



Account Number 8666926450 01 01 149 05 M0000 E# 0 Last Statement: 05/31/2024 This Statement: 06/28/2024

DNP

Customer Service 1-888-400-9009

GREENVILLE SNF LLC LOCAL DEPOSIT ACCT ATTN LISA LEVINS 368 NEW HEMPSTEAD ROAD, SUITE 309 NEW CITY NY 10956

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FULL ANALYSIS CHECKING

Account Summary Information

Statement Period 06/01/2024 - 06/28/2024 Statement Beginning Balance 19,377.44

Number of Deposits/Credits 30 Amount of Deposits/Credits 230,536.89

Number of Checks 0 Amount of Checks .00

Number of Other Debits 5 Amount of Other Debits 228,000.00

Statement Ending Balance 21,914.33

Number of Enclosures

Service Charge

.00

Deposits and Credits								
Date Customer Posted Reference	Amount	Description	Bank Reference					
06/03	1,272.86	Greenville SNF L DES:Settlement ID:000021025511178	55025150925					
06/03	2,012.29	INDN:Greenville Health & Re CO ID:9001499122 CCD BANKCARD DES:MTOT DEP ID:518993320356967 INDN:GREENVILLE HEALTH & RE CO ID:5921267939 CCD	55028991957					
06/03	4,302.05	Greenville SNF L DES:Settlement ID:000021014212058 INDN:Greenville Health & Re CO ID:9901499122 CCD	52027796285					
06/03	8,709.98	Greenville SNF L DES:Settlement ID:000021014250678 INDN:Greenville Health & Re CO ID:9001499122 CCD	52027796286					
06/04	3,046.00	BANKCARD DES:MTOT DEP ID:518993320356967 INDN:GREENVILLE HEALTH & RE CO ID:5921267939 CCD	55051122578					
06/04	3,204.00	Greenville SNF L DES:Settlement ID:000021045443514 INDN:Greenville Health & Re CO ID:9001499122 CCD	55053333224					
06/05	6,481.00	BANKCARD DES:MTOT DEP ID:518993320356967 INDN:GREENVILLE HEALTH & RE CO ID:5921267939 CCD	56029761942					
06/05	9,492.60	Greenville SNF L DES:Settlement ID:000021069584486 INDN:Greenville Health & Re CO ID:9001499122 CCD	56031444045					
06/05	10,300.94	Greenville SNF L DES:Settlement ID:000021066290526 INDN:Greenville Health & Re CO ID:9001499122 CCD	56031444046					
06/05	18,502.00	NDC SWEEP DES: FAC 139 ID: INDN: GREENVILLE SNF, LLC CO ID: 54-1194122 PPD	56026118448					
06/06	1,256.70	BANKCARD DES:MTOT DEP ID:518993320356967 INDN:GREENVILLE HEALTH & RE CO ID:5921267939 CCD	57025195112					
06/06	7,548.25	Greenville SNF L DES:Settlement ID:000021081657406 INDN:Greenville Health & Re CO ID:9001499122 CCD	57027051918					
06/07	100.00	Greenville SNF L DES:Settlement ID:000021101958002 INDN:Greenville Health & Re CO ID:9001499122 CCD	58028453811					
06/07	164.81	BANKCARD DES:MTOT DEP ID:518993320356967 INDN:GREENVILLE HEALTH & RE CO ID:5921267939 CCD	58027403299					
06/07	46,083.23	Greenville SNF L DES:Settlement ID:000021094640730 INDN:Greenville Health & Re CO ID:9001499122 CCD	58028453810					
06/11	3,104.00	NDC SWEEP DES: FAC 139 ID: INDN:GREENVILLE SNF, LLC CO ID: 54-1194122 PPD	62028927031					
06/12	640.00	Greenville SNF L DES:Settlement ID:000021136784838 INDN:Greenville Health & Re CO ID:9001499122 CCD	63026444233					
06/12	1,500.00	Greenville SNF L DES:Settlement ID:000021136796206 INDN:Greenville Health & Re CO ID:9001499122 CCD	63026444232					
06/13	1,568.00	Greenville SNF L DES:Settlement ID:000021141306274 INDN:Greenville Health & Re CO ID:9001499122 CCD	64030277470					

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	Depo	sits and Credits		
Date Posted	Customer Reference	Amount	Description	Bank Reference
06/14		2,109.10	NDC SWEEP DES:FAC 139 ID:	6501687421
06/18		182.00	INDN:GREENVILLE SNF, LLC CO ID:54-1194122 PPD Greenville SNF L DES:Settlement ID:000021173767234	6904583475
06/18		9,690.86	INDN:Greenville Health & Re CO ID:9001499122 CCD Greenville SNF L DES:Settlement ID:000021173765642	6904583475
06/20		43,361.23	INDN:Greenville Health & Re CO ID:9001499122 CCD Greenville SNF L DES:Settlement ID:000021180870022	70034005040
06/21		500.00	INDN:Greenville Health & Re CO ID:9001499122 CCD BANKCARD DES:MTOT DEP ID:518993320356967	7203588501
06/24		2,541.42	INDN:GREENVILLE HEALTH & RE CO ID:5921267939 CCD Greenville SNF L DES:Settlement ID:000021202421338	73030649389
06/24		21,072.29	INDN:Greenville Health & Re CO ID:9001499122 CCD Greenville SNF L DES:Settlement ID:000021202425186	73030649390
06/25		1,108.00	INDN:Greenville Health & Re CO ID:9001499122 CCD BANKCARD DES:MTOT DEP ID:518993320356967	76032979242
06/27		3,139.00	INDN:GREENVILLE HEALTH & RE CO ID:5921267939 CCD Greenville SNF L DES:Settlement ID:000021229588910 INDN:Greenville Health & Re CO ID:9001499122 CCD	7803364281
06/28		2,982.32	INDN:GREENVILLE SNF, LLC CO ID:9001499122 CCD INDN:GREENVILLE SNF, LLC CO ID:54-1194122 PPD	79021635556
06/28		14,561.96	Greenville SNF L DES:Settlement ID:000021242053938 INDN:Greenville Health & Re CO ID:9001499122 CCD	79027662133
	Withdi	rawals and Debi	ts	
Other 1	Debits			
Date <u>Posted</u>	Customer Reference	Amount	Description	Bank Reference
06/03		16,000.00	GREENVILLESNFLLC DES:PAYMENT ID:GREENVILLE	52015427960
06/11		125,000.00	INDN:GREENVILLE SNF LLC CO ID:270981378 CCD GREENVILLESNFLLC DES:PAYMENT ID:GREENVILLE	62024904598
06/18		9,000.00	INDN:GREENVILLE SNF LLC CO ID:270981378 CCD GREENVILLESNFLLC DES:PAYMENT ID:GREENVILLE	6903211876
06/25		54,000.00	INDN:GREENVILLE SNF LLC CO ID:270981378 CCD GREENVILLESNFLLC DES:PAYMENT ID:GREENVILLE	76022173578
06/26		24,000.00	INDN:GREENVILLE SNF LLC CO ID:270981378 CCD GREENVILLESNFLLC DES:PAYMENT ID:GREENVILLE INDN:GREENVILLE SNF LLC CO ID:270981378 CCD	77018982228
		Daily Balances		
Date	Ledger Balar	nce Collecte	ed Balance Date Ledger Balance Collected Bala	ance
05/31 06/03 06/04 06/05 06/06	19,377 19,674 25,924 70,701 79,506	1.62 1 1.62 2 1.16 7	9,377.44 06/07 125,854.15 125,854. 9,674.62 06/11 3,958.15 3,958. 5,924.62 06/12 6,098.15 6,098. 0,701.16 06/13 7,666.15 7,666. 9,506.11 06/14 9,775.25 9,775.	15 15 15

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Daily Balances						
Date	Ledger Balance	Collected Balance	Date	Ledger Balance	Collected Balance	
06/18 06/20	54,009.34	54,009.34	06/25 06/26	25,231.05 1,231.05	25,231.05 1,231.05	
06/21 06/24	54,509.34 78,123.05		06/27 06/28	4,370.05 21,914.33	4,370.05 21,914.33	

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IMPORTANT INFORMATION

CHANGE OF ADDRESS. Please call us at the customer service telephone number listed on the front of this statement to tell us about a change of address.

TERMS AND CONDITIONS. All deposits to, withdrawals from, or other transactions pertaining to your account(s) are subject to the terms and conditions of the agreement you received when you opened your account and any amendments thereto. Amendments to the agreement may be made from time to time in the manner stated therein.

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC TRANSFERS. If you think your statement or receipt is wrong or if you need more information about an electronic transfer (e.g., ATM transactions, direct deposits or withdrawals, point-of-sale transactions) on the statement or receipt, telephone or write us at the address or number listed on the front of this statement as soon you can. We must hear from you no later than 60 days after we sent you the FIRST statement on which the error or problem appeared.

* Tell us your name and account number

* Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe there is an error or why you need more information

* Tell us the dollar amount of the suspected error.

For consumer accounts used primarily for personal, family or household purposes, we will investigate your complaint and will correct any error promptly. If we take more than 10 business days (20 business days if you are a new customer, for electronic transfers occurring during the first 30 days after the first deposit is made to your account), to do this, we will re-credit your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

For other accounts, we investigate, and if we find we have made an error, we will make the appropriate adjustment to your account at the conclusion of our investigation.

DIRECT DEPOSITS.

If you have arranged to have direct deposits made to your account at least once every 60 days from the same person or company, you may call us at the telephone number listed on the front of this statement to find out if the deposit was made as scheduled.

REPORTING OTHER PROBLEMS.

You must examine your statement carefully and promptly. You are in the best position to discover errors and unauthorized transactions on your account. If you fail to notify us in writing of suspected problems or unauthorized transactions within the time periods specified in the deposit agreement (which periods are no more than 60 days after we make the statement available to you and in some cases are 30 days or less), we are not liable to you for, and you agree not to make a claim against us for the problems or unauthorized transactions transactions.