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Order Entered on  
June 5, 2025  
by Clerk U.S. Bankruptcy Court  
Southern District of California

Attorneys for Post-Effective Date Debtor and the Co-Liquidating Trustee

Jeffrey N. Pomerantz (Bar No. 143717)  
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Attorneys for the Co-Liquidating Trustee

**UNITED STATES BANKRUPTCY COURT**  
SOUTHERN DISTRICT OF CALIFORNIA  
325 West F Street, San Diego, California 92101-6991

In Re

BORREGO COMMUNITY HEALTH FOUNDATION,

Debtor.

BANKRUPTCY NO.  
22-02384-LT11

**ORDER ON  
STIPULATION BY AND AMONG THE POST-EFFECTIVE DATE DEBTOR,  
THE LIQUIDATING TRUSTEE, THE CO-LIQUIDATING TRUSTEES, TOMA, PETROS, EVANS DDS,  
PETROS, TOMA & PUTRUS DENTAL CORPORATION, AND TOMA & PETROS DDS, INC. REGARDING  
CLAIM NOS. 174, 175 AND 176**

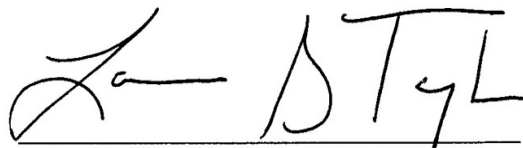
The court orders as set forth on the continuation pages attached and numbered 2 through 2 with exhibits, if any, for a total of 24 pages. Claim Objection Docket Entry No. 1624

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DATED: June 5, 2025



Judge, United States Bankruptcy Court



ORDER ON STIPULATION BY AND AMONG THE POST-EFFECTIVE DATE DEBTOR, THE LIQUIDATING TRUSTEE, THE CO-LIQUIDATING TRUSTEES, TOMA, PETROS, EVANS DDS, PETROS, TOMA & PUTRUS DENTAL CORPORATION, AND TOMA & PETROS DDS, INC. REGARDING CLAIM NOS. 174, 175 AND 176  
DEBTOR: BORREGO COMMUNITY HEALTH FOUNDATION CASE NO: 22-02384-LT11

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On June 4, 2025, Borrego Community Health Foundation (the Post-Effective Date Debtor), The Liquidating Trustee, the Co-Liquidating Trustees, Toma, Petros, Evans DDS, Petros, Toma & Putrus Dental Corporation, and Toma & Petros DDS, Inc. filed a *Stipulation By and Among the Post-Effective Date Debtor, The Liquidating Trustee, The Co-Liquidating Trustees, Toma, Petros, Evans DDS, Petros, Toma & Putrus Dental Corporation, and Toma & Petros DDS, Inc. Regarding Claim Nos. 174, 175 and 176* [Docket No. 1624] (the "Stipulation").

IT IS HEREBY ORDERED:

1. That the Stipulation, attached hereto as **Exhibit 1**, is approved in its entirety.
2. That the terms and conditions of the Stipulation shall be binding upon the parties and are hereby fully incorporated into this Order by this reference.

IT IS SO ORDERED.

# EXHIBIT 1

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601 South Figueroa Street, Suite 2500  
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Telephone: 213 623-9300  
Facsimile: 213 623-9924

Attorneys for the Post-Effective Date  
Debtor and the Co-Liquidating Trustee  
Jeffrey N. Pomerantz (Bar No. 143717)  
Steven W. Golden (Admitted Pro Hac Vice)  
PACHULSKI STANG ZIEHL & JONES LLP  
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Email: jpomerantz@pszjlaw.com  
sgolden@pszjlaw.com

Attorneys for the Co-Liquidating Trustee

**UNITED STATES BANKRUPTCY COURT  
SOUTHERN DISTRICT OF CALIFORNIA**

In re

BORREGO COMMUNITY  
HEALTH FOUNDATION,

Debtor and Debtor in  
Possession.

Case No. 22-02384-11

Chapter 11 Case

Judge: Honorable Laura S. Taylor

**STIPULATION BY AND AMONG THE  
POST-EFFECTIVE DATE DEBTOR,  
THE LIQUIDATING TRUSTEE, THE  
CO-LIQUIDATING TRUSTEES, TOMA,  
PETROS, EVANS DDS, PETROS, TOMA  
& PUTRUS DENTAL CORPORATION,  
AND TOMA & PETROS DDS, INC.  
REGARDING CLAIM NOS. 174, 175 AND  
176**

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(213) 623-9300

Borrego Community Health Foundation, the debtor and debtor in possession (prior to the effective date of the Plan (defined below), the “Debtor,” and after the effective date, the “Post-Effective Date Debtor”) in the above-captioned chapter 11 bankruptcy case, the Liquidating Trustee (the “Liquidating Trustee”) of the Borrego Community Health Foundation Liquidating Trust (the “Liquidating Trust”), the Co-Liquidating Trustees of the Liquidating Trust (the “Co-Liquidating Trustees”), Toma, Petros, Evans DDS (“Petros Evans”), Petros, Toma & Putrus Dental Corporation (“Petros Toma”), and Toma & Petros DDS, Inc. (“Toma & Petros”, and together with Petros Evans and Petros Toma, the “Petros Claimants”, and collectively with the Post-Effective Date Debtor, the Liquidating Trustee, and the Co-Liquidating Trustees, the “Parties”) hereby enter into this *Stipulation By and Among the Post-Effective Date Debtor, the Liquidating Trustee, the Co-Liquidating Trustees, Toma Petros, Evans DDS, Petros, Toma & Putrus Dental Corporation, and Toma & Petros DDS, Inc. Regarding Claim Nos. 174, 175, and 176.*

### **RECITALS**

WHEREAS, on September 12, 2022, the Debtor filed a voluntary petition for relief under chapter 11 of title 11 of the United States Code commencing Case No. 22-02384 (the “Chapter 11 Case”) in the United States Bankruptcy Court for the Southern District of California;

WHEREAS, on September 13, 2022, the Bankruptcy Court established November 21, 2022 as the deadline by which parties holding prepetition claims against the Debtor must file proofs of claim (the “Claims Bar Date”) [*See* Docket No. 16].

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WHEREAS, on or about November 23, 2022, after the Claims Bar Date, Toma, Petros, Evans DDS filed Proof of Claim No. 174 in the amount of \$17,000.00 (“Claim 174”), Petros, Toma & Putrus Dental Corporation filed Proof of Claim No. 175 in the amount of \$53,516.00 (“Claim 175”), and Toma & Petros DDS, Inc. filed Proof of Claim No. 176 in the amount of \$10,795.00 (“Claim 176”, and together with Claim 174 and Claim 175, the “Petros Claims”), copies of which are attached hereto respectively as **Exhibits A, B and C**;

WHEREAS, the Liquidating Trust was established pursuant to the *First Amended Joint Combined Disclosure Statement and Chapter 11 Plan of Liquidation of Borrego Community Health Foundation* [Docket No. 1168] (the “Plan”), confirmed by the order [Docket No. 1273] entered January 25, 2024 (the “Confirmation Order”), and that certain *Liquidating Trust Agreement*, dated as of February 14, 2024 (the “Liquidating Trust Agreement”);

WHEREAS, Claimant and the Co-Liquidating Trustees are in dispute over the Petros Claims, as to whether the Petros Claimants have sufficient evidence of excusable neglect to avoid having the Petros Claims disallowed as late filed.

WHEREAS, the Parties have agreed to resolve their dispute regarding the Petros Claims as set forth herein.

### **STIPULATION**

**NOW THEREFORE**, subject to the approval of the Court, the Parties hereby agree and stipulate as follows:

1. Claim 174 shall be disallowed and expunged from the claims register maintained by the claims agent.

2. Claim 175 shall be disallowed and expunged from the claims register maintained by the claims agent.

3. Claim 176 shall be allowed as a general unsecured claim in the amount of \$60,983.25. (the “Allowed Claim Amount”).

4. The Petros Claimants shall not file any additional proofs of claim, nor



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(213) 623-9300

1 will the Petros Claimants amend (or seek to amend) the Petros Claims.

2 5. Within thirty (30) days of entry of the order approving this Stipulation,  
3 and after the Petros Claimants have provided their completed W-9s to the Co-  
4 Liquidating Trustees, the Liquidating Trust shall pay the Allowed Claim Amount to  
5 the Petros Claimants pursuant to the Plan.

6 6. In consideration of the agreements with and value provided herein and  
7 other good and valuable consideration, the Parties hereby waive, remise, release  
8 and forever discharge the other, including each of their respective former and  
9 current predecessors, successors, assigns, subsidiaries, parent companies,  
10 shareholders, partners, members, managers, investors directors, officers,  
11 accountants, attorneys, employees, agents, representatives and servants of, from and  
12 against any and all claims, actions, causes of action, suits, proceedings, defenses,  
13 counterclaims, contracts, judgments, damages, accounts, reckonings, executions,  
14 and liabilities whatsoever of every name and nature, whether known or unknown,  
15 whether or not well-founded in fact or in law, and whether in law, at equity or  
16 otherwise, which either Party ever had or now has for or by reason of any matter,  
17 cause or anything whatsoever to this date, relating to or arising out of the Chapter  
18 11 Case.

19 7. Each of the Parties to the Stipulation acknowledge that they are  
20 familiar with California Civil Code Section 1542 and with respect to the matters  
21 released herein, each Party expressly waives any and all rights under California  
22 Civil Code Section 1542 and under any other federal or state statute or law of  
23 similar effect. California Civil Code Section 1542 provides:

24  
25 A general release does not extend to claims that the  
26 creditor or releasing party does not know or suspect to  
27 exist in his or her favor at the time of executing the  
28 release and that, if known by him or her, would have  
materially affected his or her settlement with the debtor  
or released party.

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LOS ANGELES, CALIFORNIA 90017-5704  
(213) 623-9300

8. The Petros Claimants hereby warrant that the Petros Claimants (a) are authorized and empowered to execute this Stipulation on behalf of the Petros Claimants, (b) have read this Stipulation in its entirety and fully understand and accept the terms set forth herein, (c) have had an opportunity to consult with legal counsel and any other advisors of the Petros Claimants' choice with respect to the terms of this Stipulation, and (d) are signing this Stipulation on the Petros Claimants' own free will.

9. The terms, covenants, conditions, and provisions of this Stipulation cannot be altered, changed, modified, or added to, or deleted from, except in a writing signed by all parties hereto.

10. This Stipulation may be executed in counterparts each of which shall be deemed an original, but all of which together shall constitute one and the same.

*[Remainder of Page Intentionally Left Blank]*



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SUITE 2500  
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90017-5704  
(213) 623-  
9300

11. The Court shall retain jurisdiction over all matters relating to the interpretation and enforcement of this Stipulation.

Dated: June 4, 2025

DENTONS US LLP  
SAMUEL R. MAIZEL  
TANIA M. MOYRON

By /s/ Tania M. Moyron  
Tania M. Moyron  
Attorneys for the Post-Effective Date  
Debtor and the Co-Liquidating Trustee


Dated: June 4, 2025

PACHULSKI STANG ZIEHL & JONES LLP  
Jeffrey N. Pomerantz  
Steven W. Golden

By /s/ Steven W. Golden  
Steven W. Golden  
Attorneys for the Co-Liquidating Trustee


*May 30th*  
Dated: April     , 2025

TOMA, PETROS, EVANS DDS

By:   
Its: CEO


*May 30th*  
Dated: April     , 2025

PETROS, TOMA & PUTRUS DENTAL  
CORPORATION

By:   
Its: CEO

*May 30th*  
Dated: April     , 2025

TOMA & PETROS DDS, INC.

By:   
Its: CEO

# EXHIBIT A

Your claim can be filed electronically on KCC's website at <https://epoc.kccilc.net/BorregoHealth>.

## Fill in this information to identify the case:

Debtor Borrego Community Health Foundation

United States Bankruptcy Court for the Southern District of California

Case number 22-02384

The Debtor has listed your claim as Disputed on Schedule F (E/F, Part 2) as a General Unsecured claim. If you believe that you have a claim against the Debtor, please complete and return this form accordingly.

## Official Form 410

## Proof of Claim

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed.

## Part 1: Identify the Claim

1. Who is the current creditor?

Toma Petros Evans DDS

Name of the current creditor (the person or entity to be paid for this claim)

Other names the creditor used with the debtor \_\_\_\_\_

2. Has this claim been acquired from someone else?

☒ No☐ Yes. From whom? \_\_\_\_\_

3. Where should notices and payments to the creditor be sent?

Where should notices to the creditor be sent?

Toma Petros Evans DDS  
1901 4th Ave Suite 300  
San Diego, CA 92101Federal Rule of  
Bankruptcy Procedure  
(FRBP) 2002(g)

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Address

Contact phone 619-236-7959Contact email tomape@evansdental.com

Uniform claim identifier for electronic payments in chapter 13 (if you use one): \_\_\_\_\_

Where should payments to the creditor be sent? (if different)

Name \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

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

Country \_\_\_\_\_

Contact phone \_\_\_\_\_

Contact email \_\_\_\_\_

4. Does this claim amend one already filed?

☒ No☐ Yes. Claim number on court claims registry (if known) \_\_\_\_\_

Filed on \_\_\_\_\_

MM / DD / YYYY

5. Do you know if anyone else has filed a proof of claim for this claim?

☒ No☐ Yes. Who made the earlier filing? \_\_\_\_\_

**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>48043</u>
7. How much is the claim?	\$ <u>17,000</u> Does this amount include interest or other charges? <input type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. <u>Dental Services Provided</u>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate: If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____ Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: \$ _____ Amount of the claim that is secured: \$ _____ Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amount should match the amount in line 7.) Amount necessary to cure any default as of the date of the petition: \$ _____ Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____



12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)? ☒ No ☐ Yes. Check all that apply.

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ \_\_\_\_\_

☐ Up to \$3,350\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ \_\_\_\_\_

☐ Wages, salaries, or commissions (up to \$15,150\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ \_\_\_\_\_

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ \_\_\_\_\_

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ \_\_\_\_\_

☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies. \$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)? ☒ No ☐ Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

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

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- ☒ I am the creditor.
- ☐ I am the creditor's attorney or authorized agent.
- ☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- ☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

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

Executed on date 11 21 2022  
MM / DD / YYYY

Signature [Handwritten Signature]

Print the name of the person who is completing and signing this claim:

Name Onaheed Toma  
First name Middle name Last name

Title Chief Executive Officer

Company \_\_\_\_\_

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 1901 4th Ave Suite 300  
Number Street

San Diego CA 92101 USA  
City State ZIP Code Country

619-236-7959  
Contact phone Email

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KURTZMAN CARSON CONSULTANTS



Supporting Documentation Redacted  
(on file with KCC)





Your claim can be filed electronically on KCC's website at <https://eboc.kccic.net/corregonew.html>.

ID: 25784020

PIN: yrHtEMQj

## Fill in this information to identify the case:

Debtor Borrego Community Health Foundation

United States Bankruptcy Court for the Southern District of California

Case number 22-02384

## Official Form 410

## Proof of Claim

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed.

## Part 1: Identify the Claim

NameID: 15087217

1. Who is the current creditor?	Petros, Toma & Putrus Dental Corporation Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor _____		
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? Petros, Toma & Putrus Dental Corporation Attn Dr. Petros 4844 University Avenue, Suite B San Diego, CA 92105 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) Address Contact phone (619) 285-5010 Contact email petros.toma@live.com	Where should payments to the creditor be sent? (if different) Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Country _____ Contact phone _____ Contact email _____	4844 University Avenue, Suite B (619) 285-5010 petros.toma@live.com
Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____			
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on MM / DD / YYYY		
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____		



Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: <u>9279</u>
7. How much is the claim? <u>\$ 53,516.00</u> <u>we believe there may be more</u>	Does this amount include interest or other charges? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).
8. What is the basis of the claim?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. <u>Dental Services Provided</u>
9. Is all or part of the claim secured?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Nature of property: <input type="checkbox"/> Real estate: If the claim is secured by the debtor's principal residence, file a <i>Mortgage Proof of Claim Attachment</i> (Official Form 410-A) with this <i>Proof of Claim</i> . <input type="checkbox"/> Motor vehicle <input type="checkbox"/> Other. Describe: _____ Basis for perfection: _____ Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Value of property: \$ _____ Amount of the claim that is secured: \$ _____ Amount of the claim that is unsecured: \$ _____ (The sum of the secured and unsecured amount should match the amount in line 7.) Amount necessary to cure any default as of the date of the petition: \$ _____ Annual Interest Rate (when case was filed) _____ % <input type="checkbox"/> Fixed <input type="checkbox"/> Variable
10. Is this claim based on a lease?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Amount necessary to cure any default as of the date of the petition. \$ _____
11. Is this claim subject to a right of setoff?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Identify the property: _____

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NOV 23 2022

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12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)? ☒ No ☐ Yes. Check all that apply:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B). \$ \_\_\_\_\_

☐ Up to \$3,350\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7). \$ \_\_\_\_\_

☐ Wages, salaries, or commissions (up to \$15,150\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4). \$ \_\_\_\_\_

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8). \$ \_\_\_\_\_

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5). \$ \_\_\_\_\_

☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies. \$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

13. Is all or part of the claim pursuant to 11 U.S.C. § 503(b)(9)? ☒ No ☐ Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

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

Part 3: Sign Below

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

- ☒ I am the creditor.
- ☐ I am the creditor's attorney or authorized agent.
- ☐ I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.
- ☐ I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgement that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have reasonable belief that the information is true and correct.

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

Executed on date 11/21/2022  
MM / DD / YYYY

Signature

Print the name of the person who is completing and signing this claim:

Name Omeed Toma  
First name Middle name Last name

Title Chief Executive Officer

Company \_\_\_\_\_

Identify the corporate servicer as the company if the authorized agent is a servicer.

Address 4844 University Ave, Suite B  
Number Street

San Diego CA 92105 USA  
City State ZIP Code Country

Contact phone 619-285-5010 Email \_\_\_\_\_

RECEIVED

NOV 23 2022

HORTON CARSON CONSULTANTS



Supporting Documentation Redacted  
(on file with KCC)

# EXHIBIT C

Your claim can be filed electronically on KCC's website at <https://epoc.kccilc.net/BorregoHealth>.

ID: 25784277

PIN: yILfcPwU

## Fill in this information to identify the case:

Debtor Borrego Community Health Foundation

United States Bankruptcy Court for the Southern District of California

Case number 22-02384

## Official Form 410

### Proof of Claim

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Other than a claim under 11 U.S.C. § 503(b)(9), this form should not be used to make a claim for an administrative expense arising after the commencement of the case.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies or any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed.

## Part 1: Identify the Claim

NameID: 15087474

1. Who is the current creditor?	Toma & Petros, DDS, Inc. Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor: _____		
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____		
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? Toma & Petros, DDS, Inc. <del>Ann Nancy Rayna Vargas &amp; Dr. Dhafir Petros</del> 3737 Moraga Ave., Suite #B 311 San Diego, CA 92117 Federal Rule of Bankruptcy Procedure (FRBP) 2002(g) Address _____ Contact phone <u>858-483-2093</u> Contact email <u>toma.petros@live.com</u>	Where should payments to the creditor be sent? (if different) Name _____ Number _____ Street _____ City _____ State _____ ZIP Code _____ Country _____ Contact phone _____ Contact email _____	
RECEIVED NOV 23 2022 KURTZMAN CARSON CONSULTANTS Uniform claim identifier for electronic payments in chapter 13 (if you use one): _____			
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on MM / DD / YYYY		
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____		



Part 2: Give Information About the Claim as of the Date the Case Was Filed

6. Do you have any number you use to identify the debtor?

☐ No

☒ Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor:

2670

7. How much is the claim?

\$ 10,795

Does this amount include interest or other charges?

☒ No

☐ Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim?

Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.  
Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).  
Limit disclosing information that is entitled to privacy, such as health care information.

Dental services provided

9. Is all or part of the claim secured?

☒ No

☐ Yes. The claim is secured by a lien on property.

Nature of property:

☐ Real estate: If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.

☐ Motor vehicle

☐ Other. Describe: \_\_\_\_\_

Basis for perfection: \_\_\_\_\_

Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property: \$ \_\_\_\_\_

Amount of the claim that is secured: \$ \_\_\_\_\_

Amount of the claim that is unsecured: \$ \_\_\_\_\_ (The sum of the secured and unsecured amount should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition: \$ \_\_\_\_\_

Annual interest rate (when case was filed) \_\_\_\_\_ %

☐ Fixed

☐ Variable

10. Is this claim based on a lease?

☒ No

☐ Yes. Amount necessary to cure any default as of the date of the petition.

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

11. Is this claim subject to a right of setoff?

☒ No

☐ Yes. Identify the property: \_\_\_\_\_





§ \_\_\_\_\_

Signed by Judge Laura Stuart Taylor June 5, 2025

Supporting Documentation Redacted  
(on file with KCC)

United States Bankruptcy Court  
Southern District of California

In re:  
BORREGO COMMUNITY HEALTH FOUNDATION,  
Debtor

Case No. 22-02384-LT  
Chapter 11

## CERTIFICATE OF NOTICE

District/off: 0974-3  
Date Rcvd: Jun 05, 2025

User: Admin.  
Form ID: pdfO1

Page 1 of 3  
Total Noticed: 2

The following symbols are used throughout this certificate:

Symbol	Definition
+	Addresses marked '+' were corrected by inserting the ZIP, adding the last four digits to complete the zip +4, or replacing an incorrect ZIP. USPS regulations require that automation-compatible mail display the correct ZIP.

Notice by first class mail was sent to the following persons/entities by the Bankruptcy Noticing Center on Jun 07, 2025:

Recip ID	Recipient Name and Address
db	BORREGO COMMUNITY HEALTH FOUNDATION,, 587 Palm Canyon Dr., Suite 208, Borrego Springs, CA 92004
aty	+ Samuel Ruven Maizel, Dentons US LLP, 601 South Figueroa Street, Suite 2500, Los Angeles, CA 90017-5709

TOTAL: 2

Notice by electronic transmission was sent to the following persons/entities by the Bankruptcy Noticing Center.  
Electronic transmission includes sending notices via email (Email/text and Email/PDF), and electronic data interchange (EDI).

NONE

## BYPASSED RECIPIENTS

The following addresses were not sent this bankruptcy notice due to an undeliverable address, \*duplicate of an address listed above, \*P duplicate of a preferred address, or ## out of date forwarding orders with USPS.

NONE

## NOTICE CERTIFICATION

I, Gustava Winters, declare under the penalty of perjury that I have sent the attached document to the above listed entities in the manner shown, and prepared the Certificate of Notice and that it is true and correct to the best of my information and belief.

Meeting of Creditor Notices only (Official Form 309): Pursuant to Fed .R. Bank. P.2002(a)(1), a notice containing the complete Social Security Number (SSN) of the debtor(s) was furnished to all parties listed. This official court copy contains the redacted SSN as required by the bankruptcy rules and the Judiciary's privacy policies.

Date: Jun 07, 2025                      Signature: /s/Gustava Winters

## CM/ECF NOTICE OF ELECTRONIC FILING

The following persons/entities were sent notice through the court's CM/ECF electronic mail (Email) system on June 5, 2025 at the address(es) listed below:

Name	Email Address
Allison M. Rego	on behalf of Creditor Inland Valley Investments LLC allison.rego@mgr-legal.com
Allison M. Rego	on behalf of Creditor Premier Healthcare Management Inc. allison.rego@mgr-legal.com
Allison M. Rego	on behalf of Creditor DRP Holdings LLC allison.rego@mgr-legal.com
Allison M. Rego	on behalf of Creditor Promenade Square LLC allison.rego@mgr-legal.com
Andrew B. Still	on behalf of Creditor California Physicians' Service dba Blue Shield of California astill@swlaw.com kcollins@swlaw.com
Andrew B. Still	on behalf of Creditor Blue Shield of California Promise Health Plan astill@swlaw.com kcollins@swlaw.com

District/off: 0974-3  
Date Rcvd: Jun 05, 2025

User: Admin.  
Form ID: pdf01

Page 2 of 3  
Total Noticed: 2

Anthony Bisconti	on behalf of Interested Party San Ysidro Health tbisconti@bklwlaw.com 1193516420@filings.docketbird.com,docket@bklwlaw.com
Anthony Dutra	on behalf of Creditor Desert AIDS Project dba DAP Health adutra@hansonbridgett.com SSingh@hansonbridgett.com
Anthony Dutra	on behalf of Creditor Philip D. Szold M.D., Inc. dba La Mesa Pediatrics adutra@hansonbridgett.com, SSingh@hansonbridgett.com
Bernard M. Hansen	on behalf of Creditor Premier Healthcare Management Inc. bernardmhansen@sbcglobal.net
Cheryl Skigin	on behalf of Creditor Ally Bank caskigin@earthlink.net
Christine E. Baur	on behalf of Creditor Greenway Health LLC christine@baurbklaw.com, admin@baurbklaw.com
Christine M. Fitzgerald	on behalf of Attorney Christine M. Fitzgerald cfitzgerald@littler.com maria@thersfirm.com;amy@thersfirm.com
Daren Brinkman	on behalf of Creditor Pourshirazi & Youssefi Dental Corporation firm@brinkmanlaw.com 7764052420@filings.docketbird.com
Darin L. Wessel	on behalf of Defendant CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES by and through its Director, Michelle Baass darin.wessel@doj.ca.gov
Darin L. Wessel	on behalf of Creditor CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES by and through its Director, Michelle Baass darin.wessel@doj.ca.gov
Dean T. Kirby, Jr.	on behalf of Creditor Ramona Crossings LLC dkirby@fsl.law, jwilson@fsl.law
Elvina Rofael	on behalf of United States Trustee United States Trustee elvina.rofael@usdoj.gov Tiffany.L.Carroll@usdoj.gov;USTP.Region15@usdoj.gov
Eric J Beste	on behalf of Creditor DRP Holdings LLC eric.beste@btlaw.com
Eric J Beste	on behalf of Creditor Promenade Square LLC eric.beste@btlaw.com
Eric J Beste	on behalf of Creditor Premier Healthcare Management Inc. eric.beste@btlaw.com
Eric J Beste	on behalf of Creditor Inland Valley Investments LLC eric.beste@btlaw.com
Gerald N. Sims	on behalf of Creditor BETA Risk Management Authority jerrys@psdslaw.com bonniec@psdslaw.com
Gerald N. Sims	on behalf of Creditor BETA Healthcare Group jerrys@psdslaw.com bonniec@psdslaw.com
Haeji Hong	on behalf of United States Trustee United States Trustee Haeji.Hong@usdoj.gov USTP.Region15@usdoj.gov;tiffany.l.carroll@usdoj.gov
Hala Hammi	on behalf of Creditor James Wermers hala.hammi@fennelllaw.com wpf@ecf.courtdrive.com;samantha.larimer@fennelllaw.com;naomi.cwalinski@fennelllaw.com;office@fennelllaw.com;Brendan. Bargmann@fennelllaw.com
Helen Yang	on behalf of Interested Party Inland Empire Health Plan helen.yang@squirepb.com helen-h-yang-8259@ecf.pacerpro.com;PHX_DCKT@squirepb.com
Jeffrey Garfinkle	on behalf of Creditor McKesson Corporation on behalf of itself and certain corporate affiliates jgarfinkle@buchalter.com, lverstegen@buchalter.com;docket@buchalter.com
Jeffrey Garfinkle	on behalf of Interested Party McKesson Corporation jgarfinkle@buchalter.com lverstegen@buchalter.com;docket@buchalter.com
Jeffrey N. Pomerantz	on behalf of Attorney Pachulski Stang Ziehl & Jones LLP jpomerantz@pszjlaw.com scho@pszjlaw.com

District/off: 0974-3  
Date Rcvd: Jun 05, 2025

User: Admin.  
Form ID: pdf01

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Total Noticed: 2

Jeffrey N. Pomerantz	on behalf of Other Prof. FTI Consulting Inc. jpomerantz@pszjlaw.com, scho@pszjlaw.com
Jeffrey N. Pomerantz	on behalf of Creditor Committee Official Committee of Unsecured Creditors of Borrego Community Health Foundation jpomerantz@pszjlaw.com;tkapur@pszjlaw.com;sgolden@pszjlaw.com scho@pszjlaw.com
Keith H. Rutman	on behalf of Creditor Waleed Stephen D.D.S. krutman@krutmanlaw.com
Kelly Ann Mai Khanh Tran	on behalf of Creditor Anna Navarro kelly@smalllawcorp.com emma@smalllawcorp.com
Kenneth K. Wang	on behalf of Defendant CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES by and through its Director, Michelle Baass Kenneth.Wang@doj.ca.gov, anthony.conklin@doj.ca.gov
Kenneth K. Wang	on behalf of Creditor CALIFORNIA DEPARTMENT OF HEALTH CARE SERVICES by and through its Director, Michelle Baass Kenneth.Wang@doj.ca.gov, anthony.conklin@doj.ca.gov
Kirsten Martinez	on behalf of Creditor Wells Fargo Bank N.A., d/b/a/ Wells Fargo Auto kirsten.martinez@bonialpc.com, Notices.Bonial@ecf.courtdrive.com
Leslie Gardner	on behalf of Creditor U.S. Department of Health and Human Services leslie.gardner2@usdoj.gov brenda.seyler@usdoj.gov;Efile.dkt.civ@usdoj.gov
Leslie Gardner	on behalf of Creditor Internal Revenue Service leslie.gardner2@usdoj.gov brenda.seyler@usdoj.gov;Efile.dkt.civ@usdoj.gov
Michael B. Reynolds	on behalf of Creditor Blue Shield of California Promise Health Plan mreynolds@swlaw.com kcollins@swlaw.com
Michael B. Reynolds	on behalf of Creditor California Physicians' Service dba Blue Shield of California mreynolds@swlaw.com kcollins@swlaw.com
Michael I. Gottfried	on behalf of Creditor Tower Energy Group Inc. mgottfried@elkinskalt.com, rzur@elkinskalt.com,1648609420@filings.docketbird.com
Randy B. Soref	on behalf of Interested Party Family Health Centers of San Diego rsoref@polsinelli.com
Shawn Christianson	on behalf of Creditor Oracle America Inc. SII to NetSuite, Inc. schristianson@buchalter.com, cmcintire@buchalter.com
Steven W Golden	on behalf of Trustee Co-Liquidating Trustee sgolden@pszjlaw.com
Steven W Golden	on behalf of Creditor Committee Official Committee of Unsecured Creditors of Borrego Community Health Foundation sgolden@pszjlaw.com
Susan C. Stevenson	on behalf of Creditor BETA Healthcare Group sstevenson@psdslaw.com bonniec@psdslaw.com
Tania M. Moyron	on behalf of Debtor BORREGO COMMUNITY HEALTH FOUNDATION tania.moyron@dentons.com, carrie.rice@dentons.com;DOCKET.GENERAL.LIT.LOS@dentons.com
Tania M. Moyron	on behalf of Attorney Dentons US LLP tania.moyron@dentons.com carrie.rice@dentons.com;DOCKET.GENERAL.LIT.LOS@dentons.com
Tania M. Moyron	on behalf of Plaintiffs BORREGO COMMUNITY HEALTH FOUNDATION tania.moyron@dentons.com, carrie.rice@dentons.com;DOCKET.GENERAL.LIT.LOS@dentons.com
Teddy Kapur	on behalf of Creditor Committee Official Committee of Unsecured Creditors of Borrego Community Health Foundation tkapur@pszjlaw.com;jpomerantz@pszjlaw.com;sgolden@pszjlaw.com
United States Trustee	ustp.region15@usdoj.gov
Van C. Durrer, II	on behalf of Attorney Skadden Arps, Slate, Meagher & Flom LLP van.durrer@skadden.com, rebecca.ritchie@skadden.com;andrea.bates@skadden.com;brigitte.travaglini@skadden.com;van-durrer-7974@ecf.pacerpro.com

TOTAL: 53