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IN THE UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

CASE NAME: <u>Hartford Computer Government, Inc.</u> CASE NO.: <u>11-49752</u>

U. S. TRUSTEE QUARTERLY REPORT ON STATUS OF PLAN PAYMENTS

	FOR	CALENDAR QUARTER I	ENDING <u>S</u>	EPT. 30, 2018
1.	Were any payments is under the plan this pa	•	yes	no <u>X</u>
2.	If yes, were all require	red payments made?	yes	no
3.	_	not, on a separate schedule, state the name, address and telephone number of each unpaid reditor, the amount due and the reason payment was not made.		
perjur U.S. 7	y under the laws of the Crustee Quarterly Repo	e United States that I have r	ead and cer	nfirmed plan declare under penalty of rtify that the information listed in this nd correct as of the date of this report
DATE	ED: <u>10/17/2018</u>	For the Debtor in Possessi	on (Trustee	e) (Plan Administrator)
capaci	or type name and ity of person signing eclaration).	Peter Kravitz Managing Principal of SL	TNTRST L	LC acting as Liquidating Trustee

EXHIBIT "E"

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U. S. TRUSTEE QUARTERLY FEE STATEMENT Pursuant to Fed. R. Bankr. P. 2015(a)(5)

CASE NAME: Hartford Computer Government, Inc. CASE NO.: 11-49752

FOR CALENDAR QUARTER ENDING SEPT. 30, 2018

DISBURSEMENTS*

1.	MONTH	DISDURSEMENTS	DISBURSEMENTS
	<u>July 2018</u>		<u>\$ 0.00</u>
	<u>August 2018</u>		<u>\$ 0.00</u>
	September 2018		\$ 0.00
	TOTAL DISBUF FOR QUARTER	· · · · · · · · · · · · · · · · · · ·	\$ 0.00
2.	QUARTERLY FEE OWED PU 28 U.S.C. § 1930(A)(6)	RSUANT TO	<u>\$ 325.00</u>
3.	QUARTERLY FEE PAID (Attach proof of payment)		\$
4.	AMOUNT OF UNPAID FEES	(IF ANY)	\$ 325.00

I, <u>Peter Kravitz</u>, acting as the duly authorized agent for the Debtor in Possession (Trustee) (Plan Administrator) declare under penalty of perjury under the laws of the United States that I have read and certify that the figures, statements, disbursement itemizations, and account balances as listed in this U.S. Trustee Quarterly Fee Statement are true and correct as of the date of this report to the best of my knowledge, information and belief.

DATED: 10/17/2018

For the Debtor in Possession (Trustee) (Plan administrator)

(Print or type name and capacity of person signing this Declaration).

Peter Kravitz

^{*} For periods subsequent to plan confirmation, this includes payments pursuant to the confirmed plan as well as all other disbursements.

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IN THE UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

CASE NAME: <u>Hartford Computer Goup, Inc.</u> CASE NO.: <u>11-49750</u>

$\hbox{U. S. TRUSTEE QUARTERLY REPORT ON STATUS OF PLAN PAYMENTS } \\$

	FOR	CALENDAR QUARTER	R ENDING <u>S</u>	SEPT. 30, 2018
1.	Were any payments runder the plan this pa	-	yes	noX
2.	If yes, were all require	red payments made?	yes	no
3.	If not, on a separate schedule, state the name, address and telephone number of each unpaid creditor, the amount due and the reason payment was not made.			
perjur U.S. T	y under the laws of the rustee Quarterly Repo	e United States that I have	e read and ce	nfirmed plan declare under penalty of ertify that the information listed in this and correct as of the date of this report
DATE	ED: <u>10/17/2018</u>	For the Debtor in Posses	ssion (Truste	e) (Plan Administrator)
capaci	or type name and ty of person signing eclaration).	Peter Kravitz Managing Principal of S	LTNTRST I	LLC acting as Liquidating Trustee

EXHIBIT "E"

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U. S. TRUSTEE QUARTERLY FEE STATEMENT Pursuant to Fed. R. Bankr. P. 2015(a)(5)

CASE NAME: Hartford Computer Goup, Inc. CASE NO.: 11-49750

FOR CALENDAR QUARTER ENDING SEPT. 30, 2018

DISBURSEMENTS*

1.	MONTH	DIBBORDENIE	DISBURSEMENTS
	<u>July 2018</u>		<u>\$ 0.00</u>
	<u>August 2018</u>		\$ 0.00
	September 2018		\$ 0.00
	TOTAL DISBUF FOR QUARTER		<u>\$ 0.00</u>
2.	QUARTERLY FEE OWED PU 28 U.S.C. § 1930(A)(6)	RSUANT TO	<u>\$ 325.00</u>
3.	QUARTERLY FEE PAID (Attach proof of payment)		\$
4.	AMOUNT OF UNPAID FEES	(IF ANY)	<u>\$ 325.00</u>

I, <u>Peter Kravitz</u>, acting as the duly authorized agent for the Debtor in Possession (Trustee) (Plan Administrator) declare under penalty of perjury under the laws of the United States that I have read and certify that the figures, statements, disbursement itemizations, and account balances as listed in this U.S. Trustee Quarterly Fee Statement are true and correct as of the date of this report to the best of my knowledge, information and belief.

DATED: 10/17/2018

For the Debtor in Possession (Trustee) (Plan administrator)

(Print or type name and capacity of person signing this Declaration).

Peter Kravitz

^{*} For periods subsequent to plan confirmation, this includes payments pursuant to the confirmed plan as well as all other disbursements.

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IN THE UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

CASE NAME: <u>Hartford Computer Hardware, Inc.</u> CASE NO.: <u>11-49744</u>

U. S. TRUSTEE QUARTERLY REPORT ON STATUS OF PLAN PAYMENTS

	FOR	CALENDAR QUARTER EN	DING <u>SE</u>	PT. 30, 2018
1.	Were any payments runder the plan this pa	-	yes	_ noX
2.	If yes, were all requir	ed payments made?	yes	_ no
3.	If not, on a separate schedule, state the name, address and telephone number of each unpaid creditor, the amount due and the reason payment was not made.			
perjury U.S. T	under the laws of the rustee Quarterly Report	United States that I have read	d and certi	irmed plan declare under penalty of ify that the information listed in this d correct as of the date of this report
DATE	D: <u>10/17/2018</u>	For the Debtor in Possession	(Trustee)	(Plan Administrator)
capaci	or type name and ty of person signing eclaration).	Peter Kravitz Managing Principal of SLTN	ITRST LL	C acting as Liquidating Trustee

EXHIBIT "E"

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U. S. TRUSTEE QUARTERLY FEE STATEMENT Pursuant to Fed. R. Bankr. P. 2015(a)(5)

CASE NAME: Hartford Computer Hardware, Inc. CASE NO.: 11-49744

FOR CALENDAR QUARTER ENDING SEPT. 30, 2018

DISBURSEMENTS*

1	. MONTH	DISBURSEMENTS
	<u>July 2018</u>	<u>\$ 975.00</u>
	<u>August 2018</u>	<u>\$ 0.00</u>
	September 2018	\$ 0.00
	TOTAL DISBURSEMENTS FOR QUARTER	\$ 975.00
2.	QUARTERLY FEE OWED PURSUANT TO 28 U.S.C. § 1930(A)(6)	\$ 325.00
3.	QUARTERLY FEE PAID (Attach proof of payment)	\$
4.	AMOUNT OF UNPAID FEES (IF ANY)	<u>\$ 325.00</u>

I, <u>Peter Kravitz</u>, acting as the duly authorized agent for the Debtor in Possession (Trustee) (Plan Administrator) declare under penalty of perjury under the laws of the United States that I have read and certify that the figures, statements, disbursement itemizations, and account balances as listed in this U.S. Trustee Quarterly Fee Statement are true and correct as of the date of this report to the best of my knowledge, information and belief.

DATED: <u>10/17/2018</u>

For the Debtor in Possession (Trustee) (Plan administrator)

(Print or type name and capacity of person signing this Declaration).

Peter Kravitz

^{*} For periods subsequent to plan confirmation, this includes payments pursuant to the confirmed plan as well as all other disbursements.

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IN THE UNITED STATES BANKRUPTCY COURT FOR THE NORTHERN DISTRICT OF ILLINOIS **EASTERN DIVISION**

CASE NAME: <u>Nexicore Services</u>, <u>LLC</u> CASE NO.: <u>11-49754</u>

U. S. TRUSTEE QUARTERLY REPORT ON STATUS OF PLAN PAYMENTS

FOR CALENDAR QUARTER ENDING <u>SEPT. 30, 2018</u>				
1.	Were any payments runder the plan this pa	-	yes	_no <u>X</u>
2.	If yes, were all requir	ed payments made?	yes	_ no
3.	If not, on a separate schedule, state the name, address and telephone number of each unpaid creditor, the amount due and the reason payment was not made.			
I, <u>Peter Kravitz</u> , acting as the duly authorized agent under the confirmed plan declare under penalty of perjury under the laws of the United States that I have read and certify that the information listed in this U.S. Trustee Quarterly Report on Status of Plan Payments is true and correct as of the date of this report to the best of my knowledge, information and belief.				
DATE	D: <u>10/17/2018</u>	For the Debtor in Possession	(Trustee)	(Plan Administrator)
capaci	or type name and ty of person signing eclaration).	Peter Kravitz Managing Principal of SLTN	ITRST LL	C acting as Liquidating Trustee

EXHIBIT "E"

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U. S. TRUSTEE QUARTERLY FEE STATEMENT Pursuant to Fed. R. Bankr. P. 2015(a)(5)

CASE NAME: Nexicore Services, LLC CASE NO.: 11-49754

FOR CALENDAR QUARTER ENDING SEPT. 30, 2018

DISBURSEMENTS*

1.	MONTH	DISDURSEMENTS	DISBURSEMENTS
	<u>July 2018</u>		<u>\$ 0.00</u>
	<u>August 2018</u>		<u>\$ 0.00</u>
	September 2018		\$ 0.00
	TOTAL DISBUF FOR QUARTER	· · · · · · · · · · · · · · · · · · ·	\$ 0.00
2.	QUARTERLY FEE OWED PU 28 U.S.C. § 1930(A)(6)	RSUANT TO	<u>\$ 325.00</u>
3.	QUARTERLY FEE PAID (Attach proof of payment)		\$
4.	AMOUNT OF UNPAID FEES	(IF ANY)	\$ 325.00

I, <u>Peter Kravitz</u>, acting as the duly authorized agent for the Debtor in Possession (Trustee) (Plan Administrator) declare under penalty of perjury under the laws of the United States that I have read and certify that the figures, statements, disbursement itemizations, and account balances as listed in this U.S. Trustee Quarterly Fee Statement are true and correct as of the date of this report to the best of my knowledge, information and belief.

DATED: 10/17/2018

For the Debtor in Possession (Trustee) (Plan administrator)

(Print or type name and capacity of person signing this Declaration).

Peter Kravitz

^{*} For periods subsequent to plan confirmation, this includes payments pursuant to the confirmed plan as well as all other disbursements.