

ACCORDIUS HEALTH AT LEXINGTON LLC

 OPERATING ACCOUNT

 980 SYLVAN AVE

 ENGLEWOOD CLIFFS NJ 07632-3301



IMPORTANT ACCOUNT INFORMATION

There is important information concerning your account included at the end of this statement.

REFER YOUR FRIENDS AND FAMILY

*Offer valid at any Sunflower Bank or First National 1870 location. To participate in the Refer A Friend program, customer must be an owner on a personal checking account at Sunflower Bank, N.A. Referring customer will earn \$50 when referee opens their first personal checking account at Sunflower Bank. All referral payments will be deposited into referring customer's primary personal checking account at time referral payment is earned. Qualifying account must be open and have a positive balance on the date the referee account is opened to receive referral payment. New customer (referee) must present referral card, letter, or email offer at time of account opening. Minimum of \$100 is required to open a personal checking account. Maximum payment per customer for referrals is \$500 per calendar year (January 1 to December 31).

Referrer may receive a Form 1099-MISC for reportable taxable income. Offer subject to change/cancellation at any time without notice. Referee may participate in current personal checking offers at time of account opening and is eligible to participate in the Refer A Friend program. By participating in this program, each party may be aware that the other is a Sunflower Bank, N.A. customer.

CHECKING SUMMARY - *****8940

Previous Balance		-5,322.17
Deposits/Credits	53	1,557,385.42 +
Checks/Debits	120	1,560,793.63 -
Service Charge		735.90 -
Interest Paid		0.00 +
Current Statement Balance		-9,466.28
Days in Statement Period:		

Deposits

Posted	Description	Amount
06/03/24	INCOMING WIRE 76165890 PPG FUN D II LLC 062006505	8,000.00
06/03/24	INCOMING WIRE 76177657 PPG FUN D II LLC 062006505	4,000.00
06/03/24	TRANSFER FROM CHECKING 89 RF#093503000259 060324	2,447.00
06/03/24	TRANSFER FROM CHECKING 89 RF#093504000260 060324	1,100.00
06/03/24	TRANSFER FROM CHECKING 89 RF#093504000261 060324	2,000.00
06/03/24	NSF/OD FEE CRED0000000000006086 INSUFFICIENT FUNDS	36.00
06/04/24	TRANSFER FROM CHECKING 89 RF#061551001260 060424	18,999.06
06/05/24	TRANSFER FROM CHECKING 89 RF#063158003639 060524	142,034.77
06/05/24	TRANSFER FROM CHECKING 89 RF#063158003640 060524	92,668.67
06/06/24	TRANSFER FROM CHECKING 89 RF#062542006078 060624	3,723.85
06/06/24	TRANSFER FROM CHECKING 89 RF#062543006079 060624	1,478.00
06/07/24	INCOMING WIRE 76357292 PPG FUN D II LLC 062006505	9,000.00
06/07/24	TRANSFER FROM CHECKING 89 RF#060249008773 060724	100.00

THIS FORM IS PROVIDED TO HELP YOU BALANCE AND RECONCILE YOUR ACCOUNT

OUTSTANDING CHECKS		
NUMBER	AMOUNT	
TOTAL		
ENTER ON LINE 5		

1. Be Sure That Any Changes Or Automatic Deductions Shown On This Statement Have Been Subtracted From Your Checkbook Balance And That All Deposits, Loan Advances And Credits Shown On This Statement Have Been Added To Your Checkbook Balance.

2. Enter Final Balance Shown On This Statement.	
3. Add The Total Of Deposits Not Credited On This Statement.	+
4. Total of Lines 2 and 3.	
5. Subtract Outstanding Check Total.	—
6. Balance Should Agree With Your Checkbook Balance.	

IF YOUR ACCOUNT DOES NOT BALANCE - CHECK THE FOLLOWING CAREFULLY

- Does The Amount Of Each Check Agree With The Amount Shown On The Statement And The Amount In Your Checkbook?
- Have You Checked All Additions And Subtractions In Your Checkbook?
- Have You Carried The Correct Balance Forward In Your Checkbook?
- Have All Checks Been Entered And Deducted From Your Checkbook Balances?
- Do All The Deposits And Cash Advances Entered In Your Checkbook Agree With Your Statement?
- Have You Entered All Service Charges And Automatic Payments In Your Checkbook?
- Have You Accurately Entered And Totaled All Outstanding Checks?

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS

Telephone us at 888.827.5564 or Write us at Sunflower Bank, N.A., P.O. Box 800, Salina, KS 67402-0800

If you think your statement or receipt is wrong, or if you need more information about a transfer listed on the statement or receipt, please telephone us at the phone number, or write us at the address shown above.

Each month an account statement ("Monthly Statement") will be provided to you showing, among other things, all debits made by use of the Card(s). You need to review its Monthly Statement immediately upon receipt. If a receipt or Monthly Statement shows an unauthorized Transaction, or if it shows any other problem or error, you must notify Sunflower Bank, N.A. IMMEDIATELY, but in no event no later than ten (10) calendar days after the date of the Monthly Statement on which the unauthorized transaction, problem or error ("Dispute") FIRST appears or when you first discover the unauthorized transaction, problem or error, whichever is earlier. Disputes regarding any Card debit transactions must be communicated in writing to Sunflower Bank, N.A. at the address indicated above. Dispute documentation must include Customer name, Card number, dollar amount(s) of any Dispute, reference number, and a description of the Dispute. Business accounts do not receive provisional credit. Settlement of business accounts will be determined by the outcome of our investigation. If you do not notify Sunflower Bank, N.A. of a dispute, as noted above, you are absolutely barred from bringing any action against Sunflower Bank, N.A. that is in any way related to the Dispute.

NOTICE FOR OVERDRAFT LINE OF CREDIT

A FINANCE CHARGE on Cash Advances will be imposed from the date of posting the transaction to your account. A FINANCE CHARGE will continue to accrue until the crediting of a payment to your account reducing the principal balance. Payments received before 3:00 p.m. CT will be credited to your account as of the date received providing payment is made in good funds. Payments not in collected funds may be subject to a delay in crediting of up to five (5) business days after the date of receipt. Transactions received after cut-off date will be recorded on the following statement.

If you think your bill is wrong, or if you need more information about a transaction on your bill, write us (on a separate sheet) at Sunflower Bank, N.A., P.O. Box 800, Salina, KS 67402-0800 as soon as possible. Please provide us with the following information:

- *Account information:* Your name and account number.
- *Dollar amount:* The dollar amount of the suspected error.
- *Description of Problem:* If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within 60 days after the error appeared on your statement. You must notify us of any potential errors *in writing*. You may call us, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question. While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

PLEASE EXAMINE STATEMENT AT ONCE AND ADVISE PROMPTLY OF ANY EXCEPTIONS



Sunflower Bank
First National 1870



Guardian
Mortgage

3025 Cortland Circle | Salina, KS 67401
888-827-5564

ACCOUNT NUMBER: *****8940
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Posted	Description	Amount
06/10/24	INCOMING WIRE 76380569 PPG FUN D II LLC 062006505	27,000.00
06/10/24	INCOMING WIRE 76391971 PPG FUN D II LLC 062006505	3,000.00
06/11/24	TRANSFER FROM CHECKING 89 RF#063022003734 061124	5,434.06
06/13/24	TRANSFER FROM CHECKING 89 RF#093227008568 061324	87,906.10
06/13/24	TRANSFER FROM CHECKING 89 RF#093247008570 061324	23,718.10
06/14/24	TRANSFER FROM CHECKING 89 RF#073813011171 061424	11,087.64
06/14/24	TRANSFER FROM CHECKING 89 RF#073839011175 061424	30,000.00
06/14/24	TRANSFER FROM CHECKING 89 RF#073948011179 061424	25,000.00
06/17/24	INCOMING WIRE 76593352 PPG FUN D II LLC 062006505	52,000.00
06/17/24	TRANSFER FROM CHECKING 89 RF#115359000404 061724	2,447.00
06/17/24	TRANSFER FROM CHECKING 89 RF#115427000405 061724	14,966.20
06/18/24	INCOMING WIRE 76631639 PPG FUN D II LLC 062006505	60,000.00
06/18/24	TRANSFER FROM CHECKING 89 RF#050019003696 061824	174.05
06/20/24	TRANSFER FROM CHECKING 89 RF#090012006268 062024	212,606.01
06/20/24	TRANSFER FROM CHECKING 89 RF#090012006269 062024	16,107.75
06/21/24	TRANSFER FROM CHECKING 89 RF#062505010902 062124	28,955.22
06/24/24	TRANSFER FROM CHECKING 89 RF#062851001402 062424	4,160.00
06/24/24	TRANSFER FROM CHECKING 89 RF#063754000083 062424	10,045.65
06/24/24	TRANSFER FROM CHECKING 89 RF#063755000084 062424	12,096.00
06/25/24	NSF/OD FEE CREDIT	36.00
06/25/24	NSF/OD FEE CREDIT	36.00
06/25/24	NSF/OD FEE CREDIT	36.00
06/25/24	NSF/OD FEE CREDIT	36.00
06/25/24	NSF/OD FEE CREDIT	36.00
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06/25/24	NSF/OD FEE CREDIT	36.00
06/25/24	NSF/OD FEE CREDIT	36.00
06/25/24	NSF/OD FEE CREDIT	36.00
06/25/24	NSF/OD FEE CREDIT	36.00
06/27/24	INCOMING WIRE 76915929 PPG FUN D II LLC 062006505	380,000.00
06/27/24	TRANSFER FROM CHECKING 89 RF#063541002072 062724	2,216.35
06/27/24	TRANSFER FROM CHECKING 89 RF#063619002074 062724	10,000.00
06/27/24	TRANSFER FROM CHECKING 89 RF#103904002598 062724	10,000.00
06/28/24	INCOMING WIRE 76977383 PPG FUN D II LLC 062006505	240,000.00
06/28/24	R29 CORP CUST ADV NO AUTH PINE ACRES 00000001100038940	2,173.94
06/28/24	TRANSFER FROM CHECKING 89 RF#062056004865 062824	200.00

Electronic Transactions

Posted	Description	Amount
06/03/24	OUTGOING WIRE 544660 ALLIANCE MGMT JPMORGAN CHASE BANK, NA	1,498.67-
06/03/24	PHMP MONTHLY INV SALE PPD ACCORDIUS HEALTH	3,703.00-
06/03/24	MATRIXCARE PAYROLL CCD PINE ACRES	2,173.94-
06/03/24	BANKCARD MTOT DISC CCD ACCORDIUS HEALTH AT LE	606.36-
06/03/24	NSF/OD FEE PAID000000000006086 INSUFFICIENT FUNDS	36.00-
06/04/24	LEASE DIRECT WEB PAY CCD ACCORDIUS HEALTH AT LE	189.68-
06/04/24	LEASE DIRECT WEB PAY CCD SSC LEXINGTON OPERATIN	1,249.24-
06/04/24	GLOBALTECHSOLUTI PURCHASE CCD PINE ACRES CENTER FOR	1,736.09-



Sunflower Bank
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888-827-5564

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Posted	Description	Amount
06/05/24	OUTGOING WIRE 545081 HEALTH CA RE MANAGEMENT SPECIALISTS BANK OF AMERICA, N.A., NY	200.00-
06/05/24	OUTGOING WIRE 545083 PPG FUND II LLC SERVISFIRST BANK	200,000.00-
06/05/24	TEAMS BK NYC LLC SALE CCD PINE ACRES	1,062.50-
06/05/24	LEADING EDGE ADM LEA CCD PINE ACRES CENTER FOR	1,818.20-
06/05/24	NSF/OD FEE PAID000000000006082 INSUFFICIENT FUNDS	36.00-
06/06/24	TRANSFER FROM CHECKING 89 RF#130138007054 060624	8,000.00-
06/07/24	LEADING EDGE ADM LEA CCD PINE ACRES CENTER FOR	1,155.82-
06/07/24	SERVISFIRST BANK PAYMENT WEB PINE ACRES	2,435.58-
06/07/24	TRANSFER FROM CHECKING 89 RF#085624009251 060724	15,000.00-
06/10/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	73.77-
06/10/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	160.88-
06/10/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	139.78-
06/10/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	195.00-
06/10/24	NSF/OD FEE PAID000000000006107 INSUFFICIENT FUNDS	36.00-
06/10/24	PRIOR MO AA SVC CHR	735.90-
06/11/24	CARDKNOX SIGONFILE PPD ACCORDIUS HEALTH AT LE	12.50-
06/11/24	TRANSFER FROM CHECKING 89 RF#063102003737 061124	296.73-
06/14/24	OUTGOING WIRE 547377 ACCORDIUS HEALTH LLC SIGNATURE BANK	1,278.84-
06/14/24	TRANSFER FROM CHECKING 89 RF#074005011180 061424	166,424.41-
06/17/24	OUTGOING WIRE 547797 AP REHAB LLC METROPOLITAN COMMERCIAL BA NK	50,161.23-
06/17/24	OUTGOING WIRE 547828 PPG CAPTI VE FLAGSTAR BANK, NA	5,046.07-
06/17/24	LEADING EDGE ADM LEA CCD PINE ACRES CENTER FOR	1,092.54-
06/18/24	SPECTRUM SPECTRUM PPD ACCORDIUS	399.00-
06/18/24	LEASEDIRECT 7999_1 CCD SSC LEXINGTON OPERATIN	212.93-
06/20/24	OUTGOING WIRE 548435 APEX GLOB AL SOLUTIONS FLAGSTAR BANK, NA	312.00-
06/20/24	OUTGOING WIRE 548441 HEALTH CA RE MANAGEMENT SPECIALISTS BANK OF AMERICA, N.A., NY	10,494.92-
06/20/24	OUTGOING WIRE 548443 ALLIANCE HEALTH GROUP JPMORGAN CHASE BA NK, NA	47,838.27-
06/20/24	OUTGOING WIRE 548446 PPG FUND II LLC SERVISFIRST BANK	160,000.00-
06/20/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	179.49-
06/20/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	301.46-
06/20/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	49.31-
06/20/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	903.00-
06/20/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	1,589.78-
06/20/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	639.25-
06/20/24	NC DEPT REVENUE TAX PYMT CCD 1400310000037741720810	766.62-
06/21/24	GLOBALTECHSOLUTI PURCHASE CCD ALLIANCE HEALTH GROUP	525.17-
06/21/24	LEADING EDGE ADM LEA CCD PINE ACRES CENTER FOR	88.99-
06/21/24	TRANSFER FROM CHECKING 89 RF#062533010904 062124	500.00-
06/21/24	NSF/OD FEE PAID000000000006127 INSUFFICIENT FUNDS	36.00-
06/21/24	NSF/OD FEE PAID000000000006147 INSUFFICIENT FUNDS	36.00-
06/21/24	NSF/OD FEE PAID000000000009999 INSUFFICIENT FUNDS	36.00-
06/24/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	115.52-
06/24/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	317.81-
06/24/24	NVOICEPAY VENDOR PM CCD NVOICEPAY	100.00-
06/24/24	LEADING EDGE ADM LEA CCD PINE ACRES CENTER FOR	370.67-
06/24/24	NSF/OD FEE PAID000000000006148 INSUFFICIENT FUNDS	36.00-
06/26/24	POINTCLICKCARE T IAT ACH PAYMT ACCORDIUS HEALTH LEX	2,387.18-



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Posted	Description	Amount
06/27/24	OUTGOING WIRE 550241 ACCORDIUS HEALTH LLC SIGNATURE BANK	2,725.11-
06/27/24	OUTGOING WIRE 550396 ACCORDIUS HEALTH LLC SIGNATURE BANK	1,010.00-
06/27/24	SERVISFIRST BANK AUTOPAY CCD ACCORDIUS - LEX	7,347.02-
06/27/24	SPAY LEASEDIRECT PAYMENT PPD ACCORDIUS HEALTH AT LE	957.75-
06/27/24	MATRIXCARE PAYROLL CCD PINE ACRES	2,173.94-
06/27/24	TRANSFER FROM CHECKING 89 RF#151158003313 062724	175,612.87-
06/27/24	TRANSFER FROM CHECKING 89 RF#151218003314 062724	205,000.00-
06/28/24	LEADING EDGE ADM LEA CCD PINE ACRES CENTER FOR	679.83-
06/28/24	TRANSFER FROM CHECKING 89 RF#184947007049 062824	143,298.75-
06/28/24	TRANSFER FROM CHECKING 89 RF#184947007050 062824	95,000.00-
06/28/24	NSF/OD FEE RETU000000000006166 INSUFFICIENT FUNDS	36.00-

Checks Paid Electronically

Check Number	Date	Description	Amount
---No Checks Paid Electronically in this statement cycle.---			

Checks Paid

Check Number	Date	Amount	Check Number	Date	Amount
6002	06/03/24	250.00	6108	06/14/24	300.00
6048*	06/04/24	4,095.43	6110*	06/17/24	1,265.76
6051*	06/04/24	395.00	6111	06/18/24	256.93
6058*	06/05/24	304.05	6113*	06/27/24	953.65
6062*	06/04/24	893.90	6115*	06/17/24	163.52
6066*	06/03/24	1,494.01	6116	06/18/24	5,000.00
6069*	06/04/24	8,174.61	6117	06/17/24	61.64
6070	06/04/24	345.96	6118	06/17/24	3,133.69
6072*	06/03/24	155.60	6121*	06/21/24	267.16
6073	06/04/24	921.53	6122	06/18/24	596.99
6075*	06/05/24	900.00	6123	06/12/24	3,068.88
6077*	06/03/24	615.94	6124	06/17/24	1,003.47
6078	06/04/24	790.00	6125	06/18/24	69,615.00
6079	06/04/24	67.14	6126	06/20/24	723.67
6081*	06/04/24	157.88	6127	06/20/24	21,412.00
6082	06/04/24	2,316.49	6128	06/21/24	2,500.71
6085*	06/03/24	139.32	6130*	06/24/24	300.00
6089*	06/11/24	673.22	6131	06/25/24	1,605.00
6093*	06/07/24	180.80	6134*	06/26/24	916.65
6095*	06/07/24	2,300.00	6135	06/25/24	1,216.97
6097*	06/13/24	286.80	6140*	06/26/24	679.45
6098	06/07/24	7,903.23	6142*	06/25/24	790.00
6099	06/05/24	2,023.36	6145*	06/25/24	121.89
6100	06/05/24	311.21	6146	06/25/24	765.00
6101	06/05/24	1,892.00	6147	06/20/24	2,711.54
6103*	06/17/24	2,136.65	6148	06/21/24	16,619.49
6104	06/10/24	676.52	6149	06/25/24	3,040.60
6105	06/07/24	1,606.01	6163*	06/27/24	6,803.36
6106	06/17/24	1,047.07	6166*	06/28/24	15,988.55
6107	06/07/24	27,332.46	9999*	06/11/24	251.20

Check Number	Date	Amount	Check Number	Date	Amount
Checks Paid Continued...					
9999*	06/20/24	94.80	9999*	06/27/24	284.40
*Indicates a break in check sequence.					

Daily Balance Summary


Date	Balance	Date	Balance	Date	Balance
05/31/24	-5,322.17	06/03/24	1,587.99	06/04/24	-745.90
06/05/24	25,410.22	06/06/24	22,612.07	06/07/24	-26,201.83
06/10/24	1,780.32	06/11/24	5,980.73	06/12/24	2,911.85
06/13/24	114,249.25	06/14/24	12,333.64	06/17/24	16,635.20
06/18/24	728.40	06/20/24	-18,573.95	06/21/24	-10,228.25
06/24/24	14,833.40	06/25/24	7,797.94	06/26/24	3,814.66
06/27/24	3,162.91	06/28/24	-9,466.28		

IMPORTANT ACCOUNT INFORMATION

Effective July 1, 2024, there will be adjustments made to service charges on Analyzed Commercial Checking accounts. The following will be reflected in your August 2024 statement:

- The Deposit Coverage Fee is replaced by a Deposit Service Assessment calculated at Average Customer Collected Balance divided by 100 multiplied by 0.015.
- The Negative Collected Balance Fee is replaced by a Negative Collected Funds Assessment calculated at Average Negative Customer Collected Balance multiplied by the uncollected funds rate of 9.75%.

Please contact your Treasury Management Officer with any questions.

Accordus Health at Livingston LLC 400 Rella Boulevard, Suite 200 Montebello NY 10001		CHECK NO. 6002	63-027011
PAYMENT REFERENCE 0000-3690-6002		DATE OF CHECK 05/07/24	
TWO HUNDRED FIFTY AND 00/100 DOLLARS		CHECK AMOUNT \$250.00	 <small>VOID WHEN COPIED</small>
PAY TO THE ORDER OF	Apollo Corp 233 W 35th St, Floor 15 Floor 15 New York NY 10001		
Sunflower Bank Salina, KS	Memo: _____		
00006002 1000100621000369400		Authorized Signature _____	

Serial 6002, Date 06/03, Amount \$250.00

93-6271011

Accordius Health at Lexington LLC
400 Ruffin Boulevard, Suite 200
Moreheadville NY 10901

CHECK NO.
6048

PAYMENT REFERENCE
0000-3890-6048

DATE OF CHECK
05/21/24

FOUR THOUSAND NINETY FIVE AND 43/100 DOLLARS

PAY TO THE ORDER OF N2 Fire Protection, LLC
 264 Inglish Dr
 Gastonia NC 28056

Sunflower Bank
Salina, KS

Memo:

\$4,095.43

[Signature]
Authorized Signature

⑈00006048 ⑆1011006214⑆100038940⑈

Serial 6048, Date 06/04, Amount \$4,095.43

Accordus Health at Lexington LLC
400 Reita Boulevard, Suite 200
Monroeville NY 10901

83-62/1011

PAYMENT REFERENCE
0000-3690.6051

DATE OF CHECK
05/21/24

THREE HUNDRED NINETY FIVE AND 00/100 DOLLARS

PAY TO
THE ORDER OF

Pathous Health
130 Salem Towne Court
Aptos NC 27520

CHECK AMOUNT
\$395.00

100006051 10100062101000389401*

Authorized Signature

Serial 6051, Date 06/04, Amount \$395.00

Accordius Health at Leavitt LLC
400 Halls Boulevard, Suite 200
Monticello NY 10901

THREE HUNDRED FOUR AND 05/100 DOLLARS

PAY TO
THE ORDER OF

Staples
500 Staples drive
Frammingham MA 01917-0242

Sunflower Bank
Salina, K3

Memo:

CHECK NO.
6058

PAYMENT REFERENCE
0000-3890-6058

DATE OF CHECK
05/21/24

CHECK AMOUNT
\$304.05

Authorized Signature

00006058 1210110062141000389404

Serial 6058, Date 06/05, Amount \$304.05

Accordus Health at Lexington LLC 400 Natta Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6062	83-621017
EIGHT HUNDRED NINETY THREE AND 90/100 DOLLARS		PAYMENT REFERENCE 0000-3890-6062	DATE OF CHECK 05/21/24
PAY TO THE ORDER OF		CHECK AMOUNT \$893.90	893.90
Sunflower Bank Salina, KS		Authorized Signature	
Memo:			

00006062 1010062111000389401*

Serial 6062, Date 06/04, Amount \$893.90

THE ABOVE IS FOR THE FOLLOWING ACCOUNTS AND BALANCE SHEET: A FIVE PERCENT INTEREST RATE ON THE BALANCE DUE TO YOU

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank
279 Brien Center Dr.
Lexington, NC 27292

6066

Date 05-22-2024
\$****1,494.01
USD
Void After 180 Days

One Thousand Four Hundred Ninety Four and 01/100****

UNITED HEARTLAND
PO Box 40790
Lansing, MI 48901

MEMO

AUTHORIZED SIGNATURE

16 6066 * 10 1006 2 10 1000 36940 *

Serial 6066, Date 06/03, Amount \$1,494.01

THIS CHECK IS VOID WITHOUT A RED & BLUE FOLDER AND BACKGROUND PLUS A FINCHPRINT & FINGERPRINT VETERANARY ON THE BACK - HOLD AT WILL TO VERIFY

Pine Acres Center For Nursing And Rehabilitation
279 Brian Center Dr
Lexington, NC 27302

Sunflower Bank

6069

Date 05-24-2024

\$***8,174.61
USD

Void After 160 Days

Eight Thousand One Hundred Seventy Four and 61/100****


High Rock Heating & Cooling
PO Box 774
Southmont, NC 27351

MEMO

AUTHORIZED SIGNATURE

⑈ 6069⑈ ⑆Ⓜ ⓁⓂⓄⓅⓇⓈⓉⓊⓋⓌⓍⓎⓏ


Serial 6069, Date 06/04, Amount \$8,174.61

	CHECK NO. 6070	83-021011
Accordius Health at Lexington LLC 400 North Boulevard, Suite 200 Montebello NY 10901	PAYMENT REFERENCE 0000-3890-6070	DATE OF CHECK 05/28/24
THREE HUNDRED FORTY FIVE AND 96/100 DOLLARS	CHECK AMOUNT \$345.96	\$ \$\$\$
PAY TO THE ORDER OF	Crown Care Services Inc PO BOX 86 Lakewood NJ 08701	
Sunflower Bank Salina, KS	Memo:	 Authorized Signature
⑈00006070⑈ ⑆01100621⑆ ⑆100038940⑈		


Serial 6070, Date 06/04, Amount \$345.96

[illegible]


Serial 6072, Date 06/03, Amount \$155.60

ACCORDIUS HEALTH AT LEVINGTON LLC 400 Ranta Boulevard, Suite 200 Montebello NY 10801		CHECK NO. 6073	83-6211011
PAYMENT REFERENCE 0000-3890-6073	DATE OF CHECK 05/28/24		
NINE HUNDRED TWENTY ONE AND 53/100 DOLLARS		CHECK AMOUNT \$921.53	MICR 
PAY TO THE ORDER OF	Granger DEPT. 607358509 PO Box 416087 Kansas City MO 64141-6267		
Sunflower Bank Salina, KS			
Memo:	_____ Authorized Signature		


Serial 6073, Date 06/04, Amount \$921.53

Accordus Health at Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6075	83-62/1011
PAYMENT REFERENCE 0000-3890-6075		DATE OF CHECK 05/28/24	
NINE HUNDRED AND 00/100 DOLLARS		CHECK AMOUNT \$900.00	
PAY TO THE ORDER OF JFE ADVERTISING LTD 5915 18th Avenue Brooklyn NY 11224	Sunflower Bank Salina, KS Memo: 		
00006075 1010062100038940			


Serial 6075, Date 06/05, Amount \$900.00

Accordus Health at Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6077	83-62/1011
PAYMENT REFERENCE 0000-3890-6077		DATE OF CHECK 05/28/24	
SIX HUNDRED FIFTEEN AND 94/100 DOLLARS		CHECK AMOUNT \$615.94	
PAY TO THE ORDER OF Netsmart Technologies, Inc. PO Box 713519 Philadelphia PA 19171-3519	Sunflower Bank Salina, KS Memo: 		
00006077 1010062100038940			


Serial 6077, Date 06/03, Amount \$615.94

Accordus Health at Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6078	83-62/1011
PAYMENT REFERENCE 0000-3890-6078		DATE OF CHECK 05/28/24	
SEVEN HUNDRED NINETY AND 00/100 DOLLARS		CHECK AMOUNT \$790.00	
PAY TO THE ORDER OF Pathous Health 130 Salem Towne Court Apex NC 27502	Sunflower Bank Salina, KS Memo: 		
00006078 1010062100038940			


Serial 6078, Date 06/04, Amount \$790.00

Accordus Health at Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6079	83-62/1011
PAYMENT REFERENCE 0000-3890-6079		DATE OF CHECK 05/28/24	
SIXTY SEVEN AND 14/100 DOLLARS		CHECK AMOUNT \$67.14	
PAY TO THE ORDER OF R&A Office Supplies 1227 East 12th Street Brooklyn NY 11230	Sunflower Bank Salina, KS Memo: 		
00006079 1010062100038940			

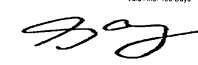
Serial 6079, Date 06/04, Amount \$67.14

Accordus Health at Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6081	83-62/1011
PAYMENT REFERENCE 0000-3890-6081		DATE OF CHECK 05/28/24	
ONE HUNDRED FIFTY SEVEN AND 88/100 DOLLARS		CHECK AMOUNT \$157.88	
PAY TO THE ORDER OF TwinMed PO Box 847340 Los Angeles CA 90084-7340	Sunflower Bank Salina, KS Memo: 		
00006081 1010062100038940			


Serial 6081, Date 06/04, Amount \$157.88

Accordus Health at Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6082	83-62/1011
PAYMENT REFERENCE 0000-3890-6082		DATE OF CHECK 05/28/24	
TWO THOUSAND THREE HUNDRED SIXTEEN AND 49/100 DOLLARS		CHECK AMOUNT \$2,316.49	
PAY TO THE ORDER OF TwinMed PO Box 847340 Los Angeles CA 90084-7340	Sunflower Bank Salina, KS Memo: 		
00006082 1010062100038940			


Serial 6082, Date 06/04, Amount \$2,316.49

THIS CHECK IS VOID WITHOUT A RED & BLUE BORDER AND BACKGROUND PLUS A RIGHT & FINGERPRINT WATERMARK ON THE BACK - HOLD AT ANGLE TO VIEW.		CHECK NO. 6085	83-62/1011
Pine Acres Center For Nursing And Rehabilitation 279 Brian Center Dr Lexington, NC 27292		DATE 05-30-2024	
PAY TO THE ORDER OF AFCO One Hundred Thirty Nine and 32/100**** AFCO 150 North Field Drive Suite 190 Suite 190 Lake Forest, IL 60045	\$***139.32 USD Void After 180 Days	Sunflower Bank Salina, KS Memo: 	
MEMO 01-55115483 00006085 1010062100038940			


Serial 6085, Date 06/03, Amount \$139.32

Accordus Health at Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6089	83-62/1011
PAYMENT REFERENCE 0000-3890-6089		DATE OF CHECK 05/30/24	
SIX HUNDRED SEVENTY THREE AND 22/100 DOLLARS		CHECK AMOUNT \$673.22	
PAY TO THE ORDER OF Format Press Corp. 48015 1st Ave Brooklyn NY 11232	Sunflower Bank Salina, KS Memo: 		
00006089 1010062100038940			

Serial 6089, Date 06/11, Amount \$673.22

Accordus Health at Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6093	83-62/1011
PAYMENT REFERENCE 0000-3890-6093		DATE OF CHECK 05/30/24	
ONE HUNDRED EIGHTY AND 80/100 DOLLARS		CHECK AMOUNT \$180.80	
PAY TO THE ORDER OF Mod Part 1901 10th Avenue Brooklyn NY 11215	Sunflower Bank Salina, KS Memo: 		
00006093 1010062100038940			

Serial 6093, Date 06/07, Amount \$180.80

Accordus Health at Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6095	83-62/1011
PAYMENT REFERENCE 0000-3890-6095		DATE OF CHECK 05/30/24	
TWO THOUSAND THREE HUNDRED AND 00/100 DOLLARS		CHECK AMOUNT \$2,300.00	
PAY TO THE ORDER OF Quality Rehab Management 5627 Keller Springs Road Suite 150 Addicks TX 75001	Sunflower Bank Salina, KS Memo: 		
00006095 1010062100038940			

Serial 6095, Date 06/07, Amount \$2,300.00

Accordius Health at Lexington LLC
450 Peila Boulevard, Suite 200
Monticello NY 10801

Check NO. 6097 03/02/01

PAYMENT REFERENCE
0000-3890:6097

DATE OF CHECK
05/30/24

THREE HUNDRED EIGHTY SIX AND 80/100 DOLLARS

PAY TO THE ORDER OF
The Home Depot Pro
801 West Bay St
Jacksonville FL 32204

CHECK AMOUNT
\$286.80

Sunflower Bank
Salina, KS

Memo:

00006097 410110062141000389408

Serial 6097, Date 06/13, Amount \$286.80

Accordia Health at Lexington LLC 400 Rialta Boulevard, Suite 200 Marlottesville NY 10001		CHECK NO. 6008		83-021011
PAYMENT REFERENCE 0000-3890.6058		DATE OF CHECK 05/30/24		
SEVEN THOUSAND NINE HUNDRED THREE AND 23/100 DOLLARS		CHECK AMOUNT \$7,003.23		83-021011
PAY TO THE ORDER OF Timothy Turbett MD PC 340 Henderson Ln Boone NC 28607		Sunflower Bank Salina, KS Memo:		
00006098 ⑆ 101100621⑆ 100038940⑆		AUTHENTIC SIGNATURE		

Serial 6098, Date 06/07, Amount \$7,903.23

Accordus Health at Lexington LLC 400 Delta Boulevard, Suite 202 Middletown NY 10901	CHECK NO. 6099	83-02/011
	PAYMENT REFERENCE 0000-3890-6099	DATE OF CHECK 05/30/24
SEVEN THOUSAND TWENTY THREE AND 36/100 DOLLARS		
PAY TO THE ORDER OF	TwinMed PO Box 947340 Los Angeles CA 90084-7340	CHECK AMOUNT \$2,023.36
SurfPower Bank Salina, KS		
Memo:		Authorized Signature

00006099 101006210100038940

Serial 6099, Date 06/05, Amount \$2,023.36

Accordia Health at Lexington LLC
400 Italia Boulevard, Suite 200
Monticello NY 10901

CHECK NO. 6100 83-62/1011

PAYMENT REFERENCE 0000-3890-6100

DATE OF CHECK 05/30/24

THREE HUNDRED ELEVEN AND 21/100 DOLLARS

CHECK AMOUNT \$311.21

PAY TO THE ORDER OF TwiMed
PO Box 947340
Los Angeles CA 90084-7340

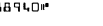
Sunflower Bank
Salina, KS

Memo:

Authorized Signature

00006100 430100624000389400

Serial 6100, Date 06/05, Amount \$311.21

THIS CHECK IS VOID WITHOUT A RED & BLUE BORDER AND BACKGROUND PLUS A KNIGHT & FINGERPRINT WATERMARK ON THE BACK - HOLD AT ANGLE TO VIEW	
Pine Acres Center For Nursing And Rehabilitation 278 Brian Center Dr Lexington, NC 27292	Sunflower Bank
6101	
Date 05-31-2024	
PAY TO THE ORDER OF	DIVISION OF MEDICAL ASSISTANCE
\$****1,892.00 USD	
Void After 180 Days	
One Thousand Eight Hundred Ninety Two and 00/100***** DIVISION OF MEDICAL ASSISTANCE 2022 MAIL SERVICE CENTER Raleigh, NC 27699	 <hr/> AUTHORIZED SIGNATURE
MEMO	
# 6 1 0 1 # * 1 0 1 0 0 6 2 1 1 : 1 0 0 0 3 8 9 4 0 *	

Serial 6101, Date 06/05, Amount \$1,892.00

THIS CHECK IS VOID WITHOUT A RED & BLUE BORDER AND BACKGROUND PLUS A KNIGHT & FINGERPRINT WATERMARK ON THE BACK. HOLD AT ANGLE TO VIEW

Pine Acres Center For Nursing And Rehabilitation
273 Brain Center Dr
Lexington, NC 27262

Sunflower Bank

6103

Date 06-05-2024


PAY TO THE ORDER OF North Carolina Healthcare Facilities Associates

\$***2,136.65
USD

Two Thousand One Hundred Thirty Six and 65/100****

North Carolina Healthcare Facilities Associates
6325 Falls of Neuse RD
Ste 35-259
Raleigh, NC 27615

Valid After 160 Days



MEMO 26254

AUTHORIZED SIGNATURE

⑈ 6 103⑈ ⑆10100624⑆100036940⑈

Serial 6103, Date 06/17, Amount \$2,136.65

Pin Area Center For Nursing And Rehabilitation Sunflower Bank
279 Brian Center Dr
Leansong, NC 27722

6104

PAY TO THE ORDER OF UNITED HEARTLAND

Six Hundred Seventy Six and 52/100****

UNITED HEARTLAND
PO Box 40790
Lansing, MI 48901

MEMO

Date 06-05-2024
\$***676.52
USD
Valid After 160 Days

392

AUTHORIZED SIGNATURE

⑈ 6 6 0 4 ⑈ ⑆ 0 0 1 1 0 0 6 2 ⑆ ⑆ 1 0 0 0 3 6 9 4 0 ⑈

Serial 6104, Date 06/10, Amount \$676.52

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank
279 Brian Center Dr
Lexington, NC 27292

6105

Date 06-05-2024
\$****,806.01
USD
Void After 180 Days


PAY TO THE Vista Clinical
ORDER OF

One Thousand Six Hundred Six and 01/100****

Vista Clinical
3705 South HWY 27
Suite 102
Clermont, FL 34711

MEMO

⑈ 6 105⑈ ⑆ 10 1006 2 1⑆ 1 00038940⑈



AUTHORIZED SIGNATURE

Serial 6105, Date 06/07, Amount \$1,606.01

[illegible]

Serial 6106, Date 06/17, Amount \$1,047.07

THIS CHECK IS VOID WITHOUT A STD. C. BLUE STRIPES AND BACKGROUND PLAGS & KNIGHT 2. FILLIGET/INT WATERMARK ON THE BACK - LOLE AT ANGLE TO VIEW

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank
279 Brian Center Dr
Lexington, NC 27292

6107

PAY TO THE ORDER OF Flag Star Staffing

Date 06-06-2024

\$****27,332.46
USD

Twenty Seven Thousand Three Hundred Thirty Two and 46/100****

Flag Star Staffing
117 Dilmas Avenue
Brooklyn, NY 11218

Void After 60 Days

BSJ

MEMO

AUTHORIZED SIGNATURE

⑈ 6107⑈ ⑆10100621⑆100038940⑈

Serial 6107, Date 06/07, Amount \$27,332.46

Accordis Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

CHECK NO. 6108

PAYMENT REFERENCE 0000-3890-6108 DATE OF CHECK 06/07/24

THREE HUNDRED AND 00/100 DOLLARS

CHECK AMOUNT \$300.00

PAY TO THE ORDER OF Apple Corp
PO Box 22784
New York NY 10067-2103

Sunflower Bank
Salina, KS

Memo:

00006108 ⑆101100621⑆100038940⑆ ⑈0000030000⑈

Serial 6108, Date 06/14, Amount \$300.00

Accordis Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

CHECK NO. 6110

PAYMENT REFERENCE 0000-3890-6110 DATE OF CHECK 06/07/24

ONE THOUSAND TWO HUNDRED SIXTY FIVE AND 70/100 DOLLARS

CHECK AMOUNT \$1,265.76

PAY TO THE ORDER OF ECOLAB Pest Elimination Division
26252 Network Place
Chicago IL 60675-1262

Sunflower Bank
Salina, KS

Memo:

00006110 ⑆101100621⑆100038940⑆ ⑈0000126576⑈

Serial 6110, Date 06/17, Amount \$1,265.76

Accordis Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

CHECK NO. 6111

PAYMENT REFERENCE 0000-3890-6111 DATE OF CHECK 06/07/24

TWO HUNDRED FIFTY SIX AND 93/100 DOLLARS

CHECK AMOUNT \$256.93

PAY TO THE ORDER OF Grainger
DEPT 88518386
P.O. BOX 419267
Kansas City MO 64141-6267

Sunflower Bank
Salina, KS

Memo:

00006111 ⑆101100621⑆100038940⑆

Serial 6111, Date 06/18, Amount \$256.93

Accordis Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

CHECK NO. 6113

PAYMENT REFERENCE 0000-3890-6113 DATE OF CHECK 06/07/24

NINE HUNDRED FIFTY THREE AND 65/100 DOLLARS

CHECK AMOUNT \$953.65

PAY TO THE ORDER OF LTC Power Solutions LLC
P.O. BOX 1709
Dania FL 33004

Sunflower Bank
Salina, KS

Memo:

00006113 ⑆101100621⑆100038940⑆

Serial 6113, Date 06/27, Amount \$953.65

Accordis Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

CHECK NO. 6115

PAYMENT REFERENCE 0000-3890-6115 DATE OF CHECK 06/07/24

ONE HUNDRED SIXTY THREE AND 52/100 DOLLARS

CHECK AMOUNT \$163.52

PAY TO THE ORDER OF The Home Depot Pro
PO Box 40466
Atlanta GA 30384-4466

Sunflower Bank
Salina, KS

Memo:

00006115 ⑆101100621⑆100038940⑆

Serial 6115, Date 06/17, Amount \$163.52

Accordis Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

CHECK NO. 6116

PAYMENT REFERENCE 0000-3890-6116 DATE OF CHECK 06/07/24

FIVE THOUSAND AND 00/100 DOLLARS

CHECK AMOUNT \$5,000.00

PAY TO THE ORDER OF Timothy Turbet MD PC
340 Hemdon Ln
Doone NC 28607

Sunflower Bank
Salina, KS

Memo:

00006116 ⑆101100621⑆100038940⑆

Serial 6116, Date 06/18, Amount \$5,000.00

Accordis Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

CHECK NO. 6117

PAYMENT REFERENCE 0000-3890-6117 DATE OF CHECK 06/07/24

SIXTY ONE AND 64/100 DOLLARS

CHECK AMOUNT \$61.64

PAY TO THE ORDER OF TwinMed
PO Box 847340
Los Angeles CA 90084-7340

Sunflower Bank
Salina, KS

Memo:

00006117 ⑆101100621⑆100038940⑆

Serial 6117, Date 06/17, Amount \$61.64

Accordis Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

CHECK NO. 6118

PAYMENT REFERENCE 0000-3890-6118 DATE OF CHECK 06/07/24

THREE THOUSAND ONE HUNDRED THIRTY THREE AND 69/100 DOLLARS

CHECK AMOUNT \$3,133.69

PAY TO THE ORDER OF TwinMed
PO Box 847340
Los Angeles CA 90084-7340

Sunflower Bank
Salina, KS

Memo:

00006118 ⑆101100621⑆100038940⑆

Serial 6118, Date 06/17, Amount \$3,133.69

Accordis Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

CHECK NO. 6121

PAYMENT REFERENCE 0000-3890-6121 DATE OF CHECK 06/07/24

TWO HUNDRED SIXTY SEVEN AND 16/100 DOLLARS

CHECK AMOUNT \$267.16

PAY TO THE ORDER OF Venture Respiratory, Inc.
630 Harmon Road
Jackson NJ 08527

Sunflower Bank
Salina, KS

Memo:

00006121 ⑆101100621⑆100038940⑆

Serial 6121, Date 06/21, Amount \$267.16

Accordis Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

CHECK NO. 6122

PAYMENT REFERENCE 0000-3890-6122 DATE OF CHECK 06/10/24

FIVE HUNDRED NINETY SIX AND 99/100 DOLLARS

CHECK AMOUNT \$596.99

PAY TO THE ORDER OF Streamline Verify
100 Boulevard of the Americas
Lakewood NJ 08701

Sunflower Bank
Salina, KS

Memo:

00006122 ⑆101100621⑆100038940⑆

Serial 6122, Date 06/18, Amount \$596.99

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6123
279 Brian Center Dr
Lexington, NC 27292

Date 06-10-2024
\$***3,068.88
USD
Void After 180 Days

PAY TO THE ORDER OF Vista Clinical
Three Thousand Sixty Eight and 88/100****

Vista Clinical
3705 South HWY 27
Suite 102
Clermont, FL 34711

MEMO

AUTHORIZED SIGNATURE

⑈ 6 1 2 3 ⑈ ⑆ 10 1 006 2 1 ⑆ 1 000 3 8 9 4 0 ⑈

Serial 6123, Date 06/12, Amount \$3,068.88

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6124
279 Brian Center Dr
Lexington, NC 27292

Date 06-10-2024
\$***1,003.47
USD
Void After 180 Days

PAY TO THE ORDER OF American Plan Administrators
One Thousand Three and 47/100****

American Plan Administrators
18 Heyward Street
Brooklyn, NY 11249

MEMO

AUTHORIZED SIGNATURE

⑈ 6 1 2 4 ⑈ ⑆ 10 1 006 2 1 ⑆ 1 000 3 8 9 4 0 ⑈

Serial 6124, Date 06/17, Amount \$1,003.47

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6125
279 Brian Center Dr
Lexington, NC 27292

Date 06-10-2024
\$***69,615.00
USD
Void After 180 Days

PAY TO THE ORDER OF DIVISION OF MEDICAL ASSISTANCE
Sixty Nine Thousand Six Hundred Fifteen and 00/100****

DIVISION OF MEDICAL ASSISTANCE
2022 MAIL SERVICE CENTER
Raleigh, NC 27699

MEMO

AUTHORIZED SIGNATURE

⑈ 6 1 2 5 ⑈ ⑆ 10 1 006 2 1 ⑆ 1 000 3 8 9 4 0 ⑈

Serial 6125, Date 06/18, Amount \$69,615.00

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6126
279 Brian Center Dr
Lexington, NC 27292

Date 06-11-2024
\$***723.67
USD
Void After 180 Days

PAY TO THE ORDER OF UnitedHealthcare
Seven Hundred Twenty Three and 67/100****

UnitedHealthcare
5505 N. Cumberland Ave, Ste. 307
Chicago, IL 60656-1471

MEMO

AUTHORIZED SIGNATURE

⑈ 6 1 2 6 ⑈ ⑆ 10 1 006 2 1 ⑆ 1 000 3 8 9 4 0 ⑈

Serial 6126, Date 06/20, Amount \$723.67

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6127
279 Brian Center Dr
Lexington, NC 27292

Date 06-14-2024
\$***21,412.00
USD
Void After 180 Days

PAY TO THE ORDER OF Flag Star Staffing
Twenty One Thousand Four Hundred Twelve and 00/100****

Flag Star Staffing
117 Dilmas Avenue
Brooklyn, NY 11218

MEMO

AUTHORIZED SIGNATURE

⑈ 6 1 2 7 ⑈ ⑆ 10 1 006 2 1 ⑆ 1 000 3 8 9 4 0 ⑈

Serial 6127, Date 06/20, Amount \$21,412.00

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6128
279 Brian Center Dr
Lexington, NC 27292

Date 06-14-2024
\$***2,500.71
USD
Void After 180 Days

PAY TO THE ORDER OF UNITED HEARTLAND
Two Thousand Five Hundred and 71/100****

UNITED HEARTLAND
PO Box 40790
Lansing, MI 48901

MEMO

AUTHORIZED SIGNATURE

⑈ 6 1 2 8 ⑈ ⑆ 10 1 006 2 1 ⑆ 1 000 3 8 9 4 0 ⑈

Serial 6128, Date 06/21, Amount \$2,500.71

Accordus Health at Lexington LLC 83-62/1011
400 Rella Boulevard, Suite 200
Montebello NY 10501

CHECK NO. 6130
DATE OF CHECK 06/18/24

PAYMENT REFERENCE 0000-3890-6130

THREE HUNDRED AND 00/100 DOLLARS

CHECK AMOUNT \$300.00

PAY TO THE ORDER OF Anglo Corp
PO Box 22784
New York NY 10087-2103

Sunflower Bank
Salina, KS

MEMO

AUTHORIZED SIGNATURE

⑈ 00006 1 3 0 ⑈ ⑆ 10 1 006 2 1 ⑆ 1 000 3 8 9 4 0 ⑈ ⑆ 00000 3 0000 ⑈

Serial 6130, Date 06/24, Amount \$300.00

Accordus Health at Lexington LLC 83-62/1011
400 Rella Boulevard, Suite 200
Montebello NY 10501

CHECK NO. 6131
DATE OF CHECK 06/18/24

PAYMENT REFERENCE 0000-3890-6131

ONE THOUSAND SIX HUNDRED FIVE AND 00/100 DOLLARS

CHECK AMOUNT \$1,605.00

PAY TO THE ORDER OF Bahnsen Mechanical Systems
2751 Commercial Park Court
Clemmons NC 27012

Sunflower Bank
Salina, KS

MEMO

AUTHORIZED SIGNATURE

⑈ 00006 1 3 1 ⑈ ⑆ 10 1 006 2 1 ⑆ 1 000 3 8 9 4 0 ⑈

Serial 6131, Date 06/25, Amount \$1,605.00

Accordus Health at Lexington LLC 83-62/1011
400 Rella Boulevard, Suite 200
Montebello NY 10501

CHECK NO. 6134
DATE OF CHECK 06/18/24

PAYMENT REFERENCE 0000-3890-6134

NINE HUNDRED SIXTEEN AND 85/100 DOLLARS

CHECK AMOUNT \$916.65

PAY TO THE ORDER OF Format Press Corp.
4601B 1st Ave
Brooklyn NY 11232

Sunflower Bank
Salina, KS

MEMO

AUTHORIZED SIGNATURE

⑈ 00006 1 3 4 ⑈ ⑆ 10 1 006 2 1 ⑆ 1 000 3 8 9 4 0 ⑈

Serial 6134, Date 06/26, Amount \$916.65

Accordus Health at Lexington LLC 83-62/1011
400 Rella Boulevard, Suite 200
Montebello NY 10501

CHECK NO. 6135
DATE OF CHECK 06/18/24

PAYMENT REFERENCE 0000-3890-6135

ONE THOUSAND TWO HUNDRED SIXTEEN AND 97/100 DOLLARS

CHECK AMOUNT \$1,216.97

PAY TO THE ORDER OF Grainger
DEPT 388163895
P.O. BOX 410297
Kansas City MO 64141-0297

Sunflower Bank
Salina, KS

MEMO

AUTHORIZED SIGNATURE

⑈ 00006 1 3 5 ⑈ ⑆ 10 1 006 2 1 ⑆ 1 000 3 8 9 4 0 ⑈

Serial 6135, Date 06/25, Amount \$1,216.97

CHECK NO. 6140 83-421011

Accordus Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

PAYMENT REFERENCE 0000-3890.6140

DATE OF CHECK 06/18/24

SIX HUNDRED SEVENTY NINE AND 45/100 DOLLARS

CHECK AMOUNT \$679.45

PAY TO THE ORDER OF N2 Fire Protection, LLC
264 Inglish Dr
Gastonia NC 28056

Sunflower Bank
Salina, KS

Memo:

00006140 ⑆ 101100621⑆ 100038940⑆

Serial 6140, Date 06/26, Amount \$679.45

CHECK NO. 6142 83-421011

Accordus Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

PAYMENT REFERENCE 0000-3890.6142

DATE OF CHECK 06/18/24

SEVEN HUNDRED NINETY AND 00/100 DOLLARS

CHECK AMOUNT \$790.00

PAY TO THE ORDER OF Pathous Health
130 Salem Towne Court
Apex NC 27502

Sunflower Bank
Salina, KS

Memo:

00006142 ⑆ 101100621⑆ 100038940⑆

Serial 6142, Date 06/25, Amount \$790.00

CHECK NO. 6145 83-421011

Accordus Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

PAYMENT REFERENCE 0000-3890.6145

DATE OF CHECK 06/18/24

ONE HUNDRED TWENTY ONE AND 89/100 DOLLARS

CHECK AMOUNT \$121.89

PAY TO THE ORDER OF TwinMed
PO Box 847340
Los Angeles CA 90084-7340

Sunflower Bank
Salina, KS

Memo:

00006145 ⑆ 101100621⑆ 100038940⑆

Serial 6145, Date 06/25, Amount \$121.89

CHECK NO. 6146 83-421011

Accordus Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

PAYMENT REFERENCE 0000-3890.6146

DATE OF CHECK 06/18/24

SEVEN HUNDRED SIXTY FIVE AND 00/100 DOLLARS

CHECK AMOUNT \$765.00

PAY TO THE ORDER OF Waste Waster Solutions, LLC
88 Chestnut Ridge Road, Unit 2
Montvale NJ 07645

Sunflower Bank
Salina, KS

Memo:

00006146 ⑆ 101100621⑆ 100038940⑆

Serial 6146, Date 06/25, Amount \$765.00

THIS CHECK IS VOID WITHOUT A PER-2-BLANK BORDER AND BACKGROUND PLUS A SIGNATURE AND FINGERPRINT WATERMARK ON THE BACK - HOLD AT ANGLE TO VIEW

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6147

279 Brian Center Dr
Lexington, NC 27292

Date 06-18-2024

PAY TO THE ORDER OF American Plan Administrators \$***2,711.54
USD

Two Thousand Seven Hundred Eleven and 54/100****

American Plan Administrators
18 Heyward Street
Brooklyn, NY 11249

MEMO

00006147 ⑆ 101100621⑆ 100038940⑆

Serial 6147, Date 06/20, Amount \$2,711.54

THIS CHECK IS VOID WITHOUT A PER-2-BLANK BORDER AND BACKGROUND PLUS A SIGNATURE AND FINGERPRINT WATERMARK ON THE BACK - HOLD AT ANGLE TO VIEW

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6148

279 Brian Center Dr
Lexington, NC 27292

Date 06-20-2024

PAY TO THE ORDER OF Flag Star Staffing \$***16,619.49
USD

Sixteen Thousand Six Hundred Nineteen and 49/100****

Flag Star Staffing
117 Dilmas Avenue
Brooklyn, NY 11218

MEMO

00006148 ⑆ 101100621⑆ 100038940⑆

Serial 6148, Date 06/21, Amount \$16,619.49

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6149

279 Brian Center Dr
Lexington, NC 27292

Date 06-20-2024

PAY TO THE ORDER OF American Plan Administrators \$***3,040.60
USD

Three Thousand Forty and 60/100****

American Plan Administrators
18 Heyward Street
Brooklyn, NY 11249

MEMO

00006149 ⑆ 101100621⑆ 100038940⑆

Serial 6149, Date 06/25, Amount \$3,040.60

THIS CHECK IS VOID WITHOUT A PER-2-BLANK BORDER AND BACKGROUND PLUS A SIGNATURE AND FINGERPRINT WATERMARK ON THE BACK - HOLD AT ANGLE TO VIEW

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6163

279 Brian Center Dr
Lexington, NC 27292

Date 06-21-2024

PAY TO THE ORDER OF A76700788 - KNIGHT, WILLIAM \$***6,803.36
USD

Six Thousand Eight Hundred Three and 36/100****

A76700788 - KNIGHT, WILLIAM
527 Meredith Ave
Lexington, NC 27292

MEMO A76700788 - KNIGHT, WILLIAM

00006163 ⑆ 101100621⑆ 100038940⑆

Serial 6163, Date 06/27, Amount \$6,803.36

THIS CHECK IS VOID WITHOUT A PER-2-BLANK BORDER AND BACKGROUND PLUS A SIGNATURE AND FINGERPRINT WATERMARK ON THE BACK - HOLD AT ANGLE TO VIEW

Pine Acres Center For Nursing And Rehabilitation Sunflower Bank 6166

279 Brian Center Dr
Lexington, NC 27292

Date 06-27-2024

PAY TO THE ORDER OF Flag Star Staffing \$***15,988.55
USD

Fifteen Thousand Nine Hundred Eighty Eight and 55/100****

Flag Star Staffing
117 Dilmas Avenue
Brooklyn, NY 11218

MEMO

00006166 ⑆ 101100621⑆ 100038940⑆

Serial 6166, Date 06/28, Amount \$15,988.55

CHECK NO. 9999 83-421011

Accordus Health at Lexington LLC
400 Rella Boulevard, Suite 200
Montebello NY 10901

PAYMENT REFERENCE 0000-3890.6094

DATE OF CHECK 05/30/24

TWO HUNDRED FIFTY ONE AND 20/100 DOLLARS

CHECK AMOUNT \$251.20

PAY TO THE ORDER OF Platinum Care
240 52nd Street
Brooklyn NY 11220

Sunflower Bank
Salina, KS

Memo:

00006094 ⑆ 101100621⑆ 100038940⑆

Serial 9999, Date 06/11, Amount \$251.20

Accordis Health of Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6114	83-42/1011
PAYMENT REFERENCE 0000-3890:6114		DATE OF CHECK 06/07/24	
NINETY FOUR AND 80/100 DOLLARS		CHECK AMOUNT \$94.80	
PAY TO THE ORDER OF Platinum Care 240 52nd Street Brooklyn NY 11220			
Sunflower Bank Salina, KS			
Memo:		Authorized Signature	
00006114 101006210100038940			

Serial 9999, Date 06/20, Amount \$94.80

Accordis Health of Lexington LLC 400 Rella Boulevard, Suite 200 Montebello NY 10901		CHECK NO. 6143	83-42/1011
PAYMENT REFERENCE 0000-3890:6143		DATE OF CHECK 06/18/24	
TWO HUNDRED EIGHTY FOUR AND 40/100 DOLLARS		CHECK AMOUNT \$284.40	
PAY TO THE ORDER OF Platinum Care 240 52nd Street Brooklyn NY 11220			
Sunflower Bank Salina, KS			
Memo:		Authorized Signature	
00006143 101006210100038940			

Serial 9999, Date 06/27, Amount \$284.40