scheduled: \$0.00 UNLIQ Allowed: \$25,646.40

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Date: 08/01/2023 Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Claim Number: 33 CIGNA HEALTH & LIFE INSURANCE COMPANY ATTN MARYLOU RICE, LEGAL COMPLIANCE Claim Date: 03/29/2023 900 COTTAGE GROVE RD, B6LPA Debtor: PALM BEACH RECOVERY, LLC HARTFORD, CT 06152 Comments: ALLOWED DOCKET: 503 (04/26/2023) **UNSECURED** Claimed: \$107,448.31 Allowed: \$41,421.09 CIGNA HEALTH & LIFE INSURANCE COMPANY Claim Number: 34 ATTN MARYLOU RICE, LEGAL COMPLIANCE Claim Date: 03/29/2023 900 COTTAGE GROVE RD, B6LPA Debtor: OCEAN BREEZE DETOX, LLC HARTFORD, CT 06152 Comments: ALLOWED DOCKET: 503 (04/26/2023) Claimed: \$232,061.98 Scheduled: \$5,900,000.00 UNLIQ DISP Allowed: \$96,430.42 UNSECURED Claim Number: 10041 CITY OF PEMBROKE PINES, FLORIDA 3099 E COMMERCIAL BLVD, STE 200 Claim Date: 03/21/2023 FORT LAUDERDALE, FL 33308 Debtor: OCEAN BREEZE DETOX, LLC Comments: ALLOWED DOCKET: 421 (04/20/2023) **PRIORITY** Scheduled: \$250.00 Scheduled: \$8,841.05 \$439,360.51 UNSECURED Claimed: \$439,360.51 UNLIQ Allowed: CITY OF PHILADELPHIA Claim Number: 10020 LAW DEPARTMENT - TAX & REVENUE UNIT Claim Date: 03/07/2023 ATTN MEGAN N HARPER Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC 1401 JOHN F KENNEDY BLVD, 5TH FL Comments: EXPUNGED PHILADELPHIA, PA 19102 DOCKET: 735 (06/21/2023)

PRIORITY Claimed: \$556.00

CITY OF PHILADELPHIA C/O CITY OF PHILADELPHIA LAW - TAX UNIT ATTN MEGAN N HARPER

1401 JFK BLVD, 5TH FL PHILADELPHIA, PA 19102

Claim Number: 10135 Claim Date: 07/14/2023 Debtor: SUMMIT IOP LIMITED

PRIORITY Claimed: \$0.00 UNDET

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Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

COCKEY'S ENTERPRISE PO BOX 126 STEVENSON, MD 21153		Claim Number: 10057 Claim Date: 04/07/2023 Debtor: MARYLAND HOUSE DI	ETOX, LLC			
UNSECURED	Claimed:	\$260.00	Scheduled:	\$520.00		
CLIENT ID 15 ADDRESS ON FILE		Claim Number: 41 Claim Date: 04/11/2023 Debtor: DELPHI BEHAVIORAL Comments: EXPUNGED DOCKET: 701 (06/06/2023)	HEALTH GROUP, LLC			
UNSECURED	Claimed:	\$25,000.00				
CROWE LLP 320 E JEFFERSON BLVD PO BOX 7 SOUTH BEND, IN 46624		Claim Number: 10040 Claim Date: 03/21/2023 Debtor: DR SUB, LLC				
UNSECURED	Claimed:	\$57,160.00	Scheduled:	\$48,944.00		
CURTIS, CYNTHIA A ADDRESS ON FILE		Claim Number: 10018 Claim Date: 03/07/2023 Debtor: DELPHI BEHAVIORAL Comments: ALLOWED DOCKET: 400 (04/18/2023)	HEALTH GROUP, LLC			
PRIORITY UNSECURED	Claimed:	\$15,150.00 UNLIQ	Cehaduladı	¢0.00 HNI TO	Allowed	¢756 005 00
CURTIS, CYNTHIA A ADDRESS ON FILE	Claimed:	\$1,244,993.00 UNLIQ Claim Number: 10019 Claim Date: 03/07/2023 Debtor: MARYLAND HOUSE DI Comments: EXPUNGED DOCKET: 400 (04/18/2023)	Scheduled: ETOX, LLC	\$0.00 UNLIQ	Allowed:	\$756,085.80
PRIORITY UNSECURED	Claimed: Claimed:	\$15,150.00 UNLIQ \$1,244,993.00 UNLIQ				

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

CUSTOM DESIGNED SEC PO BOX 1497 BUSHNELL, FL 33513	CURITY SYSTEMS	Claim Number: 39 Claim Date: 04/07/2023 Debtor: PALM BEACH RECC Comments: EXPUNGED DOCKET: 705 (06/07/2023)	,		
UNSECURED	Claimed:	\$1,240.00			
DATA FACTS INC 8000 CENTERVIEW PKW CORDOVA, TN 38018	/Y, STE 400	Claim Number: 10024 Claim Date: 03/10/2023 Debtor: DELPHI BEHAVIOR	AL HEALTH GROUP, LLC		
UNSECURED	Claimed:	\$9,409.44	Scheduled:	\$6,858.88	
DCX GROUP LLC ATTN DAVID STUP ADDRESS ON FILE		Claim Number: 58 Claim Date: 04/18/2023 Debtor: DELPHI BEHAVIOR Comments: EXPUNGED DOCKET: 723 (06/14/2023			
UNSECURED	Claimed:	\$1,000,000.00			
DCX GROUP LLC ATTN DAVID STUP ADDRESS ON FILE		Claim Number: 60 Claim Date: 04/21/2023 Debtor: DELPHI BEHAVIOR Comments: EXPUNGED DOCKET: 723 (06/14/2023	•		
UNSECURED	Claimed:	\$1,000,000.00			
DCX GROUP LLC ATTN DAVID STUP ADDRESS ON FILE		Claim Number: 63 Claim Date: 04/20/2023 Debtor: DELPHI BEHAVIOR Comments: EXPUNGED DOCKET: 723 (06/14/2023)	,		
UNSECURED	Claimed:	\$1,000,000.00			

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

DCX GROUP LLC 7020 PHEASANT CR BALTIMORE, MD 21:		Claim Number: 10087 Claim Date: 04/17/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 711 (06/07/2023)		
UNSECURED	Claimed:	\$1,000,000.00		
DEPARTMENT OF THE PO BOX 7346 PHILADELPHIA, PA		Claim Number: 80 Claim Date: 04/24/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 821 (07/14/2023)		
PRIORITY UNSECURED	Claimed: Claimed:	\$682,801.54 UNLIQ \$20,093.92 UNLIQ		
DEPARTMENT OF TH PO BOX 7346 PHILADELPHIA, PA	HE TREASURY - IRS	Claim Number: 108 Claim Date: 06/21/2023 Debtor: SBH HAVERHILL, LLC Comments: ALLOWED DOCKET: 832 (07/24/2023)		
PRIORITY UNSECURED	Claimed: Claimed:	\$98,923.67 UNLIQ \$6,978.66 UNLIQ	Allowed: Allowed:	\$98,397.23 \$6,978.66
DEPARTMENT OF THE TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 109 Claim Date: 06/21/2023 Debtor: UNION FRESH START LLC Comments: ALLOWED DOCKET: 833 (07/24/2023)		
PRIORITY UNSECURED	Claimed: Claimed:	\$64,658.38 UNLIQ \$2,629.76 UNLIQ	Allowed: Allowed:	\$64,083.05 \$2,629.76
DEPARTMENT OF THE TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 118 Claim Date: 07/24/2023 Debtor: SBH HAVERHILL, LLC Comments: AMENDS CLAIM #42		7-7
PRIORITY UNSECURED	Claimed: Claimed:	\$98,397.23 UNLIQ \$6,978.66 UNLIQ		

Name of proof of claims where to

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Claim Number: 119 DEPARTMENT OF THE TREASURY - IRS PO BOX 7346 Claim Date: 07/24/2023 PHILADELPHIA, PA 19101-7346 Debtor: UNION FRESH START LLC Comments: AMENDS CLAIM #43 **PRIORITY** Claimed: \$65,691.40 UNLIQ Claimed: UNSECURED \$2,629.76 UNLIQ DEPARTMENT OF THE TREASURY - IRS Claim Number: 10098 ATTN YOLANDA ALLEN Claim Date: 05/02/2023 801 BROADWAY, MDP 146 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC NASHVILLE, TN 37203 Comments: EXPUNGED DOCKET: 820 (07/14/2023) **PRIORITY** Claimed: \$682,801.54 UNLIQ **UNSECURED** Claimed: \$20,093.92 UNLIQ **DEPARTMENT OF THE TREASURY - IRS** Claim Number: 10099 ATTN YOLANDA ALLEN Claim Date: 05/02/2023 801 BROADWAY, MDP 146 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC NASHVILLE, TN 37203 Comments: EXPUNGED DOCKET: 796 (07/06/2023) **PRIORITY** Claimed: \$2,491.38 UNLIQ DEPARTMENT OF THE TREASURY - IRS Claim Number: 10100 ATTN INSOLVENCY, YOLANDA ALLEN Claim Date: 05/02/2023 801 BROADWAY, MDP 146 Debtor: CALIFORNIA ADDICTION TREATMENT CENTER LL LLC NASHVILLE, TN 37203 Comments: EXPUNGED DOCKET: 799 (07/07/2023) **PRIORITY** Claimed: \$20,963.59 UNLIQ **UNSECURED** Claimed: \$6,967.81 UNLIQ DEPARTMENT OF THE TREASURY - IRS Claim Number: 10101 ATTN INSOLVENCY, YOLANDA ALLEN Claim Date: 05/03/2023 801 BROADWAY, MDP 146 Debtor: CALIFORNIA VISTAS ADDICTION TREATMENT LLC NASHVILLE, TN 37217 Comments: POSSIBLY AMENDED BY 10122 DOCKET: 568 (05/12/2023) **PRIORITY** Claimed: \$12,281.93 UNLIQ **UNSECURED** Claimed: \$104.08 UNLIQ

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

DEPARTMENT OF THE TREASURY - IRS ATTN INSOLVENCY, YOLANDA ALLEN 801 BROADWAY, MDP 146 NASHVILLE, TN 37203	Claim Number: 10102 Claim Date: 05/03/2023 Debtor: DEFINING MOMENT RECOVERY COMMUNITY, LLC Comments: EXPUNGED DOCKET: 797 (07/06/2023)		
PRIORITY Claimed: UNSECURED Claimed:	\$6,174.73 UNLIQ \$539.33 UNLIQ		
DEPARTMENT OF THE TREASURY - IRS ATTN INSOLVENCY, YOLANDA ALLEN 801 BROADWAY, MDP 146 NASHVILLE, TN 37203	Claim Number: 10103 Claim Date: 05/03/2023 Debtor: DELPHI MANAGEMENT LLC Comments: EXPUNGED DOCKET: 793 (07/05/2023)		
UNSECURED Claimed:	\$100.00 UNLIQ		
DEPARTMENT OF THE TREASURY - IRS ATTN INSOLVENCY, YOLANDA ALLEN 801 BROADWAY, MDP 146 NASHVILLE, TN 37203	Claim Number: 10104 Claim Date: 05/04/2023 Debtor: DESERT VIEW RECOVERY COMMUNITY, LLC Comments: EXPUNGED DOCKET: 800 (07/07/2023)		
PRIORITY Claimed:	\$8,694.87		
DEPARTMENT OF THE TREASURY - IRS ATTN INSOLVENCY, YOLANDA ALLEN 801 BROADWAY, MDP 146 NASHVILLE, TN 37203	Claim Number: 10105 Claim Date: 05/04/2023 Debtor: MARYLAND HOUSE DETOX, LLC Comments: EXPUNGED DOCKET: 808 (07/07/2023)		
PRIORITY Claimed: UNSECURED Claimed:	\$28,753.67 UNLIQ \$3,057.53 UNLIQ		
DEPARTMENT OF THE TREASURY - IRS 801 BROADWAY, MDP 146 NASHVILLE, TN 37203	Claim Number: 10106 Claim Date: 05/04/2023 Debtor: OCEAN BREEZE DETOX, LLC Comments: ALLOWED DOCKET: 806 (07/07/2023)		
PRIORITY Claimed: UNSECURED	\$67,557.41	Allowed: Allowed:	\$61,455.33 \$6,102.08

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

DEPARTMENT OF TH ATTN INSOLVENCY, 801 BROADWAY, ME NASHVILLE, TN 3720	YOLANDA ALLEN DP 146	Claim Number: 10107 Claim Date: 05/04/2023 Debtor: PALM BEACH RECOVERY, LLC Comments: ALLOWED DOCKET: 807 (07/07/2023)		
PRIORITY UNSECURED	Claimed: Claimed:	\$76,398.82 \$7,585.87	Allowed: Allowed:	\$76,398.82 \$7,585.87
DEPARTMENT OF TH ATTN INSOLVENCY, 801 BROADWAY, ME NASHVILLE, TN 3720	HE TREASURY - IRS YOLANDA ALLEN DP 146	Claim Number: 10108 Claim Date: 05/04/2023 Debtor: SUMMIT AT FLORHAM PARK, LLC Comments: ALLOWED DOCKET: 803 (07/07/2023)	Anowed.	<i>\$7,303.07</i>
PRIORITY	Claimed:	\$5,180.28	Allowed:	\$5,180.28
UNSECURED DEPARTMENT OF THATTN INSOLVENCY, 801 BROADWAY, ME NASHVILLE, TN 3720	YOLANDA ALLEN OP 146	\$353.04 Claim Number: 10109 Claim Date: 05/04/2023 Debtor: SUMMIT BEHAVIORAL HEALTH LIMITED LIABILI LIABILITY COMPANY Comments: ALLOWED DOCKET: 805 (07/07/2023)	Allowed:	<u>\$353.04</u>
PRIORITY UNSECURED	Claimed: Claimed:	\$11,192.70 \$445.20	Allowed: Allowed:	\$11,192.70 \$445.20
DEPARTMENT OF TH ATTN YOLANDA ALL 801 BROADWAY, ME NASHVILLE, TN 3720	HE TREASURY - IRS EN DP 146	Claim Number: 10110 Claim Date: 05/08/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED DOCKET: 796 (07/06/2023)	7 moved.	Ψ113.20
PRIORITY	Claimed:	\$2,491.38 UNLIQ		
DEPARTMENT OF TH 801 BROADWAY, ME NASHVILLE, TN 3720	OP 146	Claim Number: 10111 Claim Date: 05/09/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: ALLOWED DOCKET: 821 (07/14/2023)		
PRIORITY UNSECURED	Claimed: Claimed:	\$301,170.05 \$20,093.92	Allowed: Allowed:	\$292,870.68 \$20,093.92

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

DEPARTMENT OF THE TREA 801 BROADWAY, MDP 146 NASHVILLE, TN 37203	ASURY - IRS	Claim Number: 10112 Claim Date: 05/09/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: ALLOWED DOCKET: 796 (07/06/2023)		
PRIORITY	Claimed:	\$2,491.38 UNLIQ	Allowed:	\$2,491.38
DEPARTMENT OF THE TREA ATTN YOLANDA ALLEN 801 BROADWAY, MDP 146 NASHVILLE, TN 37203	ASURY - IRS	Claim Number: 10113 Claim Date: 05/09/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 821 (07/14/2023)		
PRIORITY	Claimed:	\$0.00		
DEPARTMENT OF THE TREA 801 BROADWAY, MDP 146 NASHVILLE, TN 37203	ASURY - IRS	Claim Number: 10114 Claim Date: 05/09/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED DOCKET: 796 (07/06/2023)		
PRIORITY	Claimed:	\$0.00		
DEPARTMENT OF THE TREA 801 BROADWAY, MDP 146 NASHVILLE, TN 37203	ASURY - IRS	Claim Number: 10115 Claim Date: 05/09/2023 Debtor: CALIFORNIA ADDICTION TREATMENT CENTER LL LLC Comments: EXPUNGED DOCKET: 798 (07/06/2023)		
PRIORITY	Claimed:	\$0.00		
DEPARTMENT OF THE TREA 801 BROADWAY, MDP 146 NASHVILLE, TN 37203	ASURY - IRS	Claim Number: 10116 Claim Date: 05/09/2023 Debtor: DESERT VIEW RECOVERY COMMUNITY, LLC Comments: ALLOWED DOCKET: 800 (07/07/2023)		
PRIORITY	Claimed:	\$8,124.84	Allowed:	\$8,124.84
UNSECURED	Claimed:	\$570.03	Allowed:	\$570.03

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

DEPARTMENT OF THE T PO BOX 7346 PHILADELPHIA, PA 1910		Claim Number: 10117 Claim Date: 05/12/2023 Debtor: MARYLAND HOUSE DETOX, LLC Comments: EXPUNGED DOCKET: 801 (07/07/2023)
PRIORITY	Claimed:	\$0.00
DEPARTMENT OF THE T PO BOX 7346 PHILADELPHIA, PA 1910		Claim Number: 10118 Claim Date: 05/12/2023 Debtor: OCEAN BREEZE DETOX, LLC Comments: EXPUNGED DOCKET: 806 (07/07/2023)
PRIORITY	Claimed:	\$0.00
DEPARTMENT OF THE T PO BOX 7346 PHILADELPHIA, PA 1910		Claim Number: 10119 Claim Date: 05/12/2023 Debtor: PALM BEACH RECOVERY, LLC Comments: EXPUNGED DOCKET: 807 (07/07/2023)
PRIORITY	Claimed:	\$0.00
DEPARTMENT OF THE T PO BOX 7346 PHILADELPHIA, PA 1910		Claim Number: 10120 Claim Date: 05/12/2023 Debtor: SUMMIT AT FLORHAM PARK, LLC Comments: EXPUNGED DOCKET: 803 (07/07/2023)
PRIORITY	Claimed:	\$0.00
DEPARTMENT OF THE T PO BOX 7346 NASHVILLE, TN 37203	REASURY - IRS	Claim Number: 10121 Claim Date: 05/12/2023 Debtor: SUMMIT BEHAVIORAL HEALTH LIMITED LIABILI LIABILITY COMPANY Comments: EXPUNGED DOCKET: 805 (07/07/2023)
PRIORITY	Claimed:	\$0.00

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

· -				
DEPARTMENT OF TH PO BOX 7346 PHILADELPHIA, PA 1		Claim Number: 10122 Claim Date: 05/12/2023 Debtor: CALIFORNIA VISTAS ADDICTION TREATMENT LLC Comments: AMENDS CLAIM #10101		
PRIORITY	Claimed:	\$0.00		
DEPARTMENT OF TH PO BOX 7346 PHILADELPHIA, PA 1		Claim Number: 10123 Claim Date: 05/12/2023 Debtor: DEFINING MOMENT RECOVERY COMMUNITY, LLC Comments: EXPUNGED DOCKET: 802 (07/07/2023)		
PRIORITY	Claimed:	\$0.00		
DEPARTMENT OF TH PO BOX 7346 PHILADELPHIA, PA 1		Claim Number: 10124 Claim Date: 05/12/2023 Debtor: DELPHI MANAGEMENT LLC Comments: EXPUNGED DOCKET: 804 (07/07/2023)		
UNSECURED	Claimed:	\$0.00		
DEPARTMENT OF TH PO BOX 7346 PHILADELPHIA, PA 1		Claim Number: 10125 Claim Date: 05/19/2023 Debtor: DEFINING MOMENT RECOVERY COMMUNITY, LLC Comments: EXPUNGED DOCKET: 802 (07/07/2023)		
PRIORITY	Claimed:	\$5,974.73 UNLIQ		
UNSECURED DEPARTMENT OF TH PO BOX 7346 PHILADELPHIA, PA 1		\$539.33 UNLIQ Claim Number: 10126 Claim Date: 05/19/2023 Debtor: DEFINING MOMENT RECOVERY COMMUNITY, LLC Comments: ALLOWED DOCKET: 802 (07/07/2023)		
PRIORITY	Claimed:	\$5,974.73	Allowed:	\$5,974.73
UNSECURED	Claimed:	\$539.33	Allowed:	\$539.33

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

DEPARTMENT OF THE TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 10127 Claim Date: 05/23/2023 Debtor: MARYLAND HOUSE DETOX, LLC Comments: ALLOWED DOCKET: 801 (07/07/2023)		
PRIORITY	Claimed:	\$25,974.58	Allowed:	\$25,974.58
UNSECURED	Claimed:	\$5,636.62	Allowed:	\$5,636.62
DEPARTMENT OF THE TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 10128 Claim Date: 05/23/2023 Debtor: CALIFORNIA ADDICTION TREATMENT CENTER LL LLC Comments: ALLOWED DOCKET: 798 (07/06/2023)		
PRIORITY	Claimed:	\$20,963.59	Allowed:	\$20,963.59
UNSECURED	Claimed:	\$6,667.81	Allowed:	\$6,667.81
DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 42 Claim Date: 04/11/2023 Debtor: SBH HAVERHILL, LLC Comments: EXPUNGED DOCKET: 832 (07/24/2023)		
PRIORITY UNSECURED	Claimed: Claimed:	\$99,023.67 UNLIQ \$6,978.66 UNLIQ		
DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 43 Claim Date: 04/11/2023 Debtor: UNION FRESH START LLC Comments: EXPUNGED DOCKET: 833 (07/24/2023)		
PRIORITY	Claimed:	\$100,850.94 UNLIQ		
UNSECURED	Claimed:	\$2,629.76 UNLIQ		
DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 44 Claim Date: 04/11/2023 Debtor: DR SUB, LLC Comments: DOCKET: 470 (04/24/2023)		
UNSECURED	Claimed:	\$100.00 UNLIQ		

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

DEPARTMENT OF TREASURY - IRS PO BOX 7346 Claim Date: 04/13/2023 Debtor: LAS OLAS RECOVERY LLC		
PRIORITY		
PRIORITY Claimed: \$12,385.77 UNSECURED Claimed: \$1,113.98 DEPARTMENT OF TREASURY - IRS Claim Number: 56 PO BOX 7346 Claim Date: 04/17/2023 PHILADELPHIA, PA 19101-7346 Claim Cate: DOCKET: 470 (04/24/2023) PRIORITY Claimed: \$100.00 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 Claim Number: 65 PHILADELPHIA, PA 19101-7346 Claim Authorise Comments: EXPUNGED DOCKET: 821 (07/14/2023) PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 Claim Number: 66 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 Claim Number: 66 Claim Date: 04/20/2023 DEPARTMENT OF TREASURY - IRS PO BOX 7346 Claim Number: 66 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 Claim Set: 04/20/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED		
UNSECURED Claimed: \$1,113.98	PHILADELPHIA, PA 19101-7346	Debtor: LAS OLAS RECOVERY LLC
UNSECURED Claimed: \$1,113.98		
UNSECURED Claimed: \$1,113.98		
UNSECURED Claimed: \$1,113.98	DDIODITY Claimed:	¢12 295 77
DEPARTMENT OF TREASURY - IRS PO BOX 7346 Claim Number: 56 Claim Number: 56 Claim Date: 04/17/2023 Debtor: DR PARENT, LLC Comments: DOCKET: 470 (04/24/2023)		
PO BOX 7346		
PRIORITY Claimed: \$100.00 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 PRIORITY Claimed: \$100.00 UNLIQ Claim Number: 65 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 PRIORITY Claimed: \$652,801.54 UNLIQ UNSECURED Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$459,333.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PO BOX 7346 PO BOX 7346 PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Number: 66 Claim Date: 04/20/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED		
Comments: DOCKET: 470 (04/24/2023) PRIORITY Claimed: \$100.00 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim date: 04/20/2023 PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED		
PRIORITY Claimed: \$100.00 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 Claim Date: 04/20/2023 Claim Number: 66 Claim Number: 66 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED	PHILADELPHIA, PA 19101-7346	
DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 PRIORITY UNSECURED Claimed: UNSECURED Claimed: PO BOX 7346 Claim Number: 65 Claim Number: 65 Claim Date: 04/20/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 821 (07/14/2023) PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED		Comments: DOCKET: 470 (04/24/2023)
DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 PRIORITY UNSECURED Claimed: UNSECURED Claimed: PO BOX 7346 Claim Number: 65 Claim Number: 65 Claim Date: 04/20/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 821 (07/14/2023) PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED		
PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 821 (07/14/2023) PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED	PRIORITY Claimed:	\$100.00 UNLIQ
PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 821 (07/14/2023) PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED	DEPARTMENT OF TREASURY - IRS	Claim Number: 65
PHILADELPHIA, PA 19101-7346 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 821 (07/14/2023) PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED		
Comments: EXPUNGED DOCKET: 821 (07/14/2023) PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED		
PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED	,	·
PRIORITY Claimed: \$682,801.54 UNLIQ UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED		
UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED		DOCKET: 021 (07/17/2023)
UNSECURED Claimed: \$35,933.92 UNLIQ DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Date: 04/20/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED	PRIORITY Claimed:	\$682,801.54 UNLIQ
DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346 Claim Number: 66 Claim Date: 04/20/2023 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED	UNSECURED Claimed:	· · ·
PO BOX 7346 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED	DEPARTMENT OF TREASURY - IRS	
PHILADELPHIA, PA 19101-7346 Debtor: BREAKTHROUGH LIVING RECOVERY COMMUNITY, LLC Comments: EXPUNGED		
Comments: EXPUNGED		· ·
	,	·
DOCKET: 730 (07/00/2023)		
		DOCKET: 790 (07/00/2023)
PRIORITY Claimed: \$12,268.52 UNLIQ	PRIORITY Claimed:	\$12,268.52 UNLIQ
DEPARTMENT OF TREASURY - IRS Claim Number: 67	DEPARTMENT OF TREASURY - IRS	Claim Number: 67
PO BOX 7346 Claim Date: 04/20/2023	PO BOX 7346	Claim Date: 04/20/2023
PHILADELPHIA, PA 19101-7346 Debtor: CALIFORNIA ADDICTION TREATMENT CENTER LL LLC	PHILADELPHIA, PA 19101-7346	
Comments: EXPUNGED		
DOCKET: 798 (07/06/2023)		
DOGNET: 730 (07/00/2023)		500KE11750 (07/00/2025)
PRIORITY Claimed: \$86,252.42 UNLIQ	PRIORITY Claimed:	\$86,252.42 UNLIQ
UNSECURED Claimed: \$6,967.81 UNLIQ	UNSECURED Claimed:	\$6,967.81 UNLIQ

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

DEPARTMENT OF TREASURY - PO BOX 7346 PHILADELPHIA, PA 19101-734	6 D	laim Number: 68 laim Date: 04/20/2023 ebtor: CALIFORNIA VISTAS ADDICTION TREATMENT LLC omments: DOCKET: 565 (05/11/2023)
UNSECURED Cla	aimed: aimed:	\$12,281.93 UNLIQ \$104.08 UNLIQ
DEPARTMENT OF TREASURY - PO BOX 7346 PHILADELPHIA, PA 19101-734	6 D C	laim Number: 69 laim Date: 04/20/2023 ebtor: DEFINING MOMENT RECOVERY COMMUNITY, LLC omments: EXPUNGED OCKET: 802 (07/07/2023)
	aimed: aimed:	\$6,174.73 UNLIQ \$539.33 UNLIQ
DEPARTMENT OF TREASURY - PO BOX 7346 PHILADELPHIA, PA 19101-734	CI 6 D CI	laim Number: 70 laim Date: 04/20/2023 ebtor: DELPHI MANAGEMENT LLC omments: EXPUNGED OCKET: 804 (07/07/2023)
UNSECURED Cla	aimed:	\$100.00 UNLIQ
DEPARTMENT OF TREASURY - PO BOX 7346 PHILADELPHIA, PA 19101-734	CI 6 D CI	laim Number: 71 laim Date: 04/20/2023 ebtor: DESERT VIEW RECOVERY COMMUNITY, LLC omments: EXPUNGED OCKET: 800 (07/07/2023)
	aimed: aimed:	\$23,512.26 UNLIQ \$570.03 UNLIQ
DEPARTMENT OF TREASURY - PO BOX 7346 PHILADELPHIA, PA 19101-734	CI 6 D CI	laim Number: 72 laim Date: 04/20/2023 ebtor: MARYLAND HOUSE DETOX, LLC comments: EXPUNGED OCKET: 801 (07/07/2023)
	aimed: aimed:	\$105,389.67 UNLIQ \$5,636.62 UNLIQ

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 73 Claim Date: 04/20/2023 Debtor: OCEAN BREEZE DETOX, LLC Comments: EXPUNGED DOCKET: 806 (07/07/2023)
PRIORITY UNSECURED	Claimed: Claimed:	\$213,564.98 UNLIQ \$6,102.08 UNLIQ
DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 74 Claim Date: 04/20/2023 Debtor: PALM BEACH RECOVERY, LLC Comments: EXPUNGED DOCKET: 807 (07/07/2023)
PRIORITY UNSECURED	Claimed: Claimed:	\$173,429.35 UNLIQ \$7,585.87 UNLIQ
DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 75 Claim Date: 04/20/2023 Debtor: SBH UNION IOP LLC Comments: EXPUNGED DOCKET: 794 (07/05/2023)
PRIORITY	Claimed:	\$29,472.40 UNLIQ
DEPARTMENT OF TO PO BOX 7346 PHILADELPHIA, PA		Claim Number: 76 Claim Date: 04/20/2023 Debtor: SUMMIT AT FLORHAM PARK, LLC Comments: EXPUNGED DOCKET: 803 (07/07/2023)
PRIORITY UNSECURED	Claimed: Claimed:	\$26,775.47 UNLIQ \$353.04 UNLIQ
DEPARTMENT OF TREASURY - IRS PO BOX 7346 PHILADELPHIA, PA 19101-7346		Claim Number: 77 Claim Date: 04/20/2023 Debtor: SUMMIT BEHAVIORAL HEALTH LIMITED LIABILI LIABILITY COMPANY Comments: EXPUNGED DOCKET: 805 (07/07/2023)
PRIORITY Claimed: UNSECURED Claimed:		\$69,591.39 UNLIQ \$445.20 UNLIQ

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Name of proof of claims where to

Claim Number: 78 **DEPARTMENT OF TREASURY - IRS** PO BOX 7346 Claim Date: 04/20/2023 PHILADELPHIA, PA 19101-7346 Debtor: SUMMIT IOP LIMITED **UNSECURED** Claimed: \$30.39 **ELECTRICAL DYNAMICS INC** Claim Number: 62 72B CONCORD ST Claim Date: 04/24/2023 NORTH READING, MA 01864 Debtor: SBH HAVERHILL, LLC Comments: EXPUNGED DOCKET: 727 (06/14/2023) **ADMINISTRATIVE** Claimed: \$3,637.01 Scheduled: \$2,320.00 **UNSECURED** Claimed: \$2,320.00 EMD REALTY GROUP LLC Claim Number: 10067 C/O KOZYAK TROPIN & THROCKMORTON LLP Claim Date: 04/13/2023 ATTN BERNICE LEE, ESQ Debtor: DEFINING MOMENT RECOVERY COMMUNITY, LLC 2525 PONCE DE LEON BLVD, 9TH FL Comments: EXPUNGED MIAMI, FL 33134 DOCKET: 849 (07/26/2023) UNSECURED \$1,749,860.38 Scheduled: Claimed: \$708,638.34 DISP EMPIRE PROFESSIONAL PHARMACY INC Claim Number: 10021 200 HOSPITAL DR, STE 107 Claim Date: 03/08/2023 GLEN BURNIE, MD 21061 Debtor: MARYLAND HOUSE DETOX, LLC Comments: ALLOWED DOCKET: 385 (04/14/2023) Claimed: \$5,410.85 Scheduled: \$4,172.34 Allowed: \$4,791.60 UNSECURED CLIENT ID 7 Claim Number: 16 ADDRESS REDACTED Claim Date: 03/03/2023 Debtor: SUMMIT AT FLORHAM PARK, LLC Comments: EXPUNGED DOCKET: 641 (05/19/2023) **UNSECURED** Claimed: \$0.00 UNDET

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

NAME ON FILE ADDRESS ON FILE		Claim Number: 52 Claim Date: 04/13/2023 Debtor: DR SUB, LLC Comments: EXPUNGED DOCKET: 525 (05/04/2023)				
UNSECURED	Claimed:	\$4,000.00				
NAME ON FILE ADDRESS ON FILE		Claim Number: 10062 Claim Date: 04/12/2023 Debtor: DR SUB, LLC Comments: EXPUNGED DOCKET: 525 (05/04/2023)				
UNSECURED	Claimed:	\$4,000.00				
NAME ON FILE ADDRESS ON FILE		Claim Number: 51 Claim Date: 04/13/2023 Debtor: DELPHI BEHAVIOR Comments: ALLOWED DOCKET: 525 (05/04/2023)	·			
UNSECURED	Claimed:	\$400,000.00			Allowed:	\$400,000.00
NAME ON FILE ADDRESS ON FILE		Claim Number: 57 Claim Date: 04/17/2023 Debtor: DELPHI BEHAVIOR Comments: EXPUNGED DOCKET: 525 (05/04/2023)				
UNSECURED	Claimed:	\$400,000.00				
FLORIDA POWER & LIGHT ATTN RRD/LFO-BKY 4200 W FLAGLER ST CORAL GABLES, FL 33134		Claim Number: 12 Claim Date: 02/27/2023 Debtor: PALM BEACH RECO	VERY, LLC			
UNSECURED	Claimed:	\$261.98	Scheduled:	\$1,932.93		

\$227.71

Allowed:

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Name of proof of claims where to

UNSECURED

Claimed:

FLORIDA POWER & LIGHT Claim Number: 14 ATTN RRD/LFO-BKY Claim Date: 03/01/2023 4200 W FLAGLER ST Debtor: OCEAN BREEZE RECOVERY, LLC CORAL GABLES, FL 33134 **UNSECURED** Claimed: \$3,458.36 FLORIDA POWER & LIGHT Claim Number: 26 ATTN RRD/LFO-BKY Claim Date: 03/21/2023 4200 W FLAGLER ST Debtor: OCEAN BREEZE RECOVERY, LLC CORAL GABLES, FL 33134 Comments: EXPUNGED DOCKET: 676 (05/26/2023) **UNSECURED** Claimed: \$3,458.36 Claim Number: 81 FRANCHISE TAX BOARD ATTN BANKRUPTCY SECTION MS A340 Claim Date: 05/03/2023 PO BOX 2952 Debtor: CALIFORNIA VISTAS ADDICTION TREATMENT LLC SACRAMENTO, CA 95812-2952 Comments: ALLOWED DOCKET: 739 (06/21/2023) **PRIORITY** Claimed: \$89.46 UNLIQ Allowed: \$89.46 UNSECURED Claimed: \$466.52 UNLIQ Allowed: \$466.52 Claim Number: 82 FRANCHISE TAX BOARD ATTN BANKRUPTCY SECTION MS A340 Claim Date: 05/03/2023 PO BOX 2952 Debtor: DR PARENT, LLC SACRAMENTO, CA 95812-2952 Comments: ALLOWED DOCKET: 739 (06/21/2023) **PRIORITY** Claimed: Allowed: \$38.52 \$1,663.73 UNLIQ FRANCHISE TAX BOARD Claim Number: 83 ATTN BANKRUPTCY SECTION MS A340 Claim Date: 05/03/2023 PO BOX 2952 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC SACRAMENTO, CA 95812-2952 Comments: ALLOWED DOCKET: 739 (06/21/2023) **PRIORITY** Claimed: \$1,290.25 UNLIQ Allowed: \$398.51

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\$227.71 UNLIQ

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Name of proof of claims where to

FRANCHISE TAX BOARD Claim Number: 84 ATTN BANKRUPTCY SECTION MS A340 Claim Date: 05/03/2023 PO BOX 2952 Debtor: DR SUB, LLC SACRAMENTO, CA 95812-2952 Comments: EXPUNGED DOCKET: 739 (06/21/2023) **PRIORITY** Claimed: \$800.00 UNLIQ Claim Number: 85 FRANCHISE TAX BOARD ATTN BANKRUPTCY SECTION MS A340 Claim Date: 05/03/2023 PO BOX 2952 Debtor: DELPHI INTERMEDIATE HEALTHCO, LLC SACRAMENTO, CA 95812-2952 Comments: EXPUNGED DOCKET: 739 (06/21/2023) **PRIORITY** Claimed: \$800.00 UNLIQ Claim Number: 86 FRANCHISE TAX BOARD ATTN BANKRUPTCY SECTION MS A340 Claim Date: 05/03/2023 PO BOX 2952 Debtor: DESERT VIEW RECOVERY COMMUNITY, LLC SACRAMENTO, CA 95812-2952 Comments: EXPUNGED DOCKET: 739 (06/21/2023) **UNSECURED** Claimed: \$0.00 UNDET FRANCHISE TAX BOARD Claim Number: 87 ATTN BANKRUPTCY SECTION MS A340 Claim Date: 05/03/2023 PO BOX 2952 Debtor: DELPHI HEALTH GROUP, LLC SACRAMENTO, CA 95812-2952 Comments: ALLOWED DOCKET: 739 (06/21/2023) **PRIORITY** Claimed: \$800.00 UNLIQ **UNSECURED** Claimed: \$25.00 UNLIQ Allowed: \$25.00 FRANCHISE TAX BOARD Claim Number: 88 ATTN BANKRUPTCY SECTION MS A340 Claim Date: 05/03/2023 PO BOX 2952 Debtor: DELPHI HEALTH BUYERCO, LLC SACRAMENTO, CA 95812-2952 Comments: EXPUNGED DOCKET: 739 (06/21/2023) **PRIORITY** Claimed: \$800.00 UNLIQ

\$5,346.71

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Name of proof of claims where to

UNSECURED

Claimed:

FRANCHISE TAX BOARD Claim Number: 89 ATTN BANKRUPTCY SECTION MS A340 Claim Date: 05/03/2023 PO BOX 2952 Debtor: CALIFORNIA ADDICTION TREATMENT CENTER LL LLC SACRAMENTO, CA 95812-2952 Comments: EXPUNGED DOCKET: 739 (06/21/2023) **UNSECURED** Claimed: \$0.00 UNDET Claim Number: 90 FRANCHISE TAX BOARD ATTN BANKRUPTCY SECTION MS A340 Claim Date: 05/03/2023 PO BOX 2952 Debtor: DBHG HOLDING COMPANY, LLC SACRAMENTO, CA 95812-2952 Comments: ALLOWED DOCKET: 739 (06/21/2023) **PRIORITY** Claimed: \$800.00 UNLIQ UNSECURED Claimed: \$4,010.01 UNLIQ Allowed: \$4,010.01 GORDON REES SCULLY MANSUKHANI LLP Claim Number: 10064 1111 BROADWAY, STE 1700 Claim Date: 04/12/2023 OAKLAND, CA 94607 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 724 (06/14/2023) UNSECURED Claimed: \$331.50 GORDON REES SCULLY MANSUKHANI LLP Claim Number: 10095 1111 BROADWAY, STE 1700 Claim Date: 04/27/2023 OAKLAND, CA 94607 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: AMENDS CLAIM #10064 **UNSECURED** Claimed: \$331.50 GREATAMERICA FINANCIAL SERVICES Claim Number: 10043 ATTN PEGGY UPTON Claim Date: 03/28/2023 PO BOX 609 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC CEDAR RAPIDS, IA 52406 Comments: ALLOWED DOCKET: 417 (04/20/2023)

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Scheduled:

\$5,346.71

\$968.71

Allowed:

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

GREATAMERICA FINANC ATTN PEGGY UPTON PO BOX 609 CEDAR RAPIDS, IA 5240		Claim Number: 10044 Claim Date: 03/28/2023 Debtor: DESERT VIEW RECOVE Comments: EXPUNGED DOCKET: 418 (04/20/2023)	RY COMMUNITY, LLO			
UNSECURED	Claimed:	\$5,346.71				
GREATAMERICA FINANC ATTN PEGGY UPTON PO BOX 609 CEDAR RAPIDS, IA 5240		Claim Number: 10045-01 Claim Date: 03/28/2023 Debtor: SBH HAVERHILL, LLC Comments: EXPUNGED DOCKET: 428 (04/21/2023)				
UNSECURED	Claimed:	\$35,381.57			Allowed:	\$35,381.57
GREATAMERICA FINANC ATTN PEGGY UPTON PO BOX 609 CEDAR RAPIDS, IA 5240		Claim Number: 10045-02 Claim Date: 03/28/2023 Debtor: SBH HAVERHILL, LLC Comments: ALLOWED DOCKET: 463 (04/24/2023)				
UNSECURED	Claimed:	\$19,002.23	Scheduled:	\$1,432.34	Allowed:	\$19,002.23
HANOVER ASSOCIATES C/O WILENTZ GOLDMAN & SPITZER PA ATTN DAVID H STEIN, ESQ 90 WOODBRIDGE CENTER DR, BOX 10 WOODBRIDGE, NJ 07095		Claim Number: 36 Claim Date: 03/31/2023 Debtor: SUMMIT BEHAVIORAL Comments: ALLOWED DOCKET: 557 (05/10/2023)	HEALTH LIMITED LIA	ABILI LIABILITY COMPANY		
ADMINISTRATIVE	Claimed:	\$1,233.97				
SECURED	Claimed:	\$36,436.00				
UNSECURED Claimed: HANOVER ASSOCIATES C/O WILENTZ GOLDMAN & SPITZER PA ATTN DAVID H STEIN, ESQ 90 WOODBRIDGE CENTER DR, BOX 10 WOODBRIDGE, NJ 07095 ADMINISTRATIVE Claimed: SECURED Claimed: UNSECURED Claimed:		\$65,569.30 Claim Number: 37 Claim Date: 03/31/2023 Debtor: SUMMIT AT FLORHAM Comments: EXPUNGED DOCKET: 558 (05/10/2023) \$1,233.97 \$36,436.00 \$65,569.30	Scheduled: PARK, LLC	\$1,233.97	Allowed:	\$103,239.27

Name of proof of claims where to Case 23-10945-PDR Doc 868 Filed 08/03/23 Page 29 of 53

Date: 08/01/2023

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

HARMONY HILLS BEHAVIORAL HEALTH LLC C/O KOZYAK TROPIN & THROCKMORTON LLP

ATTN BERNICE LEE, ESQ

2525 PONCE DE LEON BLVD, 9TH FL

MIAMI, FL 33134

Claim Number: 10085 Claim Date: 04/17/2023

Debtor: PALM BEACH RECOVERY, LLC Comments: DOCKET: 469 (04/24/2023)

UNSECURED Claimed: \$556,392.00

CLIENT ID 8 Claim Number: 10036 ADDRESS REDACTED Claim Date: 03/20/2023

Debtor: SUMMIT AT FLORHAM PARK, LLC

Comments: EXPUNGED DOCKET: 639 (05/19/2023)

UNSECURED Claimed: \$0.00 UNDET

CLIENT ID 3 Claim Number: 10009 ADDRESS REDACTED Claim Date: 02/22/2023

Debtor: OCEAN BREEZE DETOX, LLC

Comments: EXPUNGED DOCKET: 682 (05/26/2023)

UNSECURED Claimed: \$52,000.00

CLIENT ID 16 Claim Number: 10061
ADDRESS ON FILE Claim Date: 04/12/2023

Debtor: MARYLAND HOUSE DETOX, LLC

UNSECURED Claimed: \$5,000.00

INFINITY BEHAVIORAL HEALTH SERVICES LLC

C/O POLSINELLI PC ATTN MARK JOACHIM 1401 EYE ST NW, STE 800 WASHINGTON, DC 20005 Claim Number: 10023 Claim Date: 03/09/2023

Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC

UNSECURED Claimed: \$446,118.45 Scheduled: \$417,702.28 DISP

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Name of proof of claims where to

Claim Number: 10068 IRONSHORE SPECIALTY INSURANCE COMPANY C/O LIBERTY MUTUAL INSURANCE Claim Date: 04/13/2023 ATTN J LAWSON Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC 100 LIBERTY WAY Comments: EXPUNGED **DOVER, NH 03820** DOCKET: 705 (06/07/2023) **UNSECURED** Claimed: \$0.00 UNDET Claim Number: 55 CLIENT ID 19 ADDRESS ON FILE Claim Date: 04/17/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 703 (06/06/2023) **UNSECURED** Claimed: \$8,000.00 JEFFERSON CAPITAL SYSTEMS LLC Claim Number: 45 PO BOX 7999 Claim Date: 04/11/2023 SAINT CLOUD, MN 56302-9617 Debtor: ROGERS LEARNING, LLC Comments: EXPUNGED DOCKET: 702 (06/06/2023) UNSECURED Claimed: \$400.00 JOHN'S SEWER Claim Number: 10008 4 BREED AVE Claim Date: 02/22/2023 **WOBURN, MA 01801** Debtor: 61 BROWN STREET HOLDINGS, LLC Comments: ALLOWED DOCKET: 728 (06/14/2023) **ADMINISTRATIVE** Claimed: \$495.00 **UNSECURED** Scheduled: \$495.00 Allowed: \$495.00 JPMORGAN CHASE BANK NA Claim Number: 19 S/B/M/T CHASE BANK USA NA Claim Date: 03/06/2023 C/O NATIONAL BANKRUPTCY SERVICES LLC Debtor: CALIFORNIA ADDICTION TREATMENT CENTER LL LLC PO BOX 9013 Comments: EXPUNGED ADDISON, TX 75001 DOCKET: 610 (05/18/2023) **UNSECURED** Claimed: \$21,564.51

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Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Claim Number: 47 JPMORGAN CHASE BANK NA S/B/M/T CHASE BANK USA NA Claim Date: 04/13/2023

Debtor: CALIFORNIA ADDICTION TREATMENT CENTER LL LLC

Date: 08/01/2023

PO BOX 9013 Comments: EXPUNGED ADDISON, TX 75001 DOCKET: 715 (06/08/2023)

UNSECURED Claimed: \$21,531.66

C/O NATIONAL BANKRUPTCY SERVICES LLC

Claim Number: 10089 **K&L GATES LLP** ATTN JASON SEKERAK Claim Date: 04/17/2023

210 SIXTH AVE Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC

PITTSBURGH, PA 15222

UNSECURED Claimed: \$25,577.50 Scheduled: \$25,577.50

Claim Number: 10037 LANCASTER, WAYESHA ADDRESS ON FILE Claim Date: 03/21/2023

Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC

Comments: EXPUNGED DOCKET: 643 (05/19/2023)

UNSECURED Claimed: \$2,184.00

LIFE INSURANCE COMPANY OF NORTH AMERICA Claim Number: 49 SUBSIDIARY OF NEW YORK LIFE INSURANCE CO Claim Date: 04/13/2023

ATTN LISA DURRENBERGER, SR SPECIALIST Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC 51 MADISON AVE, 10TH FL Comments: EXPUNGED

NEW YORK CITY, NY 10010 DOCKET: 705 (06/07/2023)

PRIORITY Claimed: \$5,025.39 **UNSECURED** Claimed: \$1,054.46

LOCHNESS MEDICAL SUPPLIES INC Claim Number: 10063 2775 BROADWAY, STE 100 Claim Date: 04/12/2023

BUFFALO, NY 14227 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC

UNSECURED Claimed: \$3,305.45 Scheduled: \$3,305.45

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Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Claim Number: 38 MARLIN LEASING CORP/PEAC SOLUTIONS 300 FELLOWSHIP RD Claim Date: 04/06/2023 MOUNT LAUREL, NJ 08054 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 705 (06/07/2023) **UNSECURED** Claimed: \$88,489.36 MASSACHUSETTS DEPARTMENT OF REVENUE Claim Number: 10093 ATTN BANKRUPTCY UNIT Claim Date: 04/24/2023 PO BOX 7090 Debtor: DR PARENT, LLC BOSTON, MA 02204-7090 Comments: ALLOWED DOCKET: 822 (07/14/2023) **PRIORITY** Claimed: \$14,693.37 UNLIQ Allowed: \$149.37 **UNSECURED** Claimed: \$412.13 UNLIQ Allowed: \$412.13 MASSACHUSETTS DEPARTMENT OF REVENUE Claim Number: 10094 ATTN BANKRUPTCY UNIT Claim Date: 04/24/2023 PO BOX 7090 Debtor: SBH HAVERHILL, LLC BOSTON, MA 02204-7090 Comments: WITHDRAWN DOCKET: 659 (05/22/2023) **ADMINISTRATIVE** Claimed: \$7,096.77 Claim Number: 10091 MASSACHUSETTS ELECTRIC COMPANY C/O NATIONAL GRID Claim Date: 04/18/2023 300 ERIE BLVD W Debtor: SBH HAVERHILL, LLC SYRACUSE, NY 13202 Comments: EXPUNGED DOCKET: 704 (06/06/2023) **UNSECURED** Claimed: \$27,409.20 MAXIM HEALTHCARE STAFFING SERVICES INC Claim Number: 10074 C/O STINSON LLP Claim Date: 04/14/2023 ATTN TRACEY M OHM Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC 1775 PENNSYLVANIA AVE NW, STE 800 WASHINGTON, DC 20006 **UNSECURED** Claimed: \$23,817.80

Date: 08/01/2023

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

CLIENT ID 20 ADDRESS ON FILE		Claim Number: 91 Claim Date: 05/08/2023 Debtor: DELPHI BEHAVIOR/ Comments: EXPUNGED DOCKET: 738 (06/21/2023)	·			
UNSECURED	Claimed:	\$20,000.00				
MCDERMOTT WILL & E 444 W LAKE ST, STE 40 CHICAGO, IL 60606		Claim Number: 48 Claim Date: 04/13/2023 Debtor: DELPHI BEHAVIOR/ Comments: ALLOWED DOCKET: 508 (04/27/2023)	,			
UNSECURED	Claimed:	\$689,360.53	Scheduled:	\$614,941.77	Allowed:	\$689,360.53
CLIENT ID 13 ADDRESS REDACTED		Claim Number: 15 Claim Date: 03/02/2023 Debtor: DELPHI BEHAVIOR/ Comments: EXPUNGED DOCKET: 640 (05/19/2023)	,			
UNSECURED	Claimed:	\$7,850.00				
MCKESSON MEDICAL-SURGICAL INC 6651 GATE PKWY JACKSONVILLE, FL 32256		Claim Number: 10048 Claim Date: 03/30/2023 Debtor: DELPHI BEHAVIOR/ Comments: ALLOWED DOCKET: 406 (04/19/2023)	,			
UNSECURED	Claimed:	\$4,776.22	Scheduled:	\$4,082.69	Allowed:	\$4,726.90
MCKESSON MEDICAL-SURGICAL INC 6651 GATE PKWY JACKSONVILLE, FL 32256		Claim Number: 10049 Claim Date: 03/30/2023 Debtor: SBH HAVERHILL, LI Comments: ALLOWED DOCKET: 406 (04/19/2023)				
UNSECURED	Claimed:	\$1,676.56	Scheduled:	\$3,737.05	Allowed:	\$1,661.83

Name of proof of claims where to Case 23-10945-PDR Doc 868 Filed 08/03/23 Page 34 of 53

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

MCKESSON MEDICAL-SURGICAL INC
6651 GATE PKWY
Claim Number: 10050
Claim Date: 03/30/2023

JACKSONVILLE, FL 32256 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC

ADMINISTRATIVE Claimed: \$1,874.57

UNSECURED Scheduled: \$1,063.09

MCKESSON MEDICAL-SURGICAL INC
6651 GATE PKWY
Claim Date: 03/30/2023
JACKSONVILLE, FL 32256
Debtor: SBH HAVERHILL, LLC

ADMINISTRATIVE Claimed: \$2,089.95

UNSECURED Scheduled: \$1,406.37

CLIENT ID 22 Claim Number: 10129
ADDRESS ON FILE Claim Date: 05/30/2023

Debtor: SUMMIT BEHAVIORAL HEALTH LIMITED LIABILI LIABILITY COMPANY

Date: 08/01/2023

Comments: DOCKET: 749 (06/22/2023)

UNSECURED Claimed: \$0.00 UNDET

NEW YORK STATE DEPARTMENT OF LABOR
STATE CAMPUS BLDG 12, RM 256

Claim Number: 28
Claim Date: 03/21/2023

ALBANY, NY 12240 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC

PRIORITY Claimed: \$605.34

Claimed:

UNSECURED

NORTHERN BUSINESS MACHINES INC

24 TERRY AVE

BURLINGTON, MA 01803

Claim Number: 10086

Claim Date: 04/17/2023

Debtor: SBH HAVERHILL, LLC

\$230.41

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Scheduled:

\$330.78

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

UNSECURED

Claimed:

\$5,000.00

NWI HAVERHILL HOSPITAL LP Claim Number: 50 C/O MELTZER PURTILL & STELLE LLC Claim Date: 02/13/2023 ATTN TIMOTHY W BRINK Debtor: DELPHI INTERMEDIATE HEALTHCO, LLC 125 S WACKER DR, STE 2900 Comments: EXPUNGED CHICAGO, IL 60606 DOCKET: 753 (06/27/2023) **UNSECURED** Claimed: \$0.00 UNDET Scheduled: \$0.00 UNLIQ NWI HAVERHILL HOSPITAL LP Claim Number: 10072 C/O MELTZER PURTILL & STELLE LLC Claim Date: 04/14/2023 ATTN TIMOTHY W BRINK Debtor: SBH HAVERHILL, LLC 125 S WACKER DR, STE 2900 Comments: EXPUNGED CHICAGO, IL 60606 DOCKET: 753 (06/27/2023) **UNSECURED** Claimed: \$0.00 UNDET Scheduled: \$16,517.62 NY STATE DEPT OF TAXATION AND FINANCE Claim Number: 27 ATTN BANKRUPTCY SECTION Claim Date: 03/21/2023 PO BOX 5300 Debtor: DR SUB, LLC ALBANY, NY 12205-0300 **PRIORITY** Claimed: \$226.37 Claimed: \$2,000.00 UNSECURED NYS DEPARTMENT OF LABOR Claim Number: 20 ATTN UNEMPLOYMENT INSURANCE DIVISION Claim Date: 03/13/2023 GOVERNOR W AVERELL HARRIMAN Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC STATE OFFICE BLDG CAMPUS BLDG 12, RM 256 Comments: EXPUNGED ALBANY, NY 12240 DOCKET: 745 (06/22/2023) **PRIORITY** Claimed: \$605.34 CLIENT ID 5 Claim Number: 10046 ADDRESS REDACTED Claim Date: 03/28/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 663 (05/23/2023)

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

CLIENT ID 5 ADDRESS ON FILE		Claim Number: 10055 Claim Date: 04/03/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: ALLOWED DOCKET: 663 (05/23/2023)		
UNSECURED	Claimed:	\$4,000.00	Allowed:	\$3,000.00
CLIENT ID 5 ADDRESS REDACTED		Claim Number: 2 Claim Date: 02/27/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 663 (05/23/2023)		
UNSECURED	Claimed:	\$0.00 UNDET		
ODP BUSINESS SOLUTION ATTN BANKRUPTCY PRO 6600 N MILITARY TRL BOCA RATON, FL 33496	OCESSING	Claim Number: 10000 Claim Date: 02/10/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC		
ADMINISTRATIVE	Claimed:	\$2,164.06		
UNSECURED	Claimed:	\$1,425.38		
PALM BEACH COUNTY T ATTN LEGAL SERVICES PO BOX 3715 WEST PALM BEACH, FL		Claim Number: 10038 Claim Date: 03/21/2023 Debtor: PALM BEACH RECOVERY, LLC Comments: WITHDRAWN DOCKET: 506 (04/26/2023)		
SECURED	Claimed:	\$135,567.58		
PEREZ, ANTHONY ADDRESS ON FILE		Claim Number: 10058 Claim Date: 04/10/2023 Debtor: SBH HAVERHILL, LLC Comments: EXPUNGED DOCKET: 710 (06/07/2023)		
PRIORITY	Claimed:	\$0.00		
SECURED	Claimed:	\$3,500.00		

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

PRANGE, VINCENT M		Claim Number: 10071				
ADDRESS ON FILE		Claim Date: 04/14/2023				
		Debtor: PALM BEACH RECOVE	RY, LLC			
		Comments: ALLOWED	•			
		DOCKET: 736 (06/21/2023)				
PRIORITY	Claimed:	\$1,200.00				
UNSECURED					Allowed:	\$1,200.00
CLIENT ID 2		Claim Number: 10006				
ADDRESS REDACTED		Claim Date: 02/19/2023				
		Debtor: DELPHI BEHAVIORAL	HEALTH GROUP, LLC			
		Comments: EXPUNGED				
		DOCKET: 681 (05/26/2023)				
UNSECURED	Claimed:	\$0.00 UNDET				
CLIENT ID 2		Claim Number: 10130				
ADDRESS ON FILE		Claim Date: 05/30/2023				
		Debtor: DELPHI BEHAVIORAL	HEALTH GROUP, LLC			
		Comments: DOCKET: 746 (06/	/22/2023)			
		AMENDS CLAIM #10006				
UNSECURED	Claimed:	\$10,000.00				
PRINTING FULFILLMENT 8	& MAILING GROUP LLC	Claim Number: 10010				
77 OSWEGO TRL		Claim Date: 02/27/2023				
MEDFORD LAKES, NJ 0805	55	Debtor: DELPHI BEHAVIORAL	HEALTH GROUP, LLC			
		Comments: ALLOWED				
		DOCKET: 399 (04/18/2023)				
UNSECURED	Claimed:	\$802.90			Allowed:	\$553.40
PROTECTIVE MEASURES		Claim Number: 10007				
285 US HWY 46		Claim Date: 02/21/2023				
DOVER, NJ 07801		Debtor: DELPHI BEHAVIORAL	HEALTH GROUP, LLC			
		Comments: ALLOWED				
		DOCKET: 737 (06/21/2023)				
PRIORITY	Claimed:	\$110.87				
UNSECURED	Claimed:	\$851.90	Scheduled:	\$1,986.37	Allowed:	\$962.77

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Claim Number: 10011

Name of proof of claims where to

PURELINQ LLC 3769 OLD LIGHTHOUSE CIR Claim Date: 02/28/2023 WELLINGTON, FL 33414 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: ALLOWED DOCKET: 402 (04/19/2023) **UNSECURED** Claimed: \$60,000.00 Scheduled: \$35,357.14 Allowed: \$50,000.00 OUAKERBRIDGE INVESTMENT GROUP LLC Claim Number: 10070 ATTN JOHN SIMONE JR Claim Date: 04/13/2023 100 FEDERAL CITY RD, STE C101 Debtor: SUMMIT BEHAVIORAL HEALTH LIMITED LIABILI LIABILITY COMPANY LAWRENCEVILLE, NJ 08648 Comments: Claim Out of Balance Claim out of balance **SECURED** Claimed: \$3,000.00 **UNSECURED** Scheduled: \$1,752.82 **TOTAL** Claimed: \$876.41 RAKER, IRMA S Claim Number: 3 ADDRESS ON FILE Claim Date: 02/27/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 642 (05/19/2023) **UNSECURED** Claimed: \$1,950.00 RHODE ISLAND DIVISION OF TAXATION Claim Number: 10137 ONE CAPITOL HILL Claim Date: 07/26/2023 PROVIDENCE, RI 02908 Debtor: DR SUB, LLC **PRIORITY** Claimed: \$883.57 \$36.00 **UNSECURED** Claimed: RHODE ISLAND DIVISION OF TAXATION Claim Number: 10138 ONE CAPITOL HILL Claim Date: 07/26/2023 PROVIDENCE, RI 02908 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC **PRIORITY** Claimed: \$2,682.03 \$248.00 **UNSECURED** Claimed:

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Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

ROLLOVER REP 302 WASHINGTON ST, # SAN DIEGO, CA 92103	±150-7463	Claim Number: 79 Claim Date: 05/02/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 726 (06/14/2023)
UNSECURED	Claimed:	\$0.00 UNDET Scheduled: \$4,800.00
CLIENT ID 10 ADDRESS REDACTED		Claim Number: 29 Claim Date: 03/27/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 677 (05/26/2023)
PRIORITY	Claimed:	\$5,000.00
SALESFORCE INC C/O BIALSON BERGEN & ATTN LAWRENCE SCHW, 830 MENLO AVE, STE 20 MENLO PARK, CA 94025	AB; GAYE HECK	Claim Number: 10053 Claim Date: 04/02/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: WITHDRAWN DOCKET: 560 (05/10/2023)
ADMINISTRATIVE	Claimed:	\$265,374.88
SALESFORCE INC C/O BIALSON BERGEN & ATTN LAWRENCE SCHW, 830 MENLO AVE, STE 20 MENLO PARK, CA 94025	AB; GAYE HECK	Claim Number: 10054 Claim Date: 04/02/2023 Debtor: SUMMIT BEHAVIORAL HEALTH LIMITED LIABILI LIABILITY COMPANY Comments: WITHDRAWN DOCKET: 559 (05/10/2023)
ADMINISTRATIVE	Claimed:	\$194,672.26
SENTIENT SOLUTIONS L T/A SCOREBUDDY ATTN ELIZABETH KAVAN 151 THOMAS ST DUBLIN, D08 PY5E, IRELAND		Claim Number: 46 Claim Date: 04/12/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC
UNSECURED	Claimed:	\$1,485.90

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

SIEGEL, MAGDALANA ADDRESS ON FILE		Claim Number: 5 Claim Date: 02/27/2023 Debtor: SBH HAVERHILL, L Comments: EXPUNGED DOCKET: 643 (05/19/2023				
UNSECURED	Claimed:	\$500.00				
SOCALGAS PO BOX 30337 LOS ANGELES, CA 90030)	Claim Number: 30 Claim Date: 03/28/2023 Debtor: DELPHI BEHAVIOR Comments: ALLOWED DOCKET: 678 (05/26/2023	·			
UNSECURED	Claimed:	\$1,902.70	Scheduled:	\$850.40	Allowed:	\$1,004.30
SPECTRUM 1600 DUBLIN RD COLUMBUS, OH 43215		Claim Number: 10015 Claim Date: 03/03/2023 Debtor: DELPHI HEALTH G Comments: ALLOWED DOCKET: 414 (04/20/2023	•			
UNSECURED	Claimed:	\$413.93	Scheduled:	\$603.83	Allowed:	\$410.40
SPECTRUM 1600 DUBLIN RD COLUMBUS, OH 43215		Claim Number: 10016 Claim Date: 03/03/2023 Debtor: DELPHI BEHAVIOR Comments: EXPUNGED DOCKET: 415 (04/20/2023	·			
UNSECURED	Claimed:	\$1,078.13				
SPECTRUM 1600 DUBLIN RD COLUMBUS, OH 43215		Claim Number: 10017 Claim Date: 03/03/2023 Debtor: DELPHI BEHAVIOR Comments: ALLOWED DOCKET: 416 (04/20/2023	·			
UNSECURED	Claimed:	\$1,078.13			Allowed:	\$648.88

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

STATE OF FLORIDA - DEPARTMENT OF REVENUE

ATTN FREDERICK F RUDZIK, ESQ PO BOX 6668

TALLAHASSEE, FL 32314-6668

Claim Number: 13 Claim Date: 02/23/2023

Debtor: LAS OLAS RECOVERY LLC Comments: POSSIBLY AMENDED BY 107

UNSECURED Claimed:

Claimed:

STATE OF FLORIDA - DEPARTMENT OF REVENUE C/O FREDERICK F RUDZIK, ESQ

PO BOX 6668

TALLAHASSEE, FL 32314-6668

\$300.00 Claim Number: 107 Claim Date: 06/20/2023

\$469.03

Debtor: LAS OLAS RECOVERY LLC

\$0.00 UNDET

Comments:

AMENDS CLAIM #13

PRIORITY Claimed:

STATE OF NEW JERSEY - DIV OF TAXATION

PO BOX 245

PRIORITY

TRENTON, NJ 08695

Claim Number: 93

Claim Date: 05/24/2023

Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC

Comments: POSSIBLY AMENDED BY 111

PRIORITY Claimed: \$2,500.00 UNLIQ

STATE OF NEW JERSEY - DIV OF TAXATION PO BOX 245

TRENTON, NJ 08695

Claim Number: 94 Claim Date: 05/24/2023 Debtor: DR PARENT, LLC

PRIORITY Claimed: \$4,000.00

STATE OF NEW JERSEY - DIV OF TAXATION PO BOX 245

TRENTON, NJ 08695

Claim Number: 95 Claim Date: 05/24/2023

Debtor: DR SUB, LLC

PRIORITY Claimed: \$2,000.00 UNLIQ

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Name of proof of claims where to

STATE OF NEW JERSEY - DIV OF TAXATION Claim Number: 96 PO BOX 245 Claim Date: 05/24/2023 TRENTON, NJ 08695 Debtor: LAS OLAS RECOVERY LLC Comments: POSSIBLY AMENDED BY 110 **PRIORITY** Claimed: \$12,000.00 UNLIQ STATE OF NEW JERSEY - DIV OF TAXATION Claim Number: 97 PO BOX 245 Claim Date: 05/24/2023 TRENTON, NJ 08695 Debtor: QBR DIAGNOSTICS, LLC Comments: POSSIBLY AMENDED BY 113 **PRIORITY** Claimed: \$804,000.00 UNLIQ STATE OF NEW JERSEY - DIV OF TAXATION Claim Number: 98 PO BOX 245 Claim Date: 05/24/2023 TRENTON, NJ 08695 Debtor: SBH UNION IOP LLC Comments: POSSIBLY AMENDED BY 116 PRIORITY Claimed: \$412,000.00 UNLIQ

STATE OF NEW JERSEY - DIV OF TAXATION Claim Number: 99

PO BOX 245
TRENTON, NJ 08695
Claim Date: 05/24/2023
Debtor: SUMMIT AT FLO

Debtor: SUMMIT AT FLORHAM PARK, LLC Comments: POSSIBLY AMENDED BY 115

PRIORITY Claimed: \$724,000.00 UNLIQ

STATE OF NEW JERSEY - DIV OF TAXATION Claim Number: 100

PO BOX 245 Claim Date: 05/24/2023

TRENTON, NJ 08695 Debtor: SUMMIT BEHAVIORAL HEALTH LIMITED LIABILI LIABILITY COMPANY

Comments: POSSIBLY AMENDED BY 112

PRIORITY Claimed: \$84,000.00 UNLIQ

Name of proof of claims where to

PRIORITY

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Claimed:

STATE OF NEW JERSEY - DIV OF TAXATION Claim Number: 101 PO BOX 245 Claim Date: 05/24/2023 TRENTON, NJ 08695 Debtor: UNION FRESH START LLC Comments: POSSIBLY AMENDED BY 114 **PRIORITY** Claimed: \$1,204,000.00 UNLIQ STATE OF NEW JERSEY - DIV OF TAXATION Claim Number: 110 PO BOX 245 Claim Date: 06/29/2023 TRENTON, NJ 08695 Debtor: LAS OLAS RECOVERY LLC Comments: AMENDS CLAIM #96 **PRIORITY** Claimed: \$0.00 STATE OF NEW JERSEY - DIV OF TAXATION Claim Number: 111 PO BOX 245 Claim Date: 06/29/2023 TRENTON, NJ 08695 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: AMENDS CLAIM #93 \$0.00 PRIORITY Claimed: STATE OF NEW JERSEY - DIV OF TAXATION Claim Number: 112 PO BOX 245 Claim Date: 06/29/2023 TRENTON, NJ 08695 Debtor: SUMMIT BEHAVIORAL HEALTH LIMITED LIABILI LIABILITY COMPANY Comments: AMENDS CLAIM #100 PRIORITY Claimed: \$0.00 STATE OF NEW JERSEY - DIV OF TAXATION Claim Number: 113 PO BOX 245 Claim Date: 06/29/2023 TRENTON, NJ 08695 Debtor: QBR DIAGNOSTICS, LLC Comments: AMENDS CLAIM #97

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\$0.00

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Claim Number: 114 Claim Date: 06/29/2023 Debtor: UNION FRESH START LLC Comments: AMENDS CLAIM #101		
\$0.00		
Claim Number: 115 Claim Date: 06/29/2023 Debtor: SUMMIT AT FLORHAM PARK, LLC Comments: AMENDS CLAIM #99		
\$0.00		
Claim Number: 116 Claim Date: 06/29/2023 Debtor: SBH UNION IOP LLC Comments: AMENDS CLAIM #98		
\$0.00		
Claim Number: 117 Claim Date: 07/13/2023 Debtor: SBH UNION IOP LLC Comments: POSSIBLE DUPLICATE OF 116 AMENDS CLAIM #98		
\$0.00		
Claim Number: 10039 Claim Date: 03/21/2023 Debtor: UNION FRESH START LLC Comments: ALLOWED DOCKET: 405 (04/19/2023)		
\$1,330.00	Allowed:	\$790.00
	Claim Date: 06/29/2023 Debtor: UNION FRESH START LLC Comments: AMENDS CLAIM #101 \$0.00 Claim Number: 115 Claim Date: 06/29/2023 Debtor: SUMMIT AT FLORHAM PARK, LLC Comments: AMENDS CLAIM #99 \$0.00 Claim Number: 116 Claim Date: 06/29/2023 Debtor: SBH UNION IOP LLC Comments: AMENDS CLAIM #98 \$0.00 Claim Number: 117 Claim Date: 07/13/2023 Debtor: SBH UNION IOP LLC Comments: POSSIBLE DUPLICATE OF 116 AMENDS CLAIM #98 \$0.00 Claim Number: 10039 Claim Date: 03/21/2023 Debtor: UNION FRESH START LLC Comments: ALLOWED DOCKET: 405 (04/19/2023)	Claim Date: 06/29/2023 Debtor: UNION FRESH START LLC Comments: AMENDS CLAIM #101 \$0.00 Claim Number: 115 Claim Date: 06/29/2023 Debtor: SUMMIT AT FLORHAM PARK, LLC Comments: AMENDS CLAIM #99 \$0.00 Claim Number: 116 Claim Date: 06/29/2023 Debtor: SBH UNION IOP LLC Comments: AMENDS CLAIM #98 \$0.00 Claim Number: 117 Claim Date: 07/13/2023 Debtor: SBH UNION IOP LLC Comments: AMENDS CLAIM #98 \$0.00 Claim Number: 117 Claim Date: 07/13/2023 Debtor: SBH UNION IOP LLC Comments: POSSIBLE DUPLICATE OF 116 AMENDS CLAIM #98 \$0.00 Claim Number: 10039 Claim Date: 03/21/2023 Debtor: UNION FRESH START LLC Comments: ALLOWED DOCKET: 405 (04/19/2023)

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

STUP, DAVID ADDRESS ON FILE		Claim Number: 59 Claim Date: 04/18/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 723 (06/14/2023)			
UNSECURED	Claimed:	\$250,000.00			
STUP, DAVID ADDRESS ON FILE		Claim Number: 61 Claim Date: 04/21/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 723 (06/14/2023)			
UNSECURED	Claimed:	\$250,000.00			
STUP, DAVID ADDRESS ON FILE		Claim Number: 64 Claim Date: 04/20/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 723 (06/14/2023)			
UNSECURED	Claimed:	\$250,000.00			
STUP, DAVID ADDRESS ON FILE		Claim Number: 10088 Claim Date: 04/17/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 711 (06/07/2023)			
UNSECURED	Claimed:	\$250,000.00			
SUBURBAN PROPANE 240 RTE 10 W WHIPPANY, NJ 07981		Claim Number: 10022 Claim Date: 03/09/2023 Debtor: MARYLAND HOUSE DETOX, LLC Comments: ALLOWED DOCKET: 729 (06/14/2023)			
ADMINISTRATIVE UNSECURED	Claimed:	\$6,319.89 Scheduled:	\$6,319.89	Allowed:	\$6,319.89

Name of proof of claims where to Case 23-10945-PDR Doc 868 Filed 08/03/23 Page 46 of 53

\$63,576.95

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

MOBILE, AL 36609

Claimed:

UNSECURED

SYSCO METRO NEW YORK LLC Claim Number: 10056 C/O JACK LUNDSTEDT Claim Date: 04/05/2023 655 BUTTERCUP TRCE Debtor: UNION FRESH START LLC JOHNS CREEK, GA 30022 Comments: ALLOWED DOCKET: 706 (06/07/2023) **UNSECURED** Claimed: \$5,353.77 Scheduled: \$2,605.08 Allowed: \$2,605.08 CLIENT ID 11 Claim Number: 35 ADDRESS REDACTED Claim Date: 03/30/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: EXPUNGED DOCKET: 679 (05/26/2023) **UNSECURED** Claimed: \$0.00 TRUPATH HOLDINGS LLC Claim Number: 10096 C/O THOMAS G ZEICHMAN, ESQ Claim Date: 04/28/2023 2385 EXECUTIVE CENTER DR, STE 250 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC BOCA RATON, FL 33431 UNSECURED Claimed: \$710,000.00 ULINE Claim Number: 18 12575 ULINE DR Claim Date: 03/06/2023 PLEASANT PRAIRIE, WI 53158 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC UNSECURED Claimed: \$357.13 Scheduled: \$357.13 Claim Number: 10075 UNIDINE CORPORATION C/O COMPASS GROUP Claim Date: 04/14/2023 ATTN JOHN HANEY Debtor: PALM BEACH RECOVERY, LLC 4721 MORRISON DR, STE 300

Date: 08/01/2023

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Scheduled:

\$50,785.68

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Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

UNIDINE CORPORATION
C/O COMPASS GROUP
Claim Date: 04/14/2023
ATTN JOHN HANEY
Claim Date: 04/14/2023
Debtor: CALIFORNIA AD

Debtor: CALIFORNIA ADDICTION TREATMENT CENTER LL LLC

Date: 08/01/2023

4721 MORRISON DR, STE 300 MOBILE, AL 36609

<u>UNSECURED</u> Claimed: \$54,329.48 Scheduled: \$40,686.23

UNIDINE CORPORATION Claim Number: 10077 C/O COMPASS GROUP Claim Date: 04/14/2023

ATTN JOHN L HANEY Debtor: CALIFORNIA VISTAS ADDICTION TREATMENT LLC

4721 MORRISON DR, STE 300 MOBILE, AL 36609

UNSECURED Claimed: \$6,492.57 Scheduled: \$7,400.00

UNIDINE CORPORATION Claim Number: 10079 C/O COMPASS GROUP Claim Date: 04/14/2023

ATTN JOHN L HANEY Debtor: MARYLAND HOUSE DETOX, LLC

4721 MORRISON DR, STE 300 MOBILE, AL 36609

UNSECURED Claimed: \$67,369.23 Scheduled: \$55,726.23

UNIDINE CORPORATION Claim Number: 10080
C/O COMPASS GROUP Claim Date: 04/14/2023

ATTN JOHN HANEY Debtor: OCEAN BREEZE DETOX, LLC

4721 MORRISON DR, STE 300 MOBILE, AL 36609

UNSECURED Claimed: \$53,051,04 Scheduled: \$43,325,80

UNSECURED Claimed: \$53,051.04 Scheduled: \$43,325.80 UNIDINE CORPORATION Claim Number: 10081

C/O COMPASS GROUP
Claim Date: 04/14/2023
ATTN JOHN HANEY
Debtor: SBH HAVERHILL, LLC
4721 MORRISON DR, STE 300
Claim Date: 04/14/2023
Comments: ALLOWED

MOBILE, AL 36609 Comments: ALLOWED DOCKET: 733 (06/20/2023)

UNSECURED Claimed: \$120,645.64 Scheduled: \$84,095.08 Allowed: \$110,316.33

\$3,000.00

Allowed:

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Claimed:

\$14,426.89

UNSECURED

Claim Number: 10082 UNIDINE CORPORATION C/O COMPASS GROUP Claim Date: 04/14/2023 ATTN JOHN HANEY Debtor: UNION FRESH START LLC 4721 MORRISON DR, STE 300 Comments: ALLOWED MOBILE, AL 36609 DOCKET: 733 (06/20/2023) **UNSECURED** Claimed: \$71,521.59 Scheduled: \$83,286.51 Allowed: \$65,339.60 UNITEDHEALTHCARE INSURANCE COMPANY Claim Number: 6 ATTN CDM/BANKRUPTCY Claim Date: 02/27/2023 185 ASYLUM ST, #03B Debtor: CALIFORNIA ADDICTION TREATMENT CENTER LL LLC HARTFORD, CT 06103 Comments: ALLOWED DOCKET: 504 (04/26/2023) **UNSECURED** Claimed: \$542.66 Allowed: \$500.00 UNITEDHEALTHCARE INSURANCE COMPANY Claim Number: 7 ATTN CDM/BANKRUPTCY Claim Date: 02/27/2023 185 ASYLUM ST, #03B Debtor: CALIFORNIA VISTAS ADDICTION TREATMENT LLC HARTFORD, CT 06103 Comments: ALLOWED DOCKET: 504 (04/26/2023) **UNSECURED** Claimed: \$18,348.82 Allowed: \$14,000.00 UNITEDHEALTHCARE INSURANCE COMPANY Claim Number: 8 ATTN CDM/BANKRUPTCY Claim Date: 02/27/2023 185 ASYLUM ST, #03B Debtor: LAS OLAS RECOVERY LLC HARTFORD, CT 06103 Comments: ALLOWED DOCKET: 504 (04/26/2023) UNSECURED Claimed: \$4,702.49 Allowed: \$2,000.00 UNITEDHEALTHCARE INSURANCE COMPANY Claim Number: 9 ATTN CDM/BANKRUPTCY Claim Date: 02/27/2023 185 ASYLUM ST, #03B Debtor: MARYLAND HOUSE DETOX, LLC HARTFORD, CT 06103 Comments: ALLOWED DOCKET: 504 (04/26/2023)

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY Claim Date: 02/27/2023 185 ASYLUM ST, #03B Debtor: OCEAN BREEZE DETOX, LLC Comments: ALLOWED DOCKET: 504 (04/26/2023) UNSECURED Claimed: UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY Claim Date: 02/27/2023 185 ASYLUM ST, #03B Debtor: OCEAN BREEZE RECOVERY, LLC	\$4,000.00
UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY Claim Date: 02/27/2023 185 ASYLUM ST, #03B Debtor: OCEAN BREEZE RECOVERY, LLC	\$4,000.00
ATTN CDM/BANKRUPTCY Claim Date: 02/27/2023 185 ASYLUM ST, #03B Debtor: OCEAN BREEZE RECOVERY, LLC	
HARTFORD, CT 06103 Comments: ALLOWED DOCKET: 504 (04/26/2023)	
UNSECURED Claimed: \$745.14 Allowed:	\$500.00
UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY Claim Date: 03/14/2023 185 ASYLUM ST, #03B Debtor: PALM BEACH RECOVERY, LLC HARTFORD, CT 06103 Comments: ALLOWED DOCKET: 504 (04/26/2023)	
UNSECURED Claimed: \$26,924.00 Allowed:	\$22,000.00
UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY 185 ASYLUM ST, #03B HARTFORD, CT 06103 Claim Number: 22 Claim Date: 03/14/2023 Debtor: SBH HAVERHILL, LLC Comments: ALLOWED DOCKET: 504 (04/26/2023)	
UNSECURED Claimed: \$10,871.20 Allowed:	\$4,000.00
UNITEDHEALTHCARE INSURANCE COMPANY ATTN CDM/BANKRUPTCY Claim Date: 03/14/2023 185 ASYLUM ST, #03B Debtor: UNION FRESH START LLC HARTFORD, CT 06103 Comments: ALLOWED DOCKET: 504 (04/26/2023)	
UNSECURED Claimed: \$29,110.70 Allowed:	\$25,000.00

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

UPSTART NETWORK INC PO BOX 1931 BURLINGAME, CA 94011		Claim Number: 102 Claim Date: 05/31/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: DOCKET: 747 (06/22/2023)	
UNSECURED	Claimed:	\$13,427.49	
VIDEAU LLC 1187 FALLING PINE CT WINTER SPRINGS, FL 32	708	Claim Number: 10065 Claim Date: 04/13/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC	
UNSECURED	Claimed:	\$49,500.00 UNLIQ	
VITAL RECORDS CONTRO 5384 POPLAR AVE, STE 5 MEMPHIS, TN 38119		Claim Number: 10059 Claim Date: 04/11/2023 Debtor: UNION FRESH START LLC	
SECURED UNSECURED	Claimed:	\$153.90 Scheduled: \$75.28	
VOGEL, DAVID ADDRESS ON FILE		Claim Number: 10083 Claim Date: 04/17/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: POSSIBLY AMENDED BY 10132 DOCKET: 853 (07/27/2023)	
UNSECURED	Claimed:	\$344,523.52	
VOGEL, DAVID ADDRESS ON FILE		Claim Number: 10132 Claim Date: 06/28/2023 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: POSSIBLY AMENDED BY 10133 DOCKET: 853 (07/27/2023)	
PRIORITY	Claimed:	\$344,523.52	
SECURED TOTAL	Claimed: Claimed:	\$344,523.52 \$344,523.52	

Name of proof of claims where to
Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

VOGEL, DAVID ADDRESS ON FILE		Claim Number: 10133 Claim Date: 06/29/2023 Debtor: DELPHI BEHAVIORAL			
		Comments: POSSIBLY AMEND DOCKET: 853 (07/27/2023)	DED BY 10136		
PRIORITY	Claimed:	\$362,096.25			
SECURED	Claimed:	\$362,096.25			
TOTAL	Claimed:	\$362,096.25			
VOGEL, DAVID		Claim Number: 10136			
ADDRESS IS REDACTED		Claim Date: 07/24/2023			
		Debtor: DELPHI BEHAVIORAL	•		
		Comments: DOCKET: 853 (07 Claim Out of Balance Claim out		NIM #10122	
		Claim Out of Balance Claim of	ut of balance, AMENDS CD	410133	
PRIORITY	Claimed:	\$362,096.25			
SECURED	Claimed:	\$362,096.25			
TOTAL	Claimed:	\$362,096.25			
WASTE MANAGEMENT INC		Claim Number: 10073			
2550 W UNION HILLS DR		Claim Date: 04/14/2023			
PHOENIX, AZ 85027		Debtor: DELPHI BEHAVIORAL	. HEALTH GROUP, LLC		
UNSECURED	Claimed:	\$1,192.18			
WESTERN EXTERMINATOR		Claim Number: 10047			
C/O RENTOKIL NORTH AM	ERICA	Claim Date: 03/29/2023			
ATTN BANKRUPTCY TEAM 1125 BERKSHIRE BLVD, ST	TE 150	Debtor: DESERT VIEW RECOVERY COMMUNITY, LLC			
READING, PA 19610	IL 130				
1121110/17/19010					
UNSECURED	Claimed:	\$116.40	Scheduled:	\$116.40	
WILSON ELSER MOSKOWITZ EDELMAN & DICKER		Claim Number: 10131			
1133 WESTCHESTER AVE		Claim Date: 06/15/2023			
WHITE PLAINS, NY 10604		Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC			
		Comments: DOCKET: 790 (06	5/29/2023)		
UNSECURED	Claimed:	\$9,655.00			
· ·			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·

Name of proof of claims where to Case 23-10945-PDR Doc 868 Filed 08/03/23 Page 52 of 53

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

CLIENT ID 17 Claim Number: 53 ADDRESS ON FILE Claim Date: 04/14/2023 Debtor: PALM BEACH RECOVERY, LLC Comments: DOCKET: 545 (05/09/2023) **UNSECURED** Claimed: \$80,000.00 **XOJET AVIATION LLC** Claim Number: 10078 1901 W CYPRESS CREEK RD, STE 600 Claim Date: 04/14/2023 FORT LAUDERDALE, FL 33309 Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC Comments: WITHDRAWN DOCKET: 751 (06/26/2023) UNSECURED Claimed: \$1,950,601.22 UNLIQ Claim Number: 10097 YOGA 4 CHANGE INC 31329 AVE I Claim Date: 05/02/2023 BIG PINE KEY, FL 33043 Debtor: OCEAN BREEZE DETOX, LLC Comments: EXPUNGED DOCKET: 725 (06/14/2023) UNSECURED Claimed: \$975.00 Scheduled: \$975.00 YOGA 4 CHANGE INCORPORATED Claim Number: 10060 ATTN MICHELLE LECLAIR Claim Date: 04/11/2023 31329 AVENUE L Debtor: DELPHI BEHAVIORAL HEALTH GROUP, LLC BIG PINE KEY, FL 33043 Comments: ALLOWED DOCKET: 524 (05/04/2023) **UNSECURED** Claimed: \$975.00 Allowed: \$975.00

Date: 08/01/2023

Name of proof of claims where to

Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

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Alphabetical Claims Register for Delphi Behavioral Health Group (ALL CASES)

Summary Page

Total Number of Filed Claims: 259

	Claimed Amount	Allowed Amount
Administrative:	\$487,692.33	\$0.00
Priority:	\$8,348,870.23	\$673,783.07
Secured:	\$2,459,639.42	\$0.00
Unsecured:	\$180,417,849.87	\$24,677,514.74
Total:	\$191,714,051.85	\$25,351,297.81

Date: 08/01/2023