

Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2)

Filing under clause (ca) of sub-regulation (2) of regulation 13 the IBBI (Insolvency Resolution Process for Corporate Persons) Regulations, 2016

Sl No.	Category of Creditor	Summary of claims received		Summary of claims admitted		Amount of Contingent Claim	Amount of Claims not admitted	Amount of claims under verification	Details in Annexure	Remarks, if any
		No. of Claims	Amount	No. of Claims	Amount of claims admitted					
1	Secured Financial Creditors belonging to any class of creditors		NIL	NIL	NIL	NIL	NIL	NIL	Annexure-1	
2	Unsecured Financial Creditors belonging to any class of creditors		NIL	NIL	NIL	NIL	NIL	NIL	Annexure-2	
3	Secured Financial Creditors (other than financial creditors belonging to any class of creditors)	2	141,436,322.85	2	141,190,786.35	NIL	NIL	245,536.50	Annexure-3	Subject to further verification
4	Unsecured Financial Creditors (other than financial creditors belonging to any class of creditors)		NIL	NIL	NIL	NIL	NIL	NIL	Annexure-4	
5	Operational Creditors (Workmen)		NIL	NIL	NIL	NIL	NIL	NIL	Annexure-5	
6	Operational Creditors (Employees)		NIL	NIL	NIL	NIL	NIL	NIL	Annexure-6	
7	Operational Creditors (Government Dues)		NIL	NIL	NIL	NIL	NIL	NIL	Annexure-7	
8	Operational Creditors (Other than Workmen and Employees and Government Dues)		NIL	NIL	NIL	NIL	NIL	NIL	Annexure-8	
9	Other Creditors, if any (Other than financial Creditors and operational creditors)		NIL	NIL	NIL	NIL	NIL	NIL	Annexure-9	
	TOTAL	2	141,436,322.85	2	141,190,786.35	NIL	NIL	245,536.50		

For Four Care Hospital Private Limited
(Under CIRP)


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Annexure-1

Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2)

List of Secured Financial Creditors belonging to any class of Creditors

Sl No.	Name of Creditor	Details of Claim received			Details of Claims Admitted							Remarks, if any			
		Date of receipt	Amount Claimed	Amount of claim admitted	Nature of claim	Amount covered by security interest	Amount covered by guarantee	Whether related party?	% of voting share in CoC	Amount of contingent claim	Amount of any mutual dues, that may be set off		Amount of claim not admitted	Amount of Claim under Verification	
	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	
	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	
	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	

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Annexure-2

Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2)

SI No.	Name of Creditor	Date of Claim received			Details of Claims Admitted							Amount of contingent claim	Amount of any mutual dues, that may be set off	Amount of claim not admitted	Amount of Claim under Verification	Remarks, if any	
		Date of receipt	Amount Claimed	Amount of claim admitted	Nature of claim	Amount covered by guarantee	Whether related party?	% of voting share in CoC	Amount of claim	Amount of any mutual dues, that may be set off	Amount of claim not admitted						Amount of Claim under Verification
	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED. Date of commencement of CIRP: 22.01.2024. List of Creditors as on: 24.04.2024 (Version 2)

List of Secured Financial Creditors (other than financial creditors belonging to any class of creditors)

Sl No.	Name of Creditor	Date of Claim received			Details of Claims Admitted					Amount of contingent claim	Amount of any mutual dues, that may be set off	Amount of claim not admitted	Amount of Claim under Verification	Remarks, if any
		Date of receipt	Amount Claimed	Amount of claim admitted	Nature of claim	Amount covered by security interest	Amount covered by guarantee	Whether related party?	% of voting share in CoC					
1	Standard Chartered Bank	07.02.2024	8,30,76,826.00	8,30,30,382.00	Secured	8,30,30,382.00	1,06,94,934.00	NA	58.81%	-	-	-	46,444.00	The claims are subject to further revision, on the basis of any information, documents received and as per the best knowledge of the IRP/RP
2	The Mogaveera Co-Operative Bank Limited	08.02.2024	5,83,59,496.85	5,81,60,404.35	Secured	5,81,60,404.35	5,81,60,404.35	NA	41.19%	-	-	-	1,99,092.50	The claims are subject to further revision, on the basis of any information, documents received and as per the best knowledge of the IRP/RP
	TOTAL		14,14,36,322.85	14,11,90,786.35		14,11,90,786.35	6,88,55,338.35		100.00%				2,45,536.50	

SECURITY INTEREST

STANDARD CHARTERED BANK

MORTGAGED PROPERTIES:

Flat no.602, and 702 6th Floor and 7th Floor, Parshwa Kuni CHSL, Malvia Road Vile Parle East, Mumbai 400057 in the name of Mr. Babanna V. Sheregar and Dr. Satish Sheregar
The guarantee was given by/b the following: Mrs. Pooirima Satish Sheregar, Mr. Babanna Venkatraman Sheregar, M/s Four Care Hospital Private Limited

Name of the Guarantors for ECLIGS facilities of Rs. 1,06,94,934

Mrs. Pooirima Satish Sheregar
Mr. Babanna Venkatraman Sheregar
Four Care Hospital Private Limited

THE MOGAVEERA CO-OPERATIVE BANK LIMITED

Hypothecation of Plant & Machinery, Furniture, Fixtures & Equipments belonging to the company having Book Value of Rs. 165.01 lakhs as on 31.03.2019

Existing Equitable Mortgage of Properties:

- i. Office No.1, Ground floor, Vishnukrupa CHS Ltd., Mahant Vile Parle (E), Mumbai - 400 057, in the name of Dr. Satish B Sheregar & Mr. Babanna B. Sheregar.
ii. Office Premises No 101, Entire 1st floor, Vishnukrupa CHS Ltd., Mahant Road, Vile Parle (E), Mumbai- 400 057, in the name of Mr. Babanna B. Sheregar & Dr. Satish B. Sheregar.

Name of the Guarantors

1 Mr. Narendra C Panani

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All Directors in their personal capacity as on 31.12.2019, namely, Mr. Satish Sheregar, Mrs. Pornima Sheregar, and, Mr. Babanna Sheregar

Note: The above claims admitted are subject to further revision in the amount of the claim admitted as soon as may be practicable, on knowledge of any additional information warranting such revision in accordance with Regulation 14 of the IBBI (Insolvency Resolution Process for Corporate Debtor) Regulation, 2016 ("CIRP Regulations"). also, the details and ownership of properties are as per the claim documents submitted by the respective financial creditors. These are under examination.

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Annexure-4

Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; list of Creditors as on: 24.04.2024 (Version 2)

List of Unsecured Financial Creditors (other than financial creditors belonging to any class of creditors)

SI No.	Name of Creditor	Date of Claim received			Details of Claims Admitted							Amount of contingent claim	Amount of any mutual dues, that may be set off	Amount of claim not admitted	Amount of Claim under Verification	Remarks, if any	
		Date of receipt	Amount Claimed	Amount of claim admitted	Nature of claim	Amount covered by guarantee	Whether related party?	% of voting share in CoC	Amount of claim	Amount of any mutual dues, that may be set off	Amount of claim not admitted						Amount of Claim under Verification
	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
	Total	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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Annexure-5

Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2)

List of Operational Creditors (Workmen)

Sl No.	Name of Authorised representative, if any	Name of Workman	Date of Claim received		Details of Claims Admitted						Amount of contingent claim	Amount of any mutual dues, that may be set off	Amount of Claim under Verification	Amount of claim not admitted	Remarks, if any	
			Date of receipt	Amount Claimed	Amount of claim admitted	Nature of claim	Whether related party?	% of voting share in CoC								
NIL		NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
NIL		NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
TOTAL																

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Annexure-6

Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP : 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2)

List of Operational Creditors (Employees)

SI No.	Name of Authorised representative, if any	Name of Employee	Date of Claim received			Details of Claims Admitted				Amount of contingent claim	Amount of any mutual dues, that may be set off	Amount of Claim under Verification	Amount of claim not admitted	Remarks, if any	
			Date of receipt	Amount Claimed	Amount of claim admitted	Nature of claim	Whether related party?	% of voting share in CoC							
NIL		NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	
NIL		NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	
Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0

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Annexure-7

Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2)

Operational Creditors (Government Dues)

Sl No.	Details of Claimant			Details of Claim		Details of Claims Admitted					Amount of Claim		Remarks, if any	
	Department	Government		Date of receipt	Amount Claimed	Amount of claim admitted	Nature of claim	Whether related party?	% of voting share in CoC	Amount of contingent claim	Amount of any mutual dues, that may be set off	Amount of Claim under Verification		Amount of claim not admitted
1	NIL	NIL		NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
	NIL	NIL		NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Total		0		0	0	0	0	0	0	0	0	0	0	0

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Annexure-8

Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2)

List of Operational Creditors (Other than Workmen and Employees and Government Dues)

SI No.	Name of Creditor	Date of Claim			Details of Claims Admitted										Remarks, if any					
		Date of receipt	Amount Claimed	Amount of claim admitted	Nature of claim	Amount covered by security interest	Amount covered by guarantee	Whether related party?	% of voting share in CoC	Amount of contingent claim	Amount of any mutual dues, that may be set off	Amount of claim not admitted	Amount of Claim under Verification							
NIL		NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
NIL		NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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Annexure-9

Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2)

List of Other Creditors, if any (Other than financial Creditors and operational creditors)

Sl No.	Name of Creditor	Identification No.	Date of Claim		Details of Claims Admitted										Remarks, if any			
			Date of receipt	Amount Claimed	Amount of claim admitted	Nature of claim	Amount covered by security interest	Amount covered by guarantee	Whether related party?	% of voting share in CoC	Amount of contingent claim	Amount of any mutual dues, that may be set off	Amount of claim not admitted	Amount of Claim under Verification				
NIL		NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
NIL		NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL	NIL
Total		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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