MONTHLY OPERATING REPORT

CHAPTER 11

CASE NAME: Progressive Acute Care, LLC, et al., Jointly Administered

CASE NUMBER: 16-50740 For Period: April 1, 2018 to June 30, 2018

THIS REPORT IS DUE 15 DAYS AFTER THE END OF THE MONTH. The debtor must attach each of the following forms unless the United States Trustee has waived the requirement in writing. File with the court and submit a copy to UST with an original signature.

Form Attached	Previously Waived	REQUIRED REPORTS / DOCUMENTS
(mark only one - attached or waived)		
{ }	{ X }	Comparative Balance Sheet (FORM 2-B)
{ }	{ X }	Profit and Loss Statement (FORM 2-C)
{ }	{ X }	Cash Receipts & Disbursement Statement (FORM 2-D)
{ }	{ X }	Supporting Schedules (FORM 2-E)
{ }	{ X }	Narrative (FORM 2-F)
{ }	{ X }	Copies of Bank Statement(s) and Reconciliations of Bank Balance to Book Balance for all Account(s)

I declare under penalty of perjury that the following Monthly Operating Report and any attachments thereto, are true and correct to the best of my knowledge and belief.

Executed on: July 9, 2018
(date)

Debtor(s)*: Progressive Acute Care, LLC
Progressive Acute Care Avoyelles, LLC
Progressive Acute Care Oakdale, LLC
Progressive Acute Care Winn, LLC

By**:

Position: Liquidation Trustee

Name of Preparer: Matthew E. Rubin

Telephone No. of Preparer: (847) 583-2804

* both debtors must sign a joint petition

** for corporate or partnership debtor

FORM 2-A
3/11

Progressive Acute Care, LLC, et al., Jointly Administered
Quarterly U.S. Trustee Fees
Q2 2018 - April 1 to June 30

Debtor	Month	Cash Disbursements	Quarterly Fee
PAC Corporate			
	April	$8,617.22	
	May	$71,909.37	
	June	$19,487.47	
	Less: Transfers Between Accounts	$0.00	
	Total	**$100,014.06**	**$975.00**
Avoyelles			
	April	$0.00	
	May	$0.00	
	June	$0.00	
	Total	**$0.00**	**$325.00**
Oakdale			
	April	$0.00	
	May	$0.00	
	June	$0.00	
	Total	**$0.00**	**$325.00**
Winn			
	April	$0.00	
	May	$0.00	
	June	$0.00	
	Total	**$0.00**	**$325.00**
Totals			**$1,950.00**