| П | | S | | | | | | Γ | | 1 | | 1 |
|--|----------------------------|---------------------------------|---|---|--|--|---------------------------------|-----------------------------------|---|---|---|----------------|
| | | SI No. | 1 9 | 2 (| ω | 4 | 5 (| 6 | 7 | 8 E C | 9 (| _ |
| Filing under clause (ca) of sub-regulation (2) of regulation 13 the IBBI (Insolvency Resolution Process for Corporate Persons) Regulations, 2016 | | Category of Creditor | Secured Financial Creditors belonging to any class of creditors | Unsecured Financial Creditors belonging to any class of creditors | Secured Financial Creditors (other than financial creditors belonging to any class of creditors) | Unsecured Financial Creditors (other than financial creditors belonging to any class of creditors) | Operational Creditors (Workmen) | Operational Creditors (Employees) | Operational Creditors (Government Dues) | Operational Creditors (Other than Workmen and Employees and Government Dues) | Other Creditors, if any (Other than financial Creditors | TOTAL |
| egulation | Sumr | No. of Claims | | | 2 | | | | | | | 2 |
| (2) of regulation | Summary of claims received | Amount | NIL | NIL | 141,436,322.85 | NIL | NIL | NIL | NIL | NIL | NIL | 141,436,322.85 |
| 13 the IBBI (Ins | Summary of | No. of Claims | NIL | NIL | 2 | NIE | NIL | NIL | NIL | NIL | NIL | 2 |
| solvency Resolution | f claims admitted | Amount of claims admitted | NIL | NIL | 141,190,786.35 | NIL | NIL | NIL | NIL | NIL | NIL | 141.190.786.35 |
| Process for Co | Amount of | Contingent Claim | NIL | NIL | NIL | NIL | NIL | NIL | NIL | NIL | NIL | Z |
| orporate Persons) R | | not admitted | NIL | NIL | NIL | NIL | NIL | NIL | NIL | NIL | NIL | |
| egulations, 2016 | | not admitted under verification | NIL | NIL | 245,536.50 | NIL | NIL | NIL | NIL | NIL | N | 245.536.50 |
| (1) (1) | ; : | Details in Annexure | Annexure-1 | Annexure-2 | Annexure-3 | Annexure-4 | Annexure-5 | Annexure-6 | Annexure-7 | Annexure-8 | Annexure-9 | |
| | - | Remarks, it | | | Subject to further verification | | 2 | , | 1 | | | |

For Four Care Hospital Private Limited (Under CIRP)

(Under CIRP)

Correct Signatory
IRP/RP

| | | | SI No. | | | | |
|-------|----------------|------|--|-----------------------------------|--|---|------------|
| Total | NIL | NIL | Name of Creditor | | | Na | |
| 0 | NIL | NIL | Date of receipt | etails of C | | me of the | |
| 0 | NIL | NIL | Amount Claimed | etails of Claim receive | | Corporate I | |
| | NIL | NIL | Amount of claim admitted | 10 | |)ebtor: FOU | |
| 0 | NIL | NIL | Nature of claim | | | R CARE HOS | |
| 0 | NIL | NIL | Amount covered by security interest | Details of Cl | List of Secured Financial Creditors belon | PITAL PRIVATE L | = |
| 0 | NIL | NIL | Amount covered by guarantee | Details of Claims Admitted | nancial Credit | IMITED; Date | Ar |
| | NIL | NIL | Whether related party? | d | ors belonging | of Commence | Annexure-1 |
| | NIL | NIL | % of voting share in CoC | | nging to any class of Creditors | ment of CIRP: | |
| 0 | N _E | NIL | Amount of contingent claim | | Creditors | 22.01.2024; Lis | |
| 0 | NIL | NIL | mutual dues, that may be set off | Amount of any | | 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) | |
| 0 | NIL | NIL | Amount of claim not admitted | | | n: 24.04.2024 (| |
| 0 | NIL | NIL | Amount of Claim under Verification | | | Version 2) | |
| 0 | NIL | NIL. | Remarks, if any | < | | | |

For Four Care Hospital Private Limited (Under CIRP)

Authorised Signatory IRP/RP

| | | | SI | |
|-------|---------|-----|---|--|
| _ | | | SI No. | |
| Total | N. | NIL | Name of Creditor | lame of t |
| 0 | NI N | NIL | Date of Circle Date of receipt | he Corpora |
| 0 | NIL | NIL | Date of Claim received Date of Amount receipt Claimed | te Debtor: FO |
| 0 | NIL | NIL | Amount of claim admitted | UR CARE HOS |
| 0 | NIL | NIL | Nature of claim | PITAL PRIV |
| 0 | NIL | NIL | IPETAILS OF CIAIMS ADMITTED IFE OF COVERED BY Rela Im guarantee par | DSPITAL PRIVATE LIMITED; Date of Commencement of CIRP: 22.01.2024; List of Unsecured Financial Creditors belonging to any class of Creditors |
| 0 | NIL | NIL | Whether related party? | Date of Comme Creditors below |
| 0 | NIL | NIL | % of voting share in CoC | mencement o |
| 0 | NIL | NIL | Amount of contingent claim | f CIRP: 22.01 y class of Crec |
| 0 | NIL | NIL | Amount of any mutual dues, that may be set off | 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 belonging to any class of Creditors |
| 0 | NIL | NIL | Amount of claim not admitted | ors as on: 24.(|
| 0 | NIL | NIL | Amount of Claim under Verification |)4.2024 (Versi |
| 0 | NIL | NIL | Remarks, if any | on 2) |

For Four Care Hospital Private Limited (Under CIRP)

Authorised Signatory IRP/RP

| | 2 | ь | SI No. | |
|-----------------|---|---|--|---|
| TOTAL | The Mogaveera Co- Operative Bank Limited | Standard Chartered Bank | Name of Creditor | |
| | 08.02.2024 | 07.02.2024 | Date of Date of receipt | |
| 14,14,36,322.85 | 5,83,59,496.85 | 8,30,76,826.00 | Date of Claim received ste of | Name of the Corpor |
| 14,11,90,786.35 | 5,81,60,404.35 | 8,30,30,382.00 | Amount of claim admitted | rate Debtor: FOUR C |
| | Secured | Secured | Nature of claim | ARE HOSPIT |
| 14,11,90,786.35 | 5,81,60,404.35 | 8,30,30,382.00 | Details of Claims Admitted Amount covered by security interest by guaran | 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) |
| 6,88,55,338.35 | 5,81,60,404.35 | 1,06,94,934.00 | ms Admitted Amount covered by guarantee |); Date of Commender than financial cre |
| | N A | N _A | Whether % of voting related party? share in CoC | cement of CIRP: |
| 100.00% | 41.19% | 58.81% | % of voting share in CoC | t of CIRP: 22.01.2024; List of Credito belonging to any class of creditors) |
| | | , , , , , | Amount of contingent claim | t of Creditors creditors) |
| | | , | Amount of any mutual dues, that may be set off | as on: 24.04.202 |
| | | | Amount of claim not admitted | 4 (Version 2) |
| 2,45,536.50 | 1,99,092.50 | 46,444.00 | Amount of Claim under Verification | |
| 0 | The claims are subject to further revision, on the basis of any information, documents received and as perthe best knowledg of the IRP/RP | The claimsare subject to further revision, on the basis of any information, documents received and as per the best knowledg of the IRP/RP | Remarts, if any | |

STANDARD CHARTERED BANK

MORTGAGED PROPERTIES:

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

Four Care Hospital Private Limited Mrs. Poornima Satish Sheregar Mr. Babanna Venkatraman Sheregar Name of the Guarantors for ECLGS facilities of Rs. 1,06,94,934

Existing Equitable Mortgage of Properties: 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

. 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. . 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.

Mr. Narendra C Panani Name of the Guarantors

For Four Care Hospital Private Limited (Under CIRP)

Authorised Signatory IRP/RP

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

For Four Care Hospital Private Limited (Under CIRP)

(Under CIRP)

Authorised Signatory

IRP/RP

| | | T | S | | - | | |
|-------|-----|-----|--|-----------------------------------|--|---|------------|
| | | | SI No. | | Ha I | | |
| Total | NIL | NIL | Name of Creditor | | | | |
| 0 | NIL | NIL | Date of receipt | Date of Cla | | Name of the | |
| 0 | NIL | NIL | Amount Claimed | Date of Claim received | | ne Corporate | |
| 0 | NIL | NIL | Amount of claim Nature of Amount covered admitted claim by guarantee | | List of Uns | Debtor: FOUR CAF | |
| 0 | NIL | NIL | Nature of claim | Det | ecured Finar | RE HOSPITAL | 19 |
| 0 | NIL | NIL | Amount covered by guarantee | Details of Claims Admitted | List of Unsecured Financial Creditors (other than financial creditors belonging to any class of creditors) | PRIVATE LIMITED | |
| 0 | NIL | NIL | Whether % of voting related party? share in CoC | nitted | er than financial | ; Date of Comme | Annexure-4 |
| 0 | NIL | NIL | % of voting share in CoC | 1 | creditors belong | ncement of CIRP | 2 |
| 0 | NIL | NIL | contingent | Amount of | ging to any clas | 9: 22.01.2024; L | |
| 0 | NIL | NIL | mutual dues, that may be set off | Amount of any | s of creditors) | 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) | |
| 0 | NE. | Z | claim not admitted | Amount of | | 24.04.2024 (| |
| 0 | N. | NE. | under Verification | Amount of Amount of Claim | | Version 2) | |
| | NIL | NIL | Remarks, ii any | | | | |

For Four Care Hospital Private Limited (Under CIRP)

Authorised Signatory IRP/RP

| | | | SI No. | | | | | |
|-------|-----|-----|---|----------------------------|---------------------|---|------------|------|
| ТО | NIL | NIL | | | | | | |
| TOTAL | 1 7 | | representative, if any | Name of | | Name of the | | |
| | NIL | NIL | Workman | | 3 | Corporate De | | |
| | NIL | NIL | Date of receipt | Date of Cla | | btor: FOUR C | | |
| | NIL | NIL | Amount Claimed | Date of Claim received | | Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date of | | |
| | NIL | NIL | Amount of Natural claim admitted claim | | List of | | | |
| | NIL | NIL | Nature of claim | Details of Cl | Details of Cla | List of Operational | _ | Anne |
| | NIL | NIL | Whether % of voting related party? share in CoC | Details of Claims Admitted | Creditors (Workmen) | Commencement | Annexure-5 | |
| | NIL | NIL | % of voting share in CoC | | men) | of CIRP: 22.01. | | |
| | NIL | NIL | contingent claim | Amount of contingent | | | | |
| | NIL | NIL | that may be set off | Amount of any | | Commencement of CIRP: 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2) | | |
| | NIL | NIL | Claim under Verification | Amount of | | 24.04.2024 (V | | |
| | NIL | NIL | claim not admitted | Amount of | | ersion 2) | | |
| | NIL | NIL | if any | Pomprks | | | | |

For Four Care Hospital Private Limited (Under CIRP)

Authorised Signatory
IRP/RP

| | | Т | 10 | | | | _ |
|-------|------|-----|--|------------------------|--|---|------------|
| - 8 | | | SI No. | | | | |
| Total | NIL | NIL | Authorised Name of representative, if Employee any | Name of | | Name of t | |
| 0 | NIL | NIL | Name of Employee | | | he Corporat | |
| 0 | NIL | NIL | Date of receipt | Date of C | | e Debtor: F | |
| 0 | NIL | NIL | Amount Claimed | Date of Claim received | | OUR CARE HO | |
| 0 | NIL | NIL | Amount of claim admitted | | List | 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) | |
| 0 | NIL | NIL | Nature of claim | Details of Cla | of Operation | /IITED; Date | A |
| 0 | NIL | NIL | Whether % of voting related party? share in CoC | laims Admitted | List of Operational Creditors (Employees) | of Commencem | Annexure-6 |
| 0 | NIL | NIL | % of voting share in CoC | | ployees) | ent of CIRP: 22.0 | |
| 0 | NIL | NIL | contingent claim | Amount of | | 01.2024; List of | |
| 0 | NIL | NIL | mutual dues, that may be set off | Amount of any | | Creditors as on: 2 | |
| 0 | NIL. | NIL | | Amount of | | 24.04.2024 (Vers | |
| 0 | NI- | NIL | claim not admitted | Amount of | | ion 2) | |
| 0 | NIL | NIL | Remarks, if any | | | | |

For Four Care Hospital Private Limited
(Under CIRP)

Authorised Signatory
IRP/RP

| | | 1 | | SI No. | | | | |
|-------|------|-----|-----------------------------|--|-----------------------------------|--|---|-------------|
| Total | NIL | NIL | pepartillelit government | Donortmont | Details of Claimant | | | |
| 0 | NIL | NIL | GOVERNMENT | Government. | Claimant | | Name of th | |
| 0 | NIL | NIL | receipt | Date of | Date | | ne Corpo | |
| 0 | NIL | NIL | Claimed | Amount | Date of Claim | | ate Debto | |
| 0 | NIL | NIL | receipt Claimed admitted | Date of Amount Amount of claim Nature of Whether | | | r: FOUR CARE HO | |
| 0 | NIL | NIL | claim | Nature of | Details of (| | SPITAL PRIVA | |
| 0 | NIL | NIL | related party? share in CoC | Whether | Details of Claims Admitted | Operational Cr | ATE LIMITED; Dai | |
| | NIF | NIL | share in CoC | % of voting | | Operational Creditors (Government Dues) | te of Commencer | Allicadie-/ |
| 0 | NIL. | Z | claim | contingent | Amount of | nent Dues) | nent of CIRP: 22 | |
| 0 | NIL | NIL | off | contingent dues, that may be set | Amount of Amount of any mutual | | 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) | |
| 0 | NIL | NIL | | under Verification | Amount of Claim | | ors as on: 24.04.2024 | |
| 0 | NIL | NIL | | | Amount of claim | | (Version 2) | |
| 0 | NIL | NIL | | Remarks, if any | | | | |

For Four Care Hospital Private Limited
(Under CIRP)

Authorised Signatory
IRP/RP

| | | ***** | | | | | Alleria State | |
|--|-------|-------|------|--|----------------------------|--|--|------------|
| | | | | | SI No. | | | |
| THE RESIDENCE OF THE PROPERTY OF THE PERSON | Total | NIL | NIL | Creditor | Name of | | | |
| COMPANY OF THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS N | 0 | NIL | NIL | Date of receipt | Date | | | |
| NAME OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY. | 0 | NIL | NIL | Amount Claimed | Date of Claim | | Name of the | |
| THE PERSONNELS OF THE PERSON NAMED OF THE PERS | 0 | NIL | NIL | Amount of claim admitted | | | Corporate Debto | |
| STREET, STREET | 0 | NIL | NIL | Nature of claim | e 2 | List o | r: FOUR CAR | |
| | 0 | NIL | NIL | Amount of claim Nature of Amount covered by admitted claim security interest | Details of Claims Admitted | List of Operational Creditors (Other than Workmen and Employees and Government Dues) | Name of the Corporate Debtor: FOUR CARE HOSPITAL PRIVATE LIMITED; Date | |
| | 0 | NIL | NIL | Amount covered by guarantee | ns Admitted | (Other than Wo | IMITED; Date of | Ailli |
| | 0 | NIL | NIL | Whether related party? | | rkmen and Em | Commenceme | IIIEVALE-0 |
| | 0 | NIL | NIL | % of voting share in CoC | | ployees and Gove | nt of CIRP: 22.01.2 | |
| | 0 | NIL | NIL | contingent claim | Amount of | rnment Dues) | 024; List of Cr | |
| | 0 | NIL | NIL | mutual dues, that may be set off | Amount of any | | of Commencement of CIRP: 22.01.2024; List of Creditors as on: 24.04.2024 (Version 2) | |
| The second secon | 0 | NIL | NIL. | claim not admitted | Amount of | | 024 (Version 2 | |
| | 0 | NIL | NIL | Claim under Verification | Amount of | | | |
| | 0 | NIL | NIL | any | Remarks, if | | | |

For Four Care Hospital Private Limited (Under CIRP)

(Under CIRP)
horised Signatory

| | | | SI No. | | | | |
|-------|------|------|---|-----------------------------------|--|---|------------|
| Total | NIL | NIL | Name of Creditor | | | | |
| C | NIL | NIL | Identification No. | | | Name of the Co | |
| 0 | NIL | NIL | Date of receipt | Date o | | porate De | |
| | NIL | NIL | Amount Claimed | Date of Claim | | btor: FOUR | |
| 0 | NIL | NIL | Amount of claim admitted | | Lis of Othe | CARE HOSPI | |
| 0 | NIL | NIL | Nature of claim | | r Creditors, | TAL PRIVAT | ā |
| 0 | NIL | NIL | Amount Nature of covered by claim security interest | Details of Claims Admitted | Lis of Other Creditors, if any (Other than fir | TE LIMITED; Dat | |
| 0 | NIL. | NIL | Amount covered by guarantee | ms Admitted | han financial C | te of Commend | Annexure-9 |
| | NIL | NIL | Whether related party? | | reditors and | ement of C | |
| 0 | NE. | NIL | % of voting share in CoC | | operation | IRP: 22.01.2 | |
| 0 | NIL. | NIL | Amount of contingent claim | | nancial Creditors and operational creditors) | 2024; List of C | |
| 0 | NIL | NIL | mutual dues, that may be set off | Amount of any | | 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) | |
| 0 | NIL | NIL. | Amount of claim not admitted | | | 1.04.2024 (Vei | |
| 0 | NIL | NIL | Amount of Claim under Verification | | | rsion 2) | |
| 0 | NIL | NIL | Remarks, if any | | | | |

For Four Care Hospital Private Limited
(Under CIRP)

Authorised Signatory
IRP/RP