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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 CA	LENDAR QUARTER ENDI	ING SEPTEMBER 30, 2019	
1.	Were any payments r under the plan this pa	•	yes no <u>X</u>	
2.	If yes, were all requir	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 Trustee Quarterly Repo	e United States that I have rea	der the confirmed plan declare under penalty ead and certify that the information listed in the ts is true and correct as of the date of this reports	nis
DATE	ED: <u>10/18/19</u>	For the Debtor in Possession	on (Trustee) (Plan Administrator)	
capaci	or type name and ty of person signing eclaration).	Peter Kravitz Managing Principal of SLT	ENTRST LLC acting as Liquidating Trustee	

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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 SEPTEMBER 30, 2019

DISBURSEMENTS*

1.	MONTH	DISDURSEMENTS	DISBURSEMENTS
	<u>July 2019</u>		<u>\$ 0.00</u>
	August 2019		\$ 0.00
	September 2019		\$ 0.00
	TOTAL DISBUI 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)	\$ 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: <u>10/18/19</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>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 ENDING <u>SEPTEMBER 30, 2019</u>

1.	Were any payments rounder the plan this pa	-	yes	_ no <u>X</u>	
2.	If yes, were all require	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 rea	d and cert	Firmed plan declare under penalty of tify that the information listed in this ad correct as of the date of this report	
DATE	D: <u>10/18/19</u>	For the Debtor in Possession	n (Trustee)	(Plan Administrator)	
capaci	or type name and ty of person signing eclaration).	Peter Kravitz Managing Principal of SLT	NTRST LI	LC acting as Liquidating Trustee	

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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 SEPTEMBER 30, 2019

DISBURSEMENTS*

1.	MONTH	BISB CHOENTER (15	DISBURSEMENTS
	<u>July 2019</u>		<u>\$ 0.00</u>
	<u>August 2019</u>		\$ 0.00
	September 2019		\$ 0.00
	TOTAL DISBUR FOR QUARTER	SEMENTS	<u>\$ 0.00</u>
2.	QUARTERLY FEE OWED PUR 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: 10/18/19

Vorthe Debte in Passassian (Trustee) (Plan administra

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 ENDING SEPTEMBER 30, 2019

	1 010 61 11	ENDING COINCIEN ENDING	O <u>BEI I E</u>	MVIDER 30, 2017	
1.	Were any payments re under the plan this pa	-	yes	_ no <u>X</u>	
2.	If yes, were all require	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>10/18/19</u>	For the Debtor in Possession	(Trustee)	(Plan Administrator)	
capacit	or type name and cy of person signing eclaration).	Peter Kravitz Managing Principal of SLTN	TRST LL	.C acting as Liquidating Trustee	

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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 SEPTEMBER 30, 2019

DISBURSEMENTS*

1.	MONTH		DISBURSEMENTS
	<u>July 2019</u>		<u>\$ 975.00</u>
	<u>August 2019</u>		<u>\$ 0.00</u>
	September 2019		<u>\$ 0.00</u>
	TOTAL DISBUR FOR QUARTER	SEMENTS	<u>\$ 975.00</u>
2.	QUARTERLY FEE OWED PUI 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: 10/18/19

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

U. S. TRUSTEE QUARTERLY REPORT ON STATUS OF PLAN PAYMENTS FOR CALENDAR QUARTER ENDING <u>SEPTEMBER 30, 2019</u>

1.	Were any payments re	equired to be made		
	under the plan this pa	st calendar quarter?	yes	noX
2.	If yes, were all requir	ed payments made?	yes	no
3.	-	chedule, state the name, ad lue and the reason paymen		lephone number of each unpaid ade.
perjury U.S. T	under the laws of the rustee Quarterly Report	United States that I have	read and cer	firmed plan declare under penalty of tify that the information listed in this and correct as of the date of this report
DATE	D: <u>10/18/19</u>	For the Debtor in Possess	ion (Trustee) (Plan Administrator)
•	or type name and by of person signing	Peter Kravitz		
this De	eclaration).	Managing Principal of SL	<u>TNTRST L</u>	LC acting as Liquidating Trustee

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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 SEPTEMBER 30, 2019

DISBURSEMENTS*

1.	MONTH	DISBURSEMENTS
	<u>July 2019</u>	\$ 0.00
	<u>August 2019</u>	\$ 0.00
	September 2019	\$ 0.00
	TOTAL DISBURSEMENTS FOR QUARTER	<u>\$ 0.00</u>
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)	\$ 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: 10/18/19

For the Debter in Respection (Trustee) (Plan administrate

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.